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## **REVISED EUROPEAN SOCIAL CHARTER**

7th National Report on the implementation of  
the European Social Charter (revised)

submitted by

**THE GOVERNMENT OF BULGARIA**

(Articles 3, 12 and 13  
for the period 01/01/2005 – 31/12/2007 ;  
Articles 11 and 14  
for the period 01/01/2003 – 31/12/2007)

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**CYCLE 2009**





**REPUBLIC OF BULGARIA**  
**MINISTRY OF LABOUR AND SOCIAL POLICY**

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**NATIONAL REPORT**

Made by the Government of Republic of Bulgaria in accordance with Article C of the European Social Charter, on the measures taken to give effect to the accepted provisions of the Revised European Social Charter.

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## **PREFACE**

The present Report has been prepared after consultations and in cooperation with the relevant authorities.

In accordance with Article C of the Revised European Social Charter, copy of this Report has been communicated to the national representative organizations of employers' and workers' presented in National Council for Tripartite Cooperation.

The present Report contains information for the following provisions of the ESC (r): Art. 3&1-4, Art.11&1-3, Art.12&1 and 3, Art.13&1-3, Art.14&1 and 2.

The Bulgarian national currency is leva (BGN) and its exchange rate is fixed to the Euro at 1.95583 BGN for 1 Euro (0.511292 Euro for 1 BGN).

Bulgaria is at disposal for any supplementary questions and clarifications, which may appear in the process of examination of the present Report.

## **II. PROVISIONS OF THE EUROPEAN SOCIAL CHARTER (revised)**

### **Article 3 – The right to safe and healthy working conditions**

#### **Information to be submitted**

#### **Article 3§1**

**1) Please describe the national policy on occupational health and safety and the consultation with employers' and workers' organisations in formulating this policy. Please specify the nature of, reasons for and extent of any reforms.**

Occupational safety and health is one of the priorities of social policy in Bulgaria. It is aimed at preserving the health, the ability to work and the life of workers.

Policy in the field of occupational health and safety is in conformity with:

- the Lisbon Strategy for synergy between policies aimed at achieving economic growth, creating quality employment, modernising social protection, and promoting sustainable development and thus the necessity to reconsider working conditions, organisation of labour and possibilities reconcile lifelong learning and work;
- the European Strategy on Health and Safety at Work which places an emphasis on the promotion of providing 'welfare at work'; and
- the International Labour Organization's Global Strategy which places a sign of equality between decent work and safe work and calls for fair Globalization.

Following the main directions and principles of the abovementioned strategic documents, the activities for provision of occupational health and safety are aimed at:

- promoting the provision of 'welfare at work';
- improving the culture of prevention amongst workers and development of a system of prevention through improving legislation, training and education, social dialogue, general social responsibility, economic initiatives, partnership between all stakeholders;
- carrying out thorough and effective integrated control on the observation of labour legislation;
- provision of quality training in the field of safe and healthy working conditions;
- broadening the infrastructure of services for employers' consultancy and assistance and improving the quality of this activity;
- development of security systems and insurance activity and efficient inclusion thereof in the efforts on ensuring and maintaining safe and healthy working conditions in the enterprises.

In order to successfully develop the activity on occupational health and safety, the Healthy and Safe Working Conditions Act outlines the basic rights, obligations and responsibilities of all stakeholders in the working process: the state; the employers; the workers; the persons who work on their own account or in cooperation; as well as other organisations and legal persons.

The overall responsibility for securing the health and safety of workers is born by employers. Workers have the obligation to take care of their own health and safety as well as the health and safety of other persons who may be affected by their activity, and to cooperate with employers and respective officials in implementing measures on the provision of safe and healthy working conditions.

As a result of the dedicated policy of the government and the social partners, a significant improvement is being noted in the provision of safe and healthy working conditions to workers:

1. There is a system of norms, concrete requirements and obligations for provision of occupational safety and health which creates an actual foundation for the realisation of the principles of the single European market.

2. Conditions are in place that guarantee that products that are being marketed do not threaten the life and health of people, the safety of domestic animals, the interests of consumers, and the environment.

3. Rules are enacted for the protection of consumers from goods that create dangers as well as obligations for all who carry out trade, advertising and mediation.

4. A national logo has been approved in conformity with “CO” products. The legislation also allows the use within the country of the European logo of conformity ‘EU’ as a guarantee for quality and safety.

5. Regulation is in place on the minimum requirements that employers must meet in securing the safety and health of their workers. There is a basis for the management and planning of the activity on ensuring safety and health at work based on the assessment of vocational risks. The risk assessment also entails psycho-social risks.

6. The provision of medical oversight of workers is mandatory as well as the provision of the necessary information and adequate training in conformity with the nature of the work in question and the qualification of workers.

7. There is a functioning system for defining a differentiated amount of social security contributions for accident at work and occupational disease, subject to the level of risk in the different economy sectors. The aim is to achieve fair distribution of the insurance burden between separate employers and to motivate for safe and healthy work.

8. Employers are obliged to insure their workers against the risk of occupational accident in all sectors of the economy for which the frequency or gravity of occupational accidents is equal or higher than the country average.

9. The main requirements of the European Union and the International Labour Organization on the establishment of single state control are in force. Overall control is carried out by the General Labour Inspectorate Executive Agency, under the Minister of Labour and Social Policy.

**2) Please indicate the measures taken (administrative arrangements, programmes, action plans, projects, etc.) to implement the national policy in consultation with employers’ and workers’ organisations.**

### **Strategic Documents**

As indicated in the previous report on this provision of the ESC(r), a 2002 Council of Ministers Decision approved Guidelines on Developing the Activity on Occupational Safety and Health for the period until 2006 that were in conformity with the European Union’s Strategy on Safety and Health at Work. The main direction in the declared state policy was the introduction of the European Union principles, norms and practice, in the organisation and carrying out of the activity on protection of health and safety of persons during their work.

The goals set were aimed at creating conditions for binding the activities on providing occupational safety and health with the organisation of the labour activity and labour relations on the basis of an up-to-date legal framework.

An emphasis was placed on the provision of ‘welfare at work’ and taking account of changes in the world of labour and the advent of new risks.

### **Institutional Capacity of the OSH System**

State policy in the field of occupational safety and health in the Republic of Bulgaria is defined by the Council of Ministers. The Ministry of Labour and Social Policy develops, coordinates and implements the state policy on the provision of safe and healthy working conditions. The General Labour Inspectorate Executive Agency is a state body that carries out the overall control on the observation of the labour legislation for the provision of safe and healthy working conditions, and on the implementation of labour relations as well as specialised control under the Employment Promotion Act and other legislative acts in the field of employment and unemployment which provide so.

The Ministry of Health directs and coordinates the activity on preserving and strengthening occupational health. Institutions within the Ministry of Health system are: Regional Inspectorates on Protection and Control of Public Health (RIPCPH); National Center of Public Health Protection (NCPHP); National Center for Radiobiology and Radiation Protection (NCRRP).

The National Social Security Institute (NSSI), through its territorial divisions, carries out control concerning the expertise on the ability to work; investigation of occupational accidents; maintenance of the occupational accidents information system.

The Ministry of Labour and Social Policy, through the Working Conditions Fund, actively assists activities on providing safe and healthy working conditions. The Fund provides free partial funding for projects aimed at addressing concrete problems of improving working conditions and occupational diseases diagnostics. It finances trainings, the preparation, print and distribution of study and other information materials. The financial assistance of the Working Conditions Fund has helped organising conferences, meetings, workshops and other events in the field of occupational safety and health. Below is more detailed information on the activity of the Fund, in a response to a question by the European Committee of Social Rights.

There is a developed infrastructure of units for employer assistance in meeting the requirements and obligations for the provision of healthy and safe working conditions – occupational health services; laboratories for assessment of working conditions; centres for training and consultancy on matters of occupational safety and health.

The national policy on securing healthy and safe working conditions is shaped and implemented on the basis of tripartite cooperation at national, sectoral and regional levels.

The standing body for carrying out coordination, consultations and cooperation at the development and implementation of occupational safety and health policy at the national level is the National Council of Working Conditions. All decisions, positions and recommendations of the Council are taken unanimously.

In all administrative regions, there are regional councils of tripartite cooperation on safe and healthy working conditions. Working conditions committees are established in enterprises through which the dialogue between employers and workers is carried out.

Sector and branch working conditions councils are composed by representatives of national sector or branch federations, unions or associations of workers, of sector or branch structures of employers, and an equal number of representatives of the respective ministry or administration.

Regional (district and municipal) working conditions councils are composed of representatives of existing regional unions or organisations of workers and of employers, and an equal number of representatives of the regional administration of the local self-government bodies.

There are 25 branch councils working successfully in the fields of industry, energy, construction, transport, leather industry, railroad transport, and over 37 municipal working conditions councils.



**3) Please provide pertinent figures, statistics or any other relevant information, if appropriate.**

**Main Challenges**

Efforts over the last several years are aimed at assisting the practical application of the legislation in the OSH field. The outcomes of active measures for provision of healthy and safe working conditions to workers show a significant progress. The average year growth of complying with the requirements of the occupational safety and health legislation by employers is 12%. There is a steady downward trend in the number of occupational accidents in the country – from 6 391 in 2000 to 4 096 in 2006, representing a decrease of 37%. It is expected that these trends would be maintained.

Irrespective of the fulfilment of main direction of the occupational safety and health policy, there is also a number of challenges, such as:

- new challenges in consumer protection raised by the economic and social challenges in the country;
- a large portion of small and medium enterprises which have insufficient or altogether inexistent knowledge on occupational safety and health;
- a trend of increasing working hours and work intensity which leads to increased workplace stress;
- irrespective of the serious renovation of technical and technological equipment, in a number of economic activities part of production is still carried out on outdated machinery and equipment that not only lack in competitive productivity but also generate harms and dangers to workers;
- the quality of risk assessment activities should be increased.

Other challenges that cannot be ignored are the ones posed to the occupational safety and health management by demographic changes, aging of the working population, new trends in employment, including the growth in employment through self-employment, outsourcing and increasing employment in small and medium-sized enterprises.

**Questions of the European Committee of Social Rights**

**The Committee wishes the next report to provide more details on how the employer assesses occupational risks and ensures that each worker receives adequate training in health and safety matters.**

**Obligations of Employers**

According to the EC OSH legislation as well as Bulgarian legislation, employers bear the overall responsibility on fulfilling obligations on securing the safety and health of workers in all work-related aspects.

General employers' obligations are related above all with taking measures on:

- avoiding risks to life and health;
- assessment of those risks that cannot be avoided;
- fighting risks at the source of their appearance;
- adjusting the working environment to the worker, especially concerning the design of the workplace, the choice of working equipment, of work and production methods, in order to alleviate or remove altogether monotonous work, work with an imposed rhythm as well as to decrease their impact on the health of workers;
- introducing the technical progress in technological processes, machinery and equipment;

- replacement of dangerous productions, work equipment, instruments, substances, raw materials and stuffs, with safe or less dangerous ones;
- application of single, common policy of prevention that encompasses technology, workplaces and work organisation, working conditions, and social relations;
- use of collective protection means with a priority over personal protection means;
- providing workers with the necessary information on securing healthy and safe working conditions;
- marking existing dangers and sources of factors that are harmful to health and safety.

Employers' responsibility is related not only to providing safe and healthy working conditions to workers, but also to all other persons that are inside or in a proximity of working premises, yards or places, on other occasion. All expenses related to the provision of healthy and safe working conditions to workers are to be born wholly by the employer. When at one site, working premises or equipment, working yard or other workplace, work or activities are being done by workers of several employers, the obligation of ensuring healthy and safe working conditions, and respectively the responsibility to fulfil those, lies with each of the employers. In such cases, subject to a written agreement, each of the employers should take the necessary measures for coordination of their actions with the other employers in order to provide healthy and safe working conditions to all workers.

### **Establishment of healthy and safe working conditions at the workplace and at using work equipment**

The main responsibility of the employer is to ensure the application of the minimum requirements for safe and healthy working conditions at the workplace, work process and at using the provided work equipment. These requirements are outlined in details in *MLSP and MH Ordinance No. 7 of 1999 on Minimum Requirements for Healthy and Safe Working Conditions at Workplaces and at Using Work Equipment*. Ordinance No. 7 lists general minimum requirements related to occupational safety and health that pertain to:

- the area of the enterprise;
- workplaces on the open;
- working environment;
- organisation of work activity;
- water-supply and sewage systems;
- fire fighting;
- sanitary and living services;
- provision of personal protection means and special work clothes;
- activity in case of accidents.

### **Implementation of risk assessment and provision of information on risks**

The obligations on risk assessment under articles 16, 17, 18 and 19 of the Healthy and Safe Working Conditions Act, are expressed more specifically in *MLSN and MH Ordinance No. 5 of 1999 on the Order, Manner and Regularity of the Implementation of Risk Assessment*. Risk assessment covers all aspects of the work activity – work processes; work equipment; premises; workplaces; organisation of work; use or raw materials and stuffs; other side factors that might cause risk. When organising the activity on risk assessment, a risk assessment programme must be developed and approved, which must include:

- organisation and coordination of activities on risk assessment;
- approaches towards and methods of implementing risk assessment, including ensuring credibility of results and development, if needed, of methods that are suitable to the respective enterprise;
- risk assessors;
- the resources needed for risk assessment;
- ways to provide assessors with information, training and consultations;
- stages, sequence and deadlines of risk assessment;
- ways of consulting workers at or related to the concrete workplace that is being assessed.

Based on the results of the risk assessment, the employer:

- plans and applies appropriate measures for risk prevention, and when this is not possible, provides workers and all other persons who are inside or close to the respective place where there is risk with protection;
- prioritising measures for prevention, reduction and limitation of risk, taking into account the established risk, the reasons for the emergence of dangers, alternative solutions, including novelties on the respective problems, feasibility of solutions and investment possibilities;
- carrying out control on the implementation and efficiency of the measures taken.

The employers submit the matters related to the risk assessment, the measures proposed and implemented and the outcomes of those, to the working conditions committees and groups for discussion.

Risk assessment includes the following stages: classification work activities; identification of dangers in different work activities; identification of workers exposed to dangers; identification of the elements of risk; risk assessment; documentation. The risk assessment establishes the admissibility of the respective risks and the need of applying measures for its prevention or decrease and limitation. The assessment is reviewed when:

- changes are introduced in production processes, equipment, products and materials, organisation of work, buildings, premises;
- changes are introduced in the legislation;
- the assessment is done based on data and information that have become irrelevant or inappropriate;
- conditions are in place for the assessment to be improved;
- the protection and prevention measures applied are ineffective;
- the results of investigations on occupational accidents and occupational diseases impose a reassessment.

### **Provision of instructions and training in healthy and safe working conditions**

Under article 16, paragraph 1, subparagraph 7, article 26, and article 30 of the HSWCA, and *MLSN and MH Ordinance No. 3 of 1996 on the Instructions of Workers in Safety, Hygiene of Work and Fire Safety*, each worker shall be provided with appropriate training and instructions in conformity with the specifics of each workplace and occupation. The employer shall not allow persons without the necessary knowledge, skills and qualification to work. The Ordinance outlines in detail the requirements for the different kinds of instructions: initial; on-the-job; periodic; daily; and extraordinary.

The following are subject to mandatory occupational safety training:

- specialists with management functions in enterprises or organisations as well as workers with duties in carrying out activities related to the provision of occupational safety;

- members of working conditions committees and working conditions groups, under the requirements of *Ordinance No. 4 on the Training of Representatives in Working Conditions Committees and Groups in Enterprises (SG, No. 133/1998)*.

### **Organisation of activities on the protection against and prevention of occupational hazards**

Under article 24 of the HSWCA, employers shall appoint or designate, subject to the amount and nature of the occupational hazards, one or more officials with appropriate education and qualifications, or establish a specialised service, to carry out activities related to the protection against and prevention of occupational hazards. The specific provisions are contained in *MLSP Ordinance No. 3 of 1998 on the Functions and Tasks of Officials and Specialised Services in Enterprises on Organising the Implementation of Activities related to the Protection against and Prevention of Occupational Hazards* (more popular as *Ordinance on the Obligations of Occupational Safety and Health Bodies in Enterprises*). It has to be stressed that in such cases of assignment, the employer continues to bear the responsibility by directly managing and controlling the activity of the occupational safety and health bodies in order to achieve the effective attainment of their goals; meanwhile, occupational safety and health bodies consult and assist the employer, and carry out control on his/her behalf and are obliged to inform him/her in case of establishing violations and to propose measures to rectify the situation, including for imposing sanctions on the guilty officials.

### **Provision of occupational health services**

Under article 25 of the HSWCA, workers must be provided with occupational health services. Employers establish, independently or in cooperation, occupational health services or conclude a contract with a registered occupational health service.

The provision that outlines in detail the activity of occupational health services is *MLSP and MH Ordinance No. 3 of 2008 on the Conditions and Procedure for Carrying out the Activity of Occupational Health Services (SG, No. 14/2008)*. These are units with mainly prevention functions that:

- provide assistance to employers in introducing an organisation on safety and health at work;
- analyse the situation and risk assessment on the health and safety of workers;
- propose measures for the removal and decrease of established occupational health and safety risks;
- oversee the health condition of workers;
- carry out trainings of workers and officials on the rules for preservation of health and safety at work.

Occupational health services maintain and keep documentation related to the health condition of workers. The activity of occupational health services is related to analysis and following of the health condition of workers over their entire work life as well as prevention and proving the occupational nature of their diseases.

### **Creation of working conditions committees and groups. Information and consultation of workers and their representatives on all issues related to the occupational safety and health.**

Enterprise-level social dialogue is carried out through the working conditions committees and groups (WCCs and WCGs) that are established under articles 27 and 28 of the HSWCA.

Working conditions committees are established in companies, enterprises and

other organisations with a staff of more than 50 workers. The committees are composed by an equal number of representatives of the workers and the employer, but no more than a total of 10 persons. Candidates for workers' representatives are elected under the procedure set out in article 6 of the Labour Code and they serve a four-year term. The WCC is chaired by the employer or his/her representative and co-chaired by a representative of the workers. The doctor from the occupational health service and the officials on occupational safety must be on the WCC composition, from the employer's quota. Committees might also invite outside experts and representatives of control authorities to take part in their work.

Working conditions groups are established in companies and other enterprises and organisations with a staff of less than 50 workers. WCGs are composed of the employer or the manager of the respective structural unit and one representative of the workers. The term of the workers' representative is defined by the general assembly.

Working conditions committees and groups:

- discuss the overall activity on preserving the health and safety of workers and apply measures for improving it;
- discuss the results of the occupational risk assessment and the analyses of the health condition, the reports of specialised occupational health services and other matters of preserving the health and safety of workers;
- discuss planned changes in the technology, organisation of work and workplaces and propose solutions on OSH;
- carry out checks on the observation of the safe and healthy working conditions requirements;
- follow the situation concerning the occupational traumatism rate and the occupational disease rate;
- take part in the development of information and training programmes on OSH for the workers.

Representatives in working conditions committees and groups pass mandatory training under programmes, terms and requirements set out in *Ordinance No. 4 on the Training of Representatives in Working Conditions Committees and Groups in Enterprises (SG, No. 133/1998)*. For 10 years now, in enterprises there is initial (no less than 30 hours) and yearly (no less than 6 hours) training of the representatives of workers and the WCC and WCG members.

Workers' representatives in WCC and WCG are entitled to:

- access to all available information concerning working conditions; occupational traumatism rate and occupational disease rate analyses; conclusions and instructions of control authorities;
- demand that the employer take necessary measures and make suggestions on removing hazards and limiting the risk to health and safety;
- contact the control authorities if they deem that the measures taken by the employer are not sufficient to guarantee the health and safety of workers;
- take part in inspections carried out by control authorities.

Workers' representatives in WCC and WCG may not be placed in an unfavourable situation due to their actions on ensuring safe and healthy working conditions.

### **Finding, investigation and registration of occupational accidents and occupational diseases**

Under article 23 of the HSWCA as well as certain provisions of the Social Security Code, the employer must find, investigate and register every occupational accident that has taken place and all cases of occupational disease that are known to him/her. During the investigation of occupational accidents and occupational diseases,

the workers' representatives from the working conditions committees or groups as well as representatives of the respective trade union organisations must be invited.

### **Mandatory insurance against occupational accident and occupational disease under the Social Security Code**

The *Methodology on the Procedure and Manner for Establishing the Amount of the Insurance Contribution for Occupational Accident and Occupational Disease* is in place, which introduced differentiated insurance contributions under groups of different economic activities subject to the level of occupational hazard. The amounts of the insurance contribution are differentiated from 0.4% to 1.1% of the social security income of workers.

### **Mandatory insurance of workers against the risk of 'occupational accident'**

The *Ordinance on the Mandatory Insurance of Workers against the Risk of 'Occupational Accident'* (SG, No. 15/2006) foresees that employers have the obligation to insure against the risk of 'occupational accident' all those workers who perform work which entails danger to their life and health. Workers are subject to mandatory insurance if they perform work in the main and subsidiary activity of enterprises belonging to an economic activity with an occupational traumatism rate equal to or higher than the country average.

### **Workers' obligations**

Under the HSWCA, workers also have obligations. They must take care of their health and safety as well as not to endanger the safety and health of other workers, through their actions. Workers, subject to their qualification and the instructions they have been given, have the obligation to:

- use in a correct way the machinery, devices, tools, dangerous substances and materials, transportation means and other work equipment;
- use in a correct way the personal protection means and special work clothing they have been given;
- use in a correct manner the collective protection means and not to remove and/or alter these on their own will;
- inform the employer or the respective officials immediately about every work situation that has happened that might lead to a direct danger to their health and about all failures in the collective protection means;
- cooperate with the employer in the implementation of activities on providing healthy and safe working conditions and the instructions of the control authorities.

**The Committee asks if the Working Conditions Fund is already operational, and the type of activities is has financed. Moreover, the Committee wishes the next report to provide details on the manner in which the State is involved in research and training in the area of health and safety.**

The Working Conditions Fund was established by the Minister of Labour and Social Policy with the Healthy and Safe Working Conditions Act as a second-level manager of budget credits. Its task is to finance activities and measures aimed at the improvement of working conditions in correspondence with the active legislation in the Republic of Bulgaria.

The legal basis on the activity of the Working Conditions Fund is the Healthy and Safe Working Conditions Act, Ordinance No. 1 of 23 March 2006 on the Conditions and

Procedure for Financing Programmes and Projects, Ordinance No. 8 of 26 November 2007 on the Conditions and Procedure for Financing the Diagnostics of Occupational Diseases, the Public Procurement Act, the Ordinance on Small Public Procurement, etc.

Sources of funding are regulated by the Healthy and Safe Working Conditions Act and include:

- targeted all-year subsidy from the State Budget;
- financing from the Occupational Accident and Occupational Disease Fund;
- voluntary contributions, donations and wills;
- charity events;
- incomes from advertising activity, etc.

The main financing of the Working Conditions Fund is done through an yearly transfer from the NSSI of funds from the Occupational Accident and Occupational Disease Fund, under the State Social Security Act.

The management body of the Working Conditions Fund is the Management Council that is composed by the Director, Deputy-director, and seven members, and is organised on a tripartite principle – representatives of the state, the organisations of employers and of workers.

The Management Council of the Fund plans, coordinates and organises the Fund's activity. All financing decisions on projects, programmes, activities and events, are taken at meetings of the Management Council of the Fund.

The activity of the Fund is carried out under a Programme approved by the National Council on Working Conditions for each calendar year and is approved by the Minister of Labour and Social Policy.

All activities, in correspondence with the legal requirements, on reviewing and assessment of submitted projects, accepting the implementation of contracts done with the Fund, development of notices on certain subjects and other activities are done by expert commissions that include highly qualified specialists, subject to a list of experts approved by the Management Council. The composition of each commission must include representatives of state institutions as well as the organisations of workers and of employers.

The Working Conditions Fund finances for free:

1. Projects and programmes on improving working conditions with a branch-level significance and applicability of results;
2. Up to 30% of the value of projects for improvement of working conditions in separate enterprises with concrete practical applicability related to:
  - a) reconstruction and modernisation of existing sites;
  - b) introduction of new and updating of existing technologies, machinery and equipment;
  - c) development or improvement of the system for prevention of workplace risks;
  - d) development or improvement of the system for provision of quality of work;
  - e) rendering machinery and equipment safe;
  - f) improvement of sanitary-hygiene conditions;
  - g) other projects related to the improvement of working conditions.
3. Training programmes on healthy and safe working conditions for:
  - a) representatives of employers' and workers' organisations recognised as representative at the national level;
  - b) representatives of ministries and authorities;
4. Development of legislative acts, regulations, norms and requirements in the field of HSWCA;
5. Development and publishing of education and information materials;

## 6. Organisation of and holding conferences, seminars and specialisations in the field of safe and healthy working conditions.

Those entitled to submit applications are natural and legal persons, municipal and state institutions, branch, sector, regional and local working conditions councils.

A significant part of the Fund's activity is the support for enterprises in providing healthy and safe working environment, improving working conditions and the quality of work.

Financing proposals of separate enterprises contain properly filled documentation and a form that covers an analysis of the condition of health and safety in the enterprise. Each candidate submits information on the significance of the problems that are subject to addressing through the project, the goal of the project, the number and share of the workers that are to be affected by the project, the actual condition of the parameters of the factors of the working environment and the expected parameters after the execution of the project, the value of the project as well as a forecast on the sustainability of the expected results after the completion of the project.

Projects are assessed and proposed for financing by a commission that follows the correspondence with the Ordinance and according to the priorities of the Management Council of the Fund, criteria and methodology of assessment, based on the principles of objectiveness, transparency and equality of candidates. After approval from the Management Council of the Fund, contracts are signed with the designated candidates, with the co-financing being implemented by refunding up to 30% of the approved and actually incurred project costs, the employer providing the rest of the funding for the overall implementation of the project.

As of the present moment, the maximum amount of funding for co-financing on projects established by the National Council on Working Conditions is up to BGL 70 000 for small and medium-sized enterprises, and up to BGL 100 000 for large enterprises.

The main topics on projects include reconstruction and repairs of production premises in order to improve the microclimate of the workplaces, placing hydro and heat insulations, construction and repairs of ventilation and dust-catching systems, heating, lighting, electrical installations, and are strictly specific for each individual enterprise, in conformity with its field of economic activity. In all implemented projects, there is a durable improvement of the parameters of the working environment and a direct improvement of working conditions and the protection of workers' health.

For the 2005-2007 period, under the programme of the Working Conditions Fund a total of 68 enterprises in different fields of economic activity have successfully implemented different projects on the improvement of working conditions. A main portion is made up of machinery-building companies, followed by enterprises in the chemical industry, light industry – clothing, food, the timber industry, transport, etc. The share of workers affected by projects is usually between 80% and 100% of the personnel.

In the activity on prevention in the field of safe and healthy working conditions, the Working Conditions Fund contracts the nationally representative organisations of workers and of employers as well as ministries and other authorities. The financing under these contracts helps train members and their structures, branch organisations, employers, members of working conditions committees and groups, as well as civil servants and workers.

The main topics are related to the condition and trends in the development of working conditions, creation of quality workplaces, preservation of the life and health of workers, correct application of legislation in the field of safe and healthy working conditions, assessment and management of occupational risks, prevention of occupational accidents and occupational diseases, etc.



The Fund also carries out prevention activities on occupational safety and health through the distribution of information materials: books, handbooks, leaflets, etc., as well as through holding national conferences and seminars on current topics related to the health and safety at work.

Financing from the Working Conditions Fund helps develop draft legislation related to working conditions, assists the proliferation of good practices, the holding of sociological surveys and analyses of effective implementation of the law as well as other activities.

Under the recently adopted *Ordinance No. 8 of 26 November 2007 on the Conditions and Order for Financing the Diagnostics of Occupational Diseases*, the Working Conditions Fund provides funding to health establishments for hospital assistance with a differentiated unit (clinic and/or ward) for diagnostics and treatment of occupational diseases that carries out:

1. medical examinations for diagnostics of occupational diseases;
2. consultations with specialists in relation to the diagnostics of occupational diseases;
3. medical research;
4. group medical examinations of workers in enterprises aimed at the early discovery of occupational diseases.

As part of the institutional capacity of the occupational safety and health system, the Working Conditions Fund assists the development and improvement of activities on providing health and safety at work.

By financing projects and programmes, the Fund aids the improvement of working conditions in concrete economic activities and enterprises, in conformity with the requirements introduced by legislative documents on decreasing the number, frequency and gravity of occupational accidents and occupational diseases, as well as the acquisition of the necessary theoretical knowledge aimed at prevention and quality execution of the obligations of all stakeholders in the proves of providing occupational safety and health.

On the matter of state participation in research and training on OSH matters: As stated above, the Fund finances gratuitously training programmes on safe and healthy working conditions; development of legislation, rules, norms and requirements in the field of SHWCA; development and publishing of education and information materials; organisation and holding of conferences, seminars and specialisations in the field of healthy and safe working conditions. The state participates in the financing of the Fund, thus of the abovementioned activities, through the yearlong subsidy.

## **Article 3§2**

**1) Please describe the general legal framework. Please specify the nature of, reasons for and extent of any reforms.**

**2) Please indicate the measures taken (administrative arrangements, programmes, action plans, projects, etc.) to implement the legal framework in consultation with employers' and workers' organisations.**

The legal framework is the basis of the National System for Safety and Health at Work that ensures the realisation of the national policy in this field.

The conditions and order under which the constitutional right of every Bulgarian citizen to safe and healthy working conditions is implemented, are regulated mainly in the Labour Code, the Healthy and Safe Working Conditions Act (HSWCA) and the other

second-level legislative acts under those two. A group of provisions in the Social Security Code and the legislative acts under them are related to the insurance relations in cases of occupational accidents and occupational diseases and the order and requirements for determination, investigation, registration and reporting of occupational accidents and occupational diseases.

Bulgaria has occupational safety and health legislation that is in conformity with the European Union law.

The *Healthy and Safe Working Conditions Act* was adopted by the end of 1997. This Act along with the updated texts of the Labour Code and such legislative norms as: *Ordinance No. 7 on the Minimum Requirements for Healthy and Safe Working Conditions at Workplaces and at Using Working Equipment*; *Ordinance No. 3 on the Functions and Tasks of Occupational Safety and Health Bodies in the Enterprises*; *Ordinance No. 3 on the Instructions of Workers in Safety, Hygiene of Work and Fire Safety*; *Ordinance No. 14 on Occupational Health Services*; *Ordinance No. 5 on the Order, Manner and Regularity of Risk Assessment*, transpose in total Council Directive 89/391/EEC on the introduction of measures to encourage improvements in the safety and health of workers at work.

The Healthy and Safe Working Conditions Act is based on the main principles of European and international law in the field:

- general principles of prevention of occupational hazards;
- protection of the safety and health of workers;
- removal of risks and causes of occupational accidents and occupational diseases;
- information, consultation and balanced participation of representatives of the workers and the employers at the different levels of social dialogue;
- training of workers and their representatives.

The scope of legislation covers all participants in the labour process: the state; the employers; the workers; the persons who work on their own behalf by themselves or in cooperation; other organisations and legal persons. HSWCA is applied in all enterprises and places where work activity or training is carried out, regardless of the form of organisation and the kind of property and the basis on which the work or training is carried out.

The main part of legislative acts under the HSWCA is ordinances that enact the requirements of individual directives under the Council Directive 89/391/EEC.

### **Questions of the European Committee of Social Rights**

**Protection of workers against asbestos. Ordinance No. 1 of 2003 transposes European Union standards on the protection of workers against risks related to exposure to asbestos at work. Given that Council Directive 83/477/EEC of 19 September 1983 on the protection of workers against risks connected with exposure to asbestos during work<sup>1</sup> has been amended during the reference period, the Committee asks if the new exposure limit as well as the minimum health and safety measures introduced by Directive 2003/18/EC of the European Parliament and of the Council of 27 March 2003<sup>2</sup>, have been taken into account in the above-mentioned Ordinance.**

*DIRECTIVE 2003/18/EC OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 27 March 2003 amending Council Directive 83/477/EEC on the protection of workers from the risks related to exposure to asbestos at work is enacted with Ministry of Labour and Social Policy and Ministry of Health Ordinance No. 9 of 4 August 2006 on the Protection of Workers against Risks related to the Exposure to Asbestos at Work (SG, No. 71/2006). Ordinance No. 9 replaced Ordinance No 1 of 2003 on the Protection of Workers*

against Risks related to the Exposure to Asbestos, which enacted Council Directive 83/477/EEC on the protection of workers from the risks related to exposure to asbestos at work. Ordinance No. 9 on the Protection of Workers against Risks related to the Exposure to Asbestos at Work reflects the amendments that were introduced to Council Directive 83/477/EEC regarding the levels of exposure as well as the minimum OSH measures laid out by Directive 2003/18/EC of the European Parliament and of the Council of 27 March 2003.

**Protection of temporary workers. The report indicates that legislation on health and safety is applied irrespective of the manner, duration and other terms and conditions of recruitment. An Ordinance for securing the health and safety of workers in a temporary employment relationship was adopted in 2006 – outside the reference period. The Committee asks the next report to provide more details on this text and to provide concrete examples on the modalities and type of training which temporary and agency workers receive when starting a job, especially if the latter involves dangerous tasks or takes place in a high risk sector.**

*Ordinance No. 5 on the Provision of Healthy and Safe Working Conditions to Workers under Fixed-Term Employment Relation or Temporary Employment Relation issued by the Ministry of Labour and Social Policy (SG, No. 43/2006) introduces into national legislation Council Directive 91/383/EEC of 25 June 1991 supplementing the measures to encourage improvements in the safety and health at work of workers with a fixed- duration employment relationship or a temporary employment relationship.*

The Ordinance establishes additional requirements for provision of healthy and safe working conditions to workers on fixed-term employment relationship or temporary relationship. The Ordinance is applied:

- in all enterprises and places mentioned in article 2 of the Healthy and Safe Working Conditions Act for workers hired on a temporary employment contract: for a fixed term; until the completion of a certain task; as substitute for a worker who is absent from work; for carrying out temporary, seasonal or short-term works and activities;
- in all enterprises that use workers provided to them by enterprises for temporary employment.

Under Ordinance No. 5, employers who hire workers on a fixed-term employment relation, as well as enterprises that use workers provided to them by a temporary employment enterprise, have the obligation to ensure healthy and safe working conditions and protection from production hazards to the same degree to all workers. When implementing the activity on providing healthy and safe working conditions, employers must observe all requirements of the legislation in the field of occupational safety and health. Prior to starting work, employers who hire workers on a fixed-term employment relation have the obligation to:

1. provide the workers with information on:
  - a) risks to their health and safety as well as the measures that are taken to remove, decrease and control these risks;
  - b) the necessary vocational qualification or skills for the job;
  - c) the necessary medical examinations under Ordinance No. 3 of 1987 on the Mandatory Preliminary and Periodical Examinations of Workers;
2. provide workers with appropriate training and instructions on healthy and safe working conditions in correspondence with the specifics of each workplace and their qualification and professional experience.

Furthermore, employers have the obligation to provide, to their own expense, medical surveillance to workers on fixed-term employment relationship and temporary employment relationship, according to *Ordinance No. 3 of 1987 on the Mandatory Preliminary and Periodical Examinations of Workers*.

Under article 7, paragraph 1 of this Ordinance, enterprises that use workers provided to them by temporary employment enterprises have the obligations to:

- identify the kind of work and workplaces for temporary employment;
- inform the enterprise that provides temporary employment about the specific characteristics of the workplace, the occupational hazards and the vocational qualification necessary.

The temporary employment enterprise must:

- provide the information on the conditions under article 7, paragraph 1, to interested workers;
- insert the conditions under article 7, paragraph 1, inside the employment contract.

Enterprises that use workers provided to them by temporary employment enterprises bear the responsibility for the observation of their obligations to provide healthy and safe working conditions.

### **Article 3§3**

**1) Please describe the enforcement of safety and health regulations. Please specify the nature of, reasons for and extent of any reforms.**

As stated in the previous report on this provision, according to article 399 of the Labour Code, the overall control on the observation of the labour legislation in all branches and activities is carried out by the General Labour Inspectorate Executive Agency (GLI), under the Minister of Labour and Social Policy. GLI and its structures carry out specialised control activity on the observation of the Healthy and Safe Working Conditions Act (HSWCA) (article 54, paragraph 2), as well as other legislative acts. Through the General Labour Inspectorate Executive Agency, the Minister of Labour and Social Policy carries out integrated control on the observation of legislation and the fulfilment of the obligations on the provision of healthy and safe working conditions in all branches and activities, regardless of the form of property (article 36, paragraph 3 of the HSWCA). An important step in the development of the reformed labour inspection system was project BUL/98/M03/FRG “Training for an Integrated Labour Inspection”. The Steering Committee of the Project adopted the Integrated Labour Inspection Concept in August 1999. This is aimed at providing the Inspectorate with the possibility to apply a proactive approach to the prevention in all fields of work safety and hygiene and employment relations.

All requirements of the labour legislation and the HSWCA are mandatory to private, municipal and state enterprises, regardless of the economic activity to which they belong.

Apart from the Labour Inspectorate, under article 401 of the Labour Code, ministers, heads of other authorities, as well as the local bodies of state authority may exercise control on the observation of the labour legislation through their own specialised organs. Such control may be exercised by a control body established within the same organisation system and is in force for it only.

Under the Labour Code provisions for the removal and prevention of violations of legal requirements for the prevention of healthy and safe working conditions and the detrimental consequences thereof, the Labour Inspectorate and the control bodies under

article 401 of the Labour Code are entitled to apply compulsory administrative measures that represent mandatory for implementation instructions.

Furthermore, in case of established violations of the HSWCA, the labour inspectorate may seek administrative-penal liability by enforcing administrative property sanctions to the perpetrators or the persons who have committed the violation.

The GLI activity is carried out in the condition of a national legislation that is in line with the international and European norms and standards of health and safety at work. The provisions of article 3 of the ESC(r) – The right to safe and healthy working conditions, are part of the national labour legislation and through it find full application in the Republic of Bulgaria.

Each year, the General Labour Inspectorate EA carries out inspection and information campaigns on the application of legislative acts in the field of health and safety at work in the national economy.

Inspections are carried out on plan and extraordinarily, during the day, night and on holidays, based on approved methodical guidance that is periodically updated. In case of need, inspections are carried out together with representatives of other state control authorities (the Ministry of Interior, the National Social Security Institute, the General Directorate for State Technical Supervision Inspectorate, the National Construction Control Directorate, the Technical Control Inspectorate under the Ministry of Agriculture and Food, etc.) with which the GLI has coordinated relations.

Extraordinary inspections are carried out on the orders of the Minister of Labour and Social Policy, the Executive Director of the GLI, the Prosecutor's office, heads of municipalities, and directors of Labour Inspection Directorates. These also include, inter alia, inspections on investigating occupational accidents, inspections upon submission of signals and request. Some of the inspections (for instance in the construction of buildings) are carried out under the direction and in the personal presence of the Minister of Labour and Social Policy.

The frequency of the visits of control authorities to sites is defined subject to a dependency to the size and dynamics in the development of the enterprises, the condition of the occupational traumatism rate and occupational diseases, the number and nature of the committed violations of legislative acts on the provision of occupational safety and health, the commitment of the employer to the observation of his/her obligations on providing healthy and safe working conditions.

During inspections, labour inspectors check documents (including those on occupational risk assessment and the measures taken for its removal or limitation), the results of assessment of the parameters of the working environment, protocols establishing reviews done, prevention and other measures proving the good condition and safety of machinery, equipment and workplaces, the conformity of the working environment with the hygienic and fire safety norms and requirements, the timely regular medical checks of staff, the conduction of instructions and trainings of workers in the respective fields, and others. They inquire workers and officials, carry out views of workplaces, make conclusions on the level of observation of norms and requirements on the application of legislative acts, provide advice and consultation and take measures for the removal of established violations. Labour inspectors have the power to start a procedure for seeking administrative-penal liability for violations of the norms for provision of occupational safety, established by them.

Upon completion of their visit, the labour inspectors inform the employer and the workers' representative on the established discrepancies and the measures that are prescribed for the removal thereof.

In order to develop social cooperation and assist social dialogue, in inspections, together with the inspectors, there are also invited representatives of trade union organisations and working conditions committees and groups from the inspected enterprise. During inspections, inspectors provide accessible advice and consultations to employers, officials, direct supervisors and workers on the most efficient methods of observing normative acts on occupational safety and health. For instance, in 2005, 2006 and 2007, labour inspectors have given 30 142, 31 916 and 2 934 technical advices and consultations respectively, on questions of the effective application of the occupational safety and health norms.

Meanwhile, all labour inspectors deal with requests and signals submitted to them by workers, employers' and trade union organisations on the observation of the legislation on healthy and safe working conditions (in 2005, 2006 and 2007, there were respectively 63, 62 and 44 requests and signals addressed in the field of occupational safety and health).

**2) Please provide pertinent figures, statistics (for example Eurostat data) or any other relevant information on the number of accidents at work, including fatal accidents, in absolute figures as well as in terms of standardised accident rates per 100,000 workers; on the number of health and safety inspection visits by the labour inspectorate and the proportion of workers and companies covered by the inspections; and on the number of breaches to health and safety regulations and the nature and type of sanctions imposed.**

We present information on the number of occupational accidents, including fatal ones, as well as standardised levels (frequency of occupational accidents) on the number of accidents per 100 000 persons insured against occupational accident. The relevant period is 2003-2007. The data is in Appendix 1. This information has been submitted by the National Social Security Institute and to Eurostat within the respective timetables.

The Labour Inspectorate does not differentiate the information about the number of inspections related to occupational safety and health due to the fact that it carries out integrated control. This means that during inspection, the labour inspector will check the condition of the application of norms within the GLI sphere of competence on occupational safety and health, including hygienic factors of the working environment, as well as the legality of the employment relationships. Therefore, inspections are not accounted for on the topic of occupational safety and health and such information is not available. We present in a table the results of labour inspections on the application of the legislation on safety and health at work, during 2005, 2006 and 2007.

T A B L E №1  
on certain results of the labour inspections  
on the application of the legislation on safety  
and health at work, during 2005, 2006 and 2007

I n d i c a t o r s	Y e a r		
	2005	2006	2007
1. Inspections – integrated control	35 111	36 036	33 031
1.1 Of which inspections on investigating occupational accidents	348	428	490
2. Established violations on the norms for provision of OSH	142 371	158 018	136 361

I n d i c a t o r s	Y e a r		
	2005	2006	2007
3. Percentage shares of:			
3.1 Workers in inspected enterprises to the total number of insured persons	54,3	51,9	48,5
3.2 Enterprises covered by inspections to the total number of insurers	17,4	16,5	14
4. Compulsory administrative measures taken:			
4.1 Mandatory instructions issued	142 371	158 018	136 361
4.2 Machinery, equipment, technologies and workplaces shutdown for exploitation due to lack of safety	1 828	2 809	1 784
4.2 Working staff expelled from work due to lack of training on the rules of safety at work, or due to a lack of documentation certifying the qualification to carry out the respective work	202	207	206
4.4 Special regimes of safe work issued due to technological impossibility to shutdown the inspected sites	85	148	68
5.Deeds issued	5606	6186	5046

### **Questions of the European Committee on Social Rights**

**The Committee notes once again that both in absolute terms and in comparison with other Parties, the number and frequency of occupational accidents remains very low.**

**The Committee asks to be kept informed on:**

**a) the reliability of the statistics on work accidents following the changes introduced (the introduction of the new statistical system named “Work Accidents”, based on the European System of Work Accidents (ESAW))**

We consider that Bulgarian statistics on occupational accidents is reliable. Our motives for this are the following:

- it is regulated by the Social Security Code; Ordinance on the Determination, Investigation, Registration and Reporting of Occupational Accidents and the Occupational Accidents Statistical System;
- there is a legal possibility for the victim of the occupational accident or his/her inheritors to declare it in case the insurer fails to do so;
- scope of the system – all branches and activities under the NACE classification and all persons insured against occupational accident;
- provides information on differentiating the insurance contribution for occupational accident under economic activities;
- provides information for actuary forecasts and prognoses;
- provides information for the payment of compensations, assistance and pensions for occupational accident from the state social security;
- provides information for insurance of workers against the risk of occupational accident in private insurance companies.

**b) other possible reasons for failing to report occupational accidents**

- a possibility exists (mainly in cases of lighter accidents) for an agreement between the employer and the victim not to report the accident officially for exchange of a compensation and covering of the medical costs by the employer;
- a mass practice of insurance against occupational accidents equal to the minimum insurance thresholds, instead of the actual remuneration received (salary), which demotivates victims economically to report accidents. They would receive lower compensations corresponding to the low insurance income;
- the duty of expertise authorities on the ability to work (doctors and doctors' consultative commissions) to submit directly a copy of the document that establishes the inability to work (hospital note) to the competent institution has been revoked;
- fear of problems with the employer in case of reporting the accident;
- hiding evidence in order to avoid seeking liability and the imposture of sanctions on the responsible natural and legal persons from the control authorities.

**The Committee asks to be kept informed on the implementation of the plan to increase the administrative capacity of the General Labour Inspectorate for the period 2004-2007 and on the staffing resources of the labour inspectorate in general, given the importance of having a strong labour inspectorate capable of effectively supervising implementation of health and safety regulations.**

The strengthening of the capacity of the GLI over recent years has been one of the priorities in the direction of the inspection activity. The most recent amendments in the Structural Regulation of the Agency, increased the number of units of the specialised administration with a new directorate for International Cooperation, Projects and Programmes charged with the organisation and coordination tasks on *acquis communautaire* and the development and implementation of projects on strengthening the institutional capacity. The Directorate for Administrative Service and Human Resources Management received the new task of taking part in the development of a concept of the management of human resources within the GLI system.

The good education level of those employed in GLI (all inspectors are university graduates) and the trend towards increasing the vocational qualification of civil servants is a solid basis for the continuous growth of its administrative capacity.

A training system for GLI officials was developed as a result of the cooperation with the Federal Government of Germany on ILO project - BUL/98/MO3/FRG "Training for an Integrated Labour Inspection" in 1999 and the existing training traditions of the Inspectorate. The system provides constant access to training covering the majority of GLI staff and uses overwhelmingly trained lecturers from the GLI personnel.

Training profiles for GLI officials are on career and service development according to the strategy for training of state administration officials approved by the Council of Ministers.

Training of GLI officials is based on the following principles:

- adequacy of training – provision of adequate training to the adequate officials in appropriate timing and in a cost-effective way;
- binding training with performance assessment and professional and career development of the respective officials;
- relevance of training – correspondence of training content with the functions and tasks of the agency;



- impartiality and objectivity of the assessment of theoretical knowledge and practical skills acquired.

The planning of training activity is done on the basis of officials' individual needs according to their direct duties. These needs are outlined in officials' personal year plans of training in order to achieve their effective implementation.

Based on the established training needs, the training activity is planned and organised in two directions: training in basic modules and specialised (thematic) training.

Theoretical training on **basic modules** is mandatory and is provided to all newly appointed inspectors and legal advisers and includes the following topics: prevention methods of inspection; tripartite cooperation and social dialogue; investigation of occupational accidents; social skills; introduction to labour law; employment control; work hygiene; technical safety; dangerous substances.

Theoretical training on the listed topics is carried out by highly qualified officials of GLI. Training covers general preparation on legislative acts and knowledge in the field of inspection.

Training of newly appointed inspectors also covers practical training in the respective territorial labour inspection directorates by inspectors-tutors, apart from the theoretical training.

The improvement of the vocational competence of the GLI staff is going on the basis of participation in courses, seminars and specialisations organised on the account of the agency or with outside assistance.

Information on the general condition of the GLI staff is provided in the following table.

T A B L E № 2  
on the condition of GLI staff for 2005, 2006 and 2007

I n d i c a t o r s	Y e a r		
	2005	2006	2007
Staff – regular numbers	610	558	558
Staff inspectors	429	389	383
Managers with inspectors' rights	46	46	48
Training topic fields	22	49	46
GLI officials that took part in training	622	854	1118

In 2005, the regular number of GLI staff was 590 persons. In agreement with the recommendations in the 2002 Year Report of the European Commission on the progress of Bulgaria in the accession process, the GLI staff was increased by 20 regular staff members, all inspectors in the territorial labour inspection directorates.

In 2006, from a total of 610 regular staff, in relation to the optimisation of the GLI staffing, under Council of Ministers Decree №159/28.06.2006, the number of personnel was decreased by 62, and thus, since 8 June 2006, it totals 548 regular staff members, which equals about 10.2% decrease.

Council of Ministers Decree № 227/29.08.2006 increased the GLI staff as of 11 September 2006 by 10 inspectors and legal advisers.

In 2007, 96.4% of the personnel is made up of civil servants with management of expert duties, while the other officials are hired based on an employment relationship and

carry out assistance and technical duties. In terms of gender structure, the number of women is greater, with about 57.8% share.

**In 2005, the number of inspections carried out was 35 111, during which 28 897 enterprises were visited (12.3 % of economic entities) and where 1 221 941 workers were employed. Given that the number of insured employees in Bulgaria was 2 179 180, the Committee notes that the proportion of workers covered by such inspections compared with the total workforce was around 56 %. The Committee asks the next report to confirm if such a proportion is correct, and if possible to provide the percentage of workers covered by inspections only in relation to occupational health and safety inspections.**

We confirm the preciseness of the data in the 2005 GLI Activity Report: 35 111 inspections carried out, of 1 221 941 workers in 28 897 enterprises, with the exception of “2 179 180 insured workers” used as basis for the calculation of the share of 56% of the workers in enterprises inspected by GLI.

The additional information provided by the NSSI on the number of insured workers and the number of insurers, served to secure the required information concerning the percentage shares contained in indicators 3.1 and 3.2 of Table No. 1.

#### **Article 3§4**

**1) Please describe the occupational health services. Please specify the nature of, reasons for and extent of any reforms.**

In May 2007, the National Assembly adopted amendments to the Healthy and Safe Working Conditions Act. In separate provisions, the legislator establishes a new procedure for the registration of occupational health services (OHS), introduces specialised control over their activity and the keeping of their documentation. Concrete penalties are introduced for persons who have registered occupational health services and the managers of occupational health services who fail to comply with their obligations under the Act.

##### **Healthy and Safe Working Conditions Act**

Article 25. (1) (amended – SG, No. 40/2007) Employers shall provide workers with assistance from registered occupational health services.

(2) (amended – SG, No. 40/2007) Occupational health services shall be units of primarily preventive functions. They consult and assist employers, working conditions committees and groups, in planning and organising activities in:

1. provision and maintenance of safe and healthy working conditions;

2. (amended – SG, No. 18/2003) promotion of health and ability to work of workers in relation to the work carried out by them;

3. (new – SG, No. 40/2007) adjusting the work to the possibilities of the worker, taking into account his/her physical and psychological health.

(3) (amended – SG, No. 40/2007) Occupational health services shall be established by:

1. employers, independently or together with other employers;

2. legal or natural persons, registered under the Commerce Act, the Cooperatives Act or the Legal Persons with Non-commercial Aims Act, for servicing workers.

(4) (new – SG, No. 40/2007) For assisting workers in healthcare establishments, occupational health services may be established as independent legal persons.

(5) (amended – SG, No. 18/2003, repealed, former paragraph 4 – SG, No. 40/2007)  
When it is practically impossible for the employer, independently or in cooperation with other employers, to establish an occupational health service, he/she shall conclude a contract with a registered occupational health service.

Article 25a. (new – SG, No. 40/2007.) (1) The basic activities of occupational health services shall be:

1. provision of assistance to employers in the establishment of organisation in occupational safety and health;
2. assessment of occupational hazards and analysis of the health conditions of workers;
3. proposal of measures for the removal and diminishing the established risk;
4. oversight of the health condition of workers;
5. training for workers and officials on the rules of preserving health and safety at work.

(2) Occupational health services shall keep and safeguard the documentation referred to in article 25b, paragraph 4.

(3) Occupational health services shall carry out their activities in correspondence with the requirements of the legislative acts on the provision of health and safety at work.

Article 25b. (new – SG, No. 40/2007) (1) The minimum staff of occupational health services shall include:

1. a person with an MA degree in health and an additional specialty in occupational health;
2. a person with an university degree in technical studies and three years of working experience in the field of occupational safety and health;
3. a technical associate with at least secondary education.

(2) Employment contracts of workers in occupational health services shall be concluded, amended and terminated under the provisions of the Labour Code.

(3) The composition of occupational health services and when carrying out specific tasks may not include::

1. persons working in the Ministry of Health and the Ministry of Labour and Social Policy, and their control bodies;
2. health specialists who have forfeited their legal ability under the meaning of the Health Act;
3. persons who have signed a contract with the National Health Insurance Fund and registered in regional healthcare centres.

(4) The terms and procedure for carrying out the activity of occupational health services shall be established via a Minister of Health and Minister of Labour and Social Policy Ordinance.

(5) The period of time during which specialists have worked for an occupational health service shall be recognised as employment seniority.

Article 25c. (amended – SG, No. 40/2007) (1) Occupational health services shall be registered with the Ministry of Health.

(2) The registration of occupational health services shall be carried out by the Minister of Health on proposal by the Commission for the Registration of Occupational Health Services.

(3) The Commission mentioned in paragraph 2 shall be appointed by an Order of the Minister of Health and shall be composed of a Chairperson and 8 members.

(4) The Chairperson of the Commission mentioned in paragraph 2 shall be appointed by the Minister of Health.

(5) The Minister of Health, the Minister of Labour and Social Policy, the nationally representative organisations of employers and the nationally representative organisations

of workers, shall each appoint two representatives as members of the Commission mentioned in paragraph 2.

Article 25d. (new – SG, No. 40/2007) (1) In order to receive a registration for an occupational health service, persons who are establishing one must submit an application to which they must attach:

1. information containing name, seat and address;
2. a copy of the court registration act or of another document of establishment of persons under article 25, paragraph 3;
3. a contract between employers – for cases under article 25, paragraph 3, subparagraph 1;
4. an up-to-date certificate for inscription to the commercial register;
5. a list of the minimum composition of specialists in an occupational health service;
6. copies of documents attesting to the education and qualification of specialists under subparagraph 5, endorsed by a notary;
7. declaration by persons under subparagraph 5 attesting that they meet the requirements under article 25b, paragraph 3;
8. a certificate of membership to the Bulgarian Medics' Association of the person under article 25b, paragraph 1, subparagraph 1;
9. a document of paid fee to the amount established by the tariff under article 7.

(2) In case of incomplete or irregular documentation under paragraph 1, the Minister or an official empowered by him/her shall, within a 30-day period of the date of submission of the application, notify the respective persons for the established incompleteness or irregularities of the documentation, while establishing with said notification a period of no less than 14 days to remove those.

(3) Within a 30-day period of the submission of the application or from the date of removal of the established incompleteness or irregularities, the Minister of Health or an official empowered by him/her, on proposal of the Commission for Registration of Occupational Health Services, shall issue a certificate of registration of an occupational health service, or provide a motivated refusal of registration.

(4) A refusal of registration shall be issued in cases when incompleteness or irregularities are not removed within the period established with the notification mentioned in paragraph 2, or in case of discrepancy with the registration requirements.

(5) The refusal under article 4 is subject to appeal under the procedure of the Administrative Process Code.

(6) The Ministry of Health shall keep a public register of occupational health services. The information from the register shall be made public via the internet page of the Ministry of Health.

(7) For issuing a certificate of registration of an occupational health service under paragraph 3 and re-registration of an occupational health service under article 25e, paragraph 2, fees shall be due to the amount established by the tariff under article 46 of the Health Act.

Article 25e. (new – SG, No. 40/2007) (1) In case of changes in the circumstances under article 25d, paragraph 1, the persons who have established an occupational health service shall, within a 7-day period of the incursion of the respective changes, notify the in writing the Minister of Health, submitting documentation that certifies to the changes.

(2) The Minister of Health or an official empowered by him/her shall, within a 20-day period of the submission of the notification of changed circumstances under article 25e, paragraph 1, under a proposal of the Commission for Registration of Occupational Health Services, reflect the changes in the register of occupational health services and issue a certificate of change of the registration or produce a motivated refusal.

(3) The Minister of Health or an official empowered by him/her shall issue orders for the deletion of registered occupational health services from the register in case of:

1. a request by the persons who have established the occupational health service to delete it from the register;
2. discontinuation of the activity by the persons who have established the occupational health service;
3. established violations of the requirements of article 25b, paragraphs 1, 3 and 4;
4. systematic violations of article 25a established by the control authorities;
5. establishing the presence of documents with false content concerning the registration of the service.

(4) The refusal under paragraph 2 and the order under paragraph 3 are subject to appeal under the procedure of the Administrative Procedure Code.

### **Control over the activity of occupational health services**

The amendments in Chapter 7 “Control and Administrative Penal Liability” of the HSWCA define the bodies of the state health control as responsible for exercising control over the activity of the occupational health services.

Article 54a. (new – SG, No. 40/2007) (1) State health control authorities carry out the control over the activity of occupational health services on:

1. the registration and the conformity of the information and the documents under article 25d, paragraph 1, and article 25e, paragraph 1, with the actual situation;
2. the implementation of the activities contracted with the employer under article 25a, paragraph 1, related to the health of workers;
3. documentation certifying the activity of the service.

(2) The control carried out is running and in cases of submitted complaints and signals.

(3) State health control authorities have the right to:

1. free access to occupational health services;
2. request information and documentation from occupational health services in relation to their activity;
3. to issue mandatory instructions to occupational health services for the removal of established violations;
4. to issue deeds for established administrative violations.

(4) In carrying out their duties, state health control authorities are obliged to preserve the confidentiality of facts and circumstances they have become aware of during their inspection which represent an industrial or commercial secret of the inspected enterprises.

Article 54b. (new – SG, No. 40/2007) (1) Persons who have registered an occupational health services, and heads of occupational health services, who fail to fulfil their obligations under the present Act shall, if they are not subject to a heavier penalty, be imposed a material sanction or a fine in the amount of BGN 1 500 to BGN 5 000, and a guilty official shall, if not subject to a heavier penalty, be imposed a fine between BGN 250 and BGN 1 000.

(2) In case of repeated violation, the penalty under paragraph 1 shall be a material sanction or fine to the amount of BGN 3 000 to BGN 10 000, while for a guilty official – a fine to the amount of BGN 500 and BGN 2 000.

Article 54c. (new – SG, No. 40/2007) (1) Violations mentioned in article 56b shall be established via deeds done by officials of the regional inspectorates for preservation and control of public health, specifically empowered by the director to carry out control over the activity of occupational health services.

(2) Penal decrees for violations under article 54b shall be issued by the director of the regional inspectorate for preservation and control of public health.

Article 54d. (new – SG, No. 40/2007) The establishing of violations, issuing, appeal and execution of penal decrees, shall be carried out under the procedure of the Administrative Violations and Penalties Act.

Based on article 25b, paragraph 4 of the HSWCA, the Minister of Health and the Minister of Labour and Social Policy established the procedure and conditions for carrying out the activity of occupational health services – Ordinance No. 3 of 25 January 2008 on the procedure and conditions for carrying out the activity of occupational health services (SG, No. 14/2008). The ordinance specifies and puts into details the main activities of occupational health services regulated by the HSWCA.

**2) Please indicate the measures taken (administrative arrangements, programmes, action plans, projects, etc.) to implement the legal framework.**

**3) Please provide pertinent figures, statistics or any other relevant information, if appropriate.**

GLI controls the observation of workers' obligations to provide workers with the services of a registered occupational health service (OHS). Results of labour inspections in 2005, 2006 and 2007 point to an uninterrupted progress of the levels of OHS coverage reached, starting from 74%, through 81%, to reach 84%. In 2007 alone, due to the impact of labour inspectors, 8 403 employers have fulfilled their obligation to provide the services of OHS, with the number of persons working in these enterprises (22 837), the total number of workers covered by such services reaches 232 495. The scope of economic activities where employers provide their workers with OHS is broadening. Sectors that have achieved full OHS coverage according to 2007 inspections are: coal and peat mining; electronic calculation equipment manufacturing; radio, TV and communication equipment; fish and other seafood processing and pickling; cutting, profiling and processing of construction and ornamental stone materials; and higher education. Apart from the economic activities 'other business services' and 'other services', all other branches have reached very high levels of OHS coverage.

### **Questions of the European Committee on Social Rights**

**As regards small enterprises, supervisory activity by the labour inspectorate has revealed that most of these companies do not meet the legislative requirements on occupational health services. The Committee asks how many workers are employed in such companies, and therefore estimated to not have occupational health services at their disposal.**

**The Committee notes that problems continue to exist in implementing this provision. Whilst the report indicates that a number of information and administrative measures have been put in place to improve the situation, it does not specify what these measures are. The Committee therefore asks the next report to provide more detailed information on such measures.**

The Labour Inspectorate does not keep track and thus does not have information on the number of workers in small enterprises that are covered by OHS. However, the problem with providing OHS with some employers with low staff numbers persists. As the

service fees are subject to the number of staff, servicing a small enterprise is not economically profitable for OHS providers.

General Labour Inspectorate systematically takes the measures mentioned in the second part of the question on improving the situation concerning the OHS coverage of small enterprises. Small enterprises are a priority of the GLI activity every year, especially those who have started their business recently and have come to the knowledge of GLI. For the period 2005-2007, the share of small enterprises (with a staff of between 1 and 49 workers) visited by labour inspectors amounts to 83-84% of all inspected companies in the national economy, while those visited for the first time are between 8 000 and 10 000 for the three years. As a result of the measures taken, there is a sustainable growth in the number of employers who comply with their obligation to provide their workers with OHS, with their share reaching 84%, in 2007, as stated above. The overwhelming part of the 8 403 enterprises inspected in 2007 are from the small business sector, with the employers providing OHS coverage after the inspection.

## Article 11 – The right to protection of health

### Article 11§1

- 1) Please describe the general public health policy and legal framework. Please specify the nature of, reasons for and extent of any reforms.
- 2) Please indicate the measures taken (administrative arrangements, programmes, action plans, projects, etc.) to implement the public health policy and the legal framework.
- 3) Please supply any relevant statistics or other information on the main health indicators and on health services and professions (for example WHO and/or Eurostat data).

Social relations relevant to the protection of the health of the citizens of the Republic of Bulgaria are provided for in the Health Act. Under this Act, the protection of the health of citizens as a state of total physical, psychological and social wellbeing, is a national priority and is guaranteed by the state.

An important element of the application of health policy is the provision of universal access to health services. For this purpose, a Minister of Health Ordinance approves a certain package of services that includes actions on the promotion of health, prevention of diseases, dispancercysation, infectious diseases control, participation in national health programmes, medical-diagnostic activities, as well as provision of medicines from the positive list. The government's dedication to guarantee this access is expressed through the provision of the necessary financial resources which are guaranteed by law.

Appropriate conditions for out-of-hospital and hospital treatment, including adequate hospital infrastructure, modern equipment, qualified personnel and the application of the principles of good medical practice are ensured through the application of mandatory national health standards, mandatory accreditation and constant control by the National Health Insurance Fund (NHIF) and other institutions.

In the field of health promotion there is a number of national strategic documents. The following are examples of concrete success achieved:

- a) *health attitude related to protection against infectious diseases (AIDS, tuberculosis)* – for young people there is a broad spectre of activities carried out at national and municipal level;
- b) *smoking, drugs and alcohol abuse* – simultaneously, health education, appropriate fiscal policy and legislation, are applied;
- c) *healthy dietary habits* – there is an approved action plan on foods and diets aimed at positive changes in the national dietary status. Specific attention is paid to the matters of obesity, the nutrition of women in fertile age and during pregnancy, including those of low income and disadvantaged social status. Measures on the improvement of the nutrition of children, especially little children, are improved through renewal of health experts' knowledge, raising public and parental awareness regarding children's dietary recommendations, etc. Since 2005 the government has been providing free milk and breakfast to all children in primary school;
- d) *prevention and control of health risks related to the working environment* – carried out on the basis of the Healthy and Safe Working Conditions Act;
- e) *prevention of accidents* – it is related to the provision of adequate infrastructure, living and working environment and traffic control;
- f) *environment* – adequate legislative basis, normative acts and guidance for the respective structures are developed, on the implementation of analyses, assessments,



research related to the condition of the components of the environment. These are separated under the following components:

- Atmospheric air. The concrete application of existing control mechanisms is carried out on the basis of a harmonious system of procedures that includes preliminary assessment and systematic control of potentially harmful to the population's health emissions of existing sources (monitoring and targeted research). In cases of violations, sanctions are imposed.
- Waters (drinking water, bathing water and swimming pools). Monitoring is carried out on the different kinds of waters, as well as preliminary and periodic control, having well developed and adequately functioning announcement and sanctions systems.
- Soils. The legislation has provided for mechanisms and procedures carrying out researches for anthropogenic contamination of the soil, pollution with heavy metals, analysis of the condition of the soil in the protected sanitary areas of water sources.
- Noise. The respective legislation is developed and there is a general approach to avoiding, overcoming and decreasing the harmful consequences of noise on health and improving the quality of life. There is also a functioning national system for monitoring of noise in the environment, development of strategic noise maps (analysis of the present situation, prognoses and measures for priority action plans).
- Working environment. There are legislative documents that establish the general requirements, obligations, organisation and management of the activity on the provision of safe and healthy working conditions, and the introduction of prevention approaches.
- Food safety. There are mechanisms and procedures adopted for risk assessment and provision of food safety. There is also coordination and planning of control authorities in all stages of food production and food trade.

The execution of all procedures on control of environment factors and assessment of health risks are carried out by a well structured network of laboratories.

*g) Sexual health.* The Ministry of Health makes systematic efforts to provide young people with access to modern sexual education within the framework of the education process. There is a programme and an effective method for the training of teachers and pedagogic councillors. There are Bulgarian appliances, translated and adapted international guidelines and information materials. The Ministry of Health is making continuous efforts for the provision of access to sexual education to all young people in schools and great headway has been made in this aspect. The Ministry of Health is implementing a number of pilot projects and programmes in the field of sexual health and the prevention of HIV. Work is done with over 150 pilot schools in 17 regional centres with the financial assistance of the Global Fund to Fight AIDS, Tuberculosis and Malaria, as well as the United Nations Population Fund.

With the support of UNICEF, a model was developed and a pilot service centre for young people was opened.

*h) Mental health.* The Bulgarian government has adopted a Mental Health Policy 2004-2012 as well as a National Action Plan towards it, which was most recently updated in 2006. The Minister of Health established a National Council on Mental Health. The treatment and rights of patients with mental disorders are provided for in Chapter 5 Mental Health, of the Health Act, as well as in a number of ordinances issued by the Ministry of Health. Medical standards in psychiatry were approved with a 2004 Ordinance. In 2007, the Ministry of Health and the Ministry of Labour and Social Policy signed a Framework Agreement on the Improvement of the Situation of Persons with Mental Disorders. A joint methodological guidance was issued in this aspect. Within the framework of different projects, several media campaigns were carried out against stigmatisation and discrimination.

*i) Health education.* The provision to the broad public with information on health risks, health condition and health needs in the community, the presentation of policies and programmes on promotion of health and prevention of diseases, are carried out through organised press conferences, round tables, participations in radio and TV shows, publishing and proliferation of press materials for the population. If needed, certain groups at risk are receive a more targeted information approach.

The Regional Inspectorates for Public Health Protection and Control (RIPHPC) nationwide are being used very actively for the distribution of health information materials. They carry out seminars with health and non-health specialists, health training in kindergartens and schools, media promotion, etc. Over recent year, there is a growing amount of internet based-materials.

A number of activities are also implemented at the local level and are oriented above all towards the increase of health knowledge and the protection against the most wide-spread diseases and provision of access to health information. RIPHPC immunisation cabinets provide the necessary immunisations to children who do not have a general practitioner. They hold talks and meetings with young people from minority origin on health-related topics. Overall, these activities are carried out together with non-governmental organisations and with the cooperation of the leaders of the respective community.

### **Questions of the European Committee of Social Rights**

**It asks for information in the next report on the improvements achieved in reducing the mortality due to cardiovascular diseases.**

#### **National Programme on Combating Cardiovascular Diseases 2000-2005**

The registered mortality rate from cardiovascular diseases in 2000 was 66.3% of all deaths. The same indicator in 2007 was 65.8%, which marks a decrease of 0.5%. We are noting a steady downward trend in the cardiovascular disease mortality rate and we expect that towards the end of 2008 this indicator to point at 65.6%.

It has to be noted that the decrease in cardiovascular disease mortality rate, apart to the implemented activities under several programmes, is also due to a number of other factors, among which demographic condition, living standard, genetic reasons, lifestyle, etc.

The National Programme for Combating Cardiovascular Diseases highlights the promotion and prevention of risk factors and in this aspect, the impact should be assessed in the long term.

#### *Infant and maternal mortality*

**The Committee asks for information on the progress achieved concerning infant and maternal mortality rate.**

#### **Infant Mortality**

<b>Year</b>	<b>Total infant mortality(per 1000 live births)</b>	<b>Infant mortality in cities (per 1000 live births)</b>	<b>Infant mortality in rural areas (per 1000 live births)</b>
<b>2003</b>	12,3	10,7	16,5
<b>2004</b>	11,6	10,2	15,3
<b>2005</b>	10,4	8,9	14,6

<b>2006</b>	9,7	8,6	13,1
<b>2007</b>	9,2	7,9	12,7

### **Maternal Mortality**

<b>Year</b>	<b>Maternal mortality (per 100 000 live births)</b>
<b>2003</b>	5,9
<b>2004</b>	10
<b>2005</b>	11,3
<b>2006</b>	6,8
<b>2007</b>	10,6

Despite the fluctuation of this indicator, it is noticeable that there is great progress in the limitation of negative trends in maternal mortality (15.0, in 1998). These variations are primarily due to the extreme sensibility of the indicator, which reacts very sharply to even a single death more per year.

The Ministry of Health and NHIF are creating conditions for decreasing maternal mortality by placing pregnancy and birth as priorities of both institutions. The Health Act guarantees financially the birth of uninsured women as well. Regular examinations of pregnant women are ensured under an Ordinance. NHIF has a Maternal Health Programme. Requirements and incentives for the improvement of training and qualification of obstetrician specialists and general practitioners are introduced through system mechanisms. The publishing of a medical standard on obstetrics is forthcoming. Every case of death of a pregnant woman or a woman in child-birth is investigated.

#### *Access to care*

**The Committee requests more information on the removal of geographic and administrative restrictions of the access to health care.**

The deregulation of patients' right to choose health care without territorial restrictions lead to a redistribution of the patient flow from the lower to the higher levels of hospital service. There is a growth of patients treated in university hospitals of about 10 to 20% at the expense of smaller municipal hospitals. This is due to the provision of better quality health care due to the better diagnostics and treatment capacity of university hospitals.

**The Committee asks for information on access to health care for the most disadvantaged groups.**

The Ministry of Health is carrying out a number of activities and measures outlined in the main priorities of the Health Strategy for Persons in Disadvantaged Situation belonging to Ethnic Minorities, which are the following: decreasing infant and maternal mortality rate; limitation of disease rate from infections and parasitic diseases; improvement of sexual and reproductive health; carrying out preventive checks with mobile units. In addition to this, as of the end of March 2008, we concluded successfully the twinning project under the PHARE programme BG 04/IB/SO/04 **“Restructuring of Pilot Multiprofile Hospitals and Development of Emergency Medical Assistance in order to Improve the Access to Health Care of Vulnerable Population Groups, with Focus on the Roma Population”**, together with the Social Health School of Andalusia,

Spain, and the Ministry of Health of Italy. The general goal of the project is to provide access to quality health services, including emergency health services, to ethnic minorities with a special focus on the Roma population, vulnerable social groups and persons living in remote and hard-access areas, and the improvement of the quality of life of the population through reduction of the mortality rate, secondary complications and especially cardiovascular diseases (infarct of the myocardium, acute heard failure, etc.).

The Ministry of Health issued **Ordinance No. 26 of 14 June 2007 on the Provision of Obstetrician Assistance to Women without Health Insurance and the Implementation of Examinations to Children and Pregnant Women outside the Scope of the Mandatory Health Insurance**. This Ordinance defines the scope and procedure for provision of health services related to obstetrician assistance to women without health insurance as well as the procedure and order for examining children and pregnant woken outside the scope of mandatory health insurance with kits, reagents and equipment provided by the Ministry of Health.

#### *Health professionals and equipment*

**The Committee asks for clarification on how the “health map” is applied to ensure that health facilities are apportioned equally between the country’s different geographical areas.**

The number of general practitioners in the country in 2007 is 4 980 /0.7 per 1 000 persons of the population/, with a minimum number provided for in the National Health Map of 4 910 practices, with 95% of those GPs with individual practices /according to NSI data/.

The number of specialists in out-of-hospital assistance in 2007 /according to NSI data – natural persons/ is 12 102 /1.6 per 1 000 persons with a minimum of 4 987 provided for by the National Health Map.

The number of hospital beds in 2007 /including department hospitals but excluding dispensaries with hospital/ is 44 650 /5.8 beds per 1 000 persons; if we add to that the number of beds in dispensaries with hospitals, the total would be 48 749 beds /6.4 per 1 000 persons/.

The National Health Map contains local health maps. Those envisage the needs of general practitioners, specialists in out-of-hospital assistance, number of hospital beds of different kinds. These necessities are calculated on the basis of objective criteria, including indicators on activity, demographic situation and hospitalised disease rate. Until now, in the development of local health maps, local health authorities as well as representatives of the local government have taken part in the process. This is important in order to reflect the local particularities. Local maps are an element of the national health map which also includes other elements – specialised hospitals, state and mental hospitals, as well as a list of healthcare establishments for hospital care which are not allowed to be privatised.

#### **Article 11§2**

**1) For States that have not accepted paragraph 1, please describe the general public health policy and legal framework. Please specify the nature of, reasons for and extent of any reforms.**

**2) Please indicate the measures taken (administrative arrangements, programmes, action plans, projects, etc.) to implement the public health policy and the legal framework.**

**3) Please supply any relevant statistics or other information, including on consultation and screening services in schools and for the rest of the population.**

### **Questions of the European Committee of Social Rights**

#### *Health education in schools*

#### **The Committee asks for detailed information on health education in schools.**

The acting system of health education in schools in Bulgaria grasps all students from I to XII grade. It is developed on the principle of integration – health education is included in the curricula of the subjects of *homeland* in I grade, *world around* in II grade, *human and nature* in III-VI grade, *biology and health education* in VII-XII grade. Education forms are class-study – within the mandatory and free choice curriculum; as well as out-of-class and out-of-school education.

#### *Sex education in schools*

#### **The Committee asks for detailed information on sex education in schools.**

Sex education is included within the framework of health education. It grasps all students from I to XII grade. There are also independent topics in the subjects, *human and nature* in III-VI grade, *biology and health education* in VII-XII grade. The mandatory form of education is class-study. In many schools this is complemented by out-of-class and out-of-school for of education.

#### *Public information and awareness raising*

#### **The Committee asks for information on all subjects covered by public information and awareness raising campaigns as well as their geographic distribution.**

##### **Antismoking campaigns**

Within the framework of the National Programme for Limitation of Smoking /2002-2005/, training courses were organised for general practitioners, specialists and experts from RIPHPC, on increasing their skills in consultancy on how to quit smoking. A guidebook was published for health professionals on prevention and limitation of smoking, and a film was distributed in support of consultants. In 2005, the 28 RIPHPCs opened consultancy cabinets for the population on quitting smoking. Public Health Protection Units under RIPHPCs established themselves as partners and methodical tutors of school counsellors and teachers in schools and kindergartens in the prevention activity on smoking and the distribution of information on the damage caused by smoking. Every year, there were competitions for financing of small projects with financing from the Programme, which were implemented overwhelmingly among young people. Participants in the competitions were RIPHPCs, NGOs and schools. Print materials were published and distributed nationwide. Health education standards and methodology were developed on the problems of smoking in school, but so far those have not been introduced. The marking of international days without smoking established itself as an opportunity that is taken all over the country in order to increase public awareness about the damage of smoking. The campaign Quit and Win which is aimed at promoting quitting smoking is carried out regularly. Since 1995, every year we are holding the International Competition for Childrens' Drawing "No to cigarettes!", which is a successful project on the prevention of smoking in infant and primary school age. The role of the media is constantly growing in

the proliferation of information among the population on smoking as a risk factor for over 20 widespread diseases.

### **Information campaigns on HIV/AIDS**

Information campaigns on the issues of HIV/AIDS are laid as one of the main interventions of Component 7 “Prevention of HIV among Young People and outside School” of the “HIV/AIDS Prevention and Control” Programme, implemented by the Ministry of Health and financed by the Global Fund to Fight *AIDS*, Tuberculosis and Malaria, in the 2004-2008 period.

Every year, there are information ANTI/AIDS campaign at national level aimed at raising sensibility and knowledge among young people and the general population concerning HIV/AIDS, changing attitudes towards protection from contamination and increasing tolerance towards persons living with HIV/AIDS.

During the period of implementation of the “HIV/AIDS Prevention and Control” Programme, each years there are national campaigns held starting on 1 December – the World AIDS Day, and ending on the International Day of Solidarity with those affected by HIV, which is marked on the third Sunday of the month of May. Traditionally, national campaigns are a joint initiative under Component 7 of the Programme, the Ministry of Health, UNAIDS and the ANTI/AIDS Coalition, and have reached over 150 000 young people both in urban and rural areas. The Ministry of Health has regional-level partners in the face of the RIPHPCs as well as over 50 non-governmental organisations, subcontractors under the “HIV/AIDS Prevention and Control” Programme. Within the framework of the campaigns, every year there are 300 000 cards and/or flyers and 20 000 posters printed and distributed as well as video and audio clips shot, concerts, street parades, theatre plays, photo expositions, essay competitions, trainings of young people, and film showings organised.

In the 2004-2008 period, in relation to the World Aids Day, 1 December, the following ANTI/AIDS campaigns took place:

- ✓ You Decide, national campaign for the prevention of HIV/AIDS among girls and young women, 2004/5;
- ✓ Check Yourself for HIV/AIDS. Anonymously and Free of Charge, national campaign for voluntary and free of charge HIV testing, 2005/6;
- ✓ It Is Important to Know! It Is Human to Communicate!, national ANTI/AIDS campaign about the ways of contracting of and protection against HIV, 2006/7;
- ✓ Be in Check, national information ANTI/AIDS campaign aimed at developing knowledge about protection and avoiding the main misconceptions concerning HIV/AIDS, 2007/8;
- ✓ National information ANTI/AIDS campaign aimed at raising sensibility of the broad public and young people, 2008/9 (currently in planning).

In the meantime, since 2007, every year a one-month Summer ANTI/AIDS Campaign is held on voluntary, anonymous and free of charge HIV testing on the Bulgarian Black Sea Coast, within which around 3 000 persons are tested, most of them having their vacations in our Black Sea resorts. With this we are promoting the possibilities for HIV testing in cabinets for anonymous and free consultancy and HIV/AIDS research, which provides a maximum number of people to check their HIV status.

### Article 11§3

- 1) For States that have accepted neither paragraph 1 nor paragraph 2, please describe the general public health policy and legal framework. Please specify the nature of, reasons for and extent of any reforms.
- 2) Please indicate the measures taken (administrative arrangements, programmes, action plans, projects, etc.) to implement the public health policy and the legal framework.
- 3) Please supply any relevant statistics or other information on the percentage of smokers in the general population, trends in alcohol consumption and the rates of vaccination cover for infectious and epidemic diseases.

#### Questions of the European Committee of Social Rights

**The Committee asks for information on the levels of water pollution.**

See Appendix 2.

**The Committee asks for information on whether national legislation on nuclear safety has been fully harmonised with EU acquis.**

Bulgarian legislation in the field of safe use of nuclear energy is fully harmonised with Community law, with the exception of Council Directive 2006/117/EURATOM on the supervision and control of shipments of radioactive waste and spent fuel. The latter will become part of national legislation with the adoption of amendments of the Safe Use of Nuclear Energy Act, which is expected to take place by the end of 2008.

**The Committee asks for information on progress made towards closing reactors of the Kozlodui nuclear power plant.**

In execution of the obligations of the Republic of Bulgaria under article 30 of the Treaty of Accession to the European Union, units 3 and 4 of the Kozlodui nuclear power plant were shut down on 31 December 2006. After the shutdown of units 3 and 4, both units were issued licences by the Nuclear Regulation Agency for exploitation in E regime, without production of electric and/or heating power, with conservation of processed nuclear fuel in the reactor reservoir. The licence of unit 3 is valid for eight years, while unit 4 received a licence for 10 years.

**The Committee asks for information about measures taken to reduce noise in urban areas.**

In order to reduce noise pollution in urban areas and negative consequences thereof to citizens' health, in 2006 the Protection from Noise in Urban Environment Act entered into force, as well as three other acts, transposing Directive 2002/49/EC of the European Parliament and the Council relating to the assessment and management of environmental noise. In correspondence with the new legislation on noise levels, the three largest metropolitan areas in the country, Sofia, Varna and Plovdiv, are developing strategic noise maps, which will be used as a basis for the preparation of action plans for the reduction of noise pollution in these cities. Under EU requirements, plans are to be ready by mid-2013. Additionally, the Ministry of Health is controlling noise caused by local sources.

**The Committee asks for information about the application of the legislation on the prevention and limitation of asbestos pollution, particularly concerning the obligation of owners of residential and public buildings to check for the presence of asbestos and take any necessary steps to remove it, and obligations on firms with regard to the removal of asbestos.**

Since 1 January 2005, on the territory of the Republic of Bulgaria it is forbidden to market and place in primary use any kind of asbestos (including chrysotils asbestos) and asbestos-containing materials and goods. The use of products containing asbestos fibres that have already been installed and/or are in use before 1 January 2005, remains allowed until their exploitation deadline and their final dismantling and disposing off.

Inspections show that as a result of the GLI control activity over recent years and the broad information of the public, hazards at work with asbestos and asbestos-containing goods, there are positive changes in the actions of employers concerning the protection of workers in relation to the abovementioned dangerous products. Inspections show that the matter of safety in the demolition (disassembly) of construction mechanisms and insulations is still relevant. These processes are usually associated with dust-raising which cannot be effectively controlled with traditional techniques, means and methods.

Since 1990 there is a slight but steady trend of decreasing in the number of workers suffering from asbestos-related diseases, and in the moment their total is under 200 per year.

**The Committee asks for information to enable it to assess the implementation of the Foods Act.**

The Foods Act and the legislative norms under it introduce European legislation on food safety and are fully in correspondence with it. Under the provisions of article 12 of this Act, all sites for production and trade in foods, must be registered with the respective RIPHPC, and the respective regional veterinary health service (RVHS), according to the territorial location of the site.

According to the provisions of article 34 of the Act, in 2000, the National Council on Food Safety (NCFS) under the Council of Ministers was established, in order to coordinate state policy on food safety and carry out functions on risk management. The NCFS is composed of one Deputy-minister of Health, one of Agriculture and Foods, and one of Economy and Energy, the Chairperson of the Bulgarian Association of Food and Drink Industry (BAFDI), and one representative of the consumer protection associations. One of the main functions of the NCFS is to implement a policy of integrated official control on food safety in the food chain and to direct methodologically the activity on coordination of the functions of competent authorities.

**The Committee asks for information on trends in tobacco, alcohol and drug consumption.**

Since 1 January 2006, the excise on cigarettes in Bulgaria was increased, which lead to an increase in the price of the product of more than 40%. As a result of this, their consumption decreased by 31% in the month of March, compared to the same period in 2005. Even though in the following months it increased again, in June it was 22% less than in the same month of 2005.

The Ordinance on the Conditions and Procedure for allowing by exception Smoking in Designated Areas of Covered Public Places and Covered Workplaces, entered into force on 1 January 2005. With the 2006 amendment of article 218, paragraph 2, of the



Health Act, the amount of the fine for legal persons was increased (in case of repeated violation the sanction is between BGL 3 000 and 10 000). Between 1 January 2005 and the end of June 2006, 448 436 inspections were carried out, issuing 23 722 instructions, 2 720 deeds to natural persons and 1 181 deeds to legal persons, to total amount of penal enactments equalling BGL 316 490.

The Tobacco and Tobacco Goods Act regulates the maximum content of harmful substances allowed in cigarettes, with the level of tar dropping to 10 mg. per cigarette by 31 December 2010; the level of carbon dioxide is equal to that of European requirements – 10 mg. per cigarette since 1 January 2007. The Ordinance on the Requirements, Labelling, Branding and outside Design of Tobacco Goods, and on Establishing Standards for Carrying out Assessment of the Conformity of the Content of Harmful Substances in Cigarettes, of 1 January 2005, introduced the requirements of mandatory and additional notices on the packaging of tobacco goods. Texts regulating the advertising of tobacco goods are in line with the respective European Union directive.

Since 2002, no wide scale survey has been conducted in Bulgaria on the incidence of smoking and the overall data that is being used is from the population census done in 2001.

One of the main priorities of the public health policy is **the prevention of diseases related to the use of narcotic substances.**

Currently, there is a National Strategy on Fighting Drugs, 2003-2008, and an Action Plan towards it that are being implemented.

We are implementing activities on decreasing the use of drugs, with priorities such as preventing the use of narcotic substances, control of activities with narcotic substances with medical, treatment, and rehabilitation purposes, decreasing health damage.

In order to prevent the use of narcotic substances, we have developed and are applying programmes of universal and selective prevention (for high-risk groups), programmes in help of parents in addressing drug-related problems.

There are 27 Local Councils on Narcotic Substances and prevention and information centres under them, aimed at applying the national drugs policy at the local level.

In order to facilitate access to effective programmes for persons addicted to drugs, a Drug Addiction Treatment Map in Bulgaria has been introduced. The National Drug Addictions Centre has developed an information and consultancy centre for persons suffering from drug addiction and their families.

In order to treat drug addictions, in the country there is a network of treatment centres and programmes for treatment at national and local level. There are also therapeutic modules in penitentiaries.

Programmes for substitution and support treatment with opiate agonists are one effective form of specialised out-of-hospital treatment. The development and broadening of substitution and support is ensured with the 2006 National Programme for Development of the Treatment System of Methadone Support Programmes in Bulgaria (2006-2008). 17 programmes have been open during the period.

There are also functioning day centres and protected houses for patients who have successfully passed stationary programmes for treatment of drug addictions.

There is also a focal point functioning as a national unit for information on drugs and drug addictions in relation to the European Monitoring Centre for Drugs and Drug Addictions (EMCDDA).

**The Committee asks for information on the infectious diseases monitoring system enhancement project, developed with the support of WHO and the European Commission.**

After the 2003 EU peer review of the system for antiepidemic surveillance and assessment of the national system for supervision of infectious diseases under the methodology of the World Health Organization, we developed a National Plan for Observation and Control of Infectious Diseases, 2004-2007, which was adopted by the Council of Ministers on 22 July 2004. The Plan was developed in correspondence with the following measures of the European Union concerning the observation of infectious diseases and the early warning system: 2009/98/EC; 2000/57/EC; 2000/96/EC; 2002/253/EC; 2003/534/EC; 2003/542/EC.

In the Action Plans for the preparation of Bulgaria for accession to the European Union for 2004/2005/2006/2007, under chapter 13 Social Policy and Employment, the Ministry of Labour and Social Policy was in charged with measure No. 368 – Coordination of the implementation of the National Plan for Observation and Control of Infectious Diseases.

All activities envisaged for different years have been completed:

- There is a National Programme for the Eradication of Measles and Innate Rubeola, which was adopted by the Council of Ministers on 16 November 2005, in response to the 2002 WHO Global Strategy for the Elimination of Measles and Innate Rubeola worldwide by 2010;
- Bulgarian legislation in the field of infectious diseases is harmonised with EU legislation with Ordinance No. 21 of 18 June 2005 on the Procedure for the Registration, Communication and Reporting of Infections Diseases (SG, No. 62/2005). The Ordinance includes a list of infectious diseases updated with the European one, that are subject to communication, introduces a three-level system of classification of the cases of infectious diseases, as well as all definitions of cases of infectious diseases, according to EU measures;
- There is a National Pandemic Plan on Influenza, adopted by the Council of Ministers on 13 January 2006. The Plan is aimed at providing the necessary conditions for the preparation of the country to meet a pandemy of influenza and minimize the losses caused by it;
- In 2006, the National Reference Centre on Nosocomial Infections was established, under the National Centre of Infectious and Parasitic Diseases, which provides methodological guidance and carries out referent laboratory activity on nosocomial infections and antibiotic resistance;
- Within the framework of the European Union's PHARE Programme, a project was developed for the strengthening of the infectious diseases supervision system at a cost of EUR 4 mln. and an implementation deadline of 18 months (BG/2004/IB/SO/03). The project includes the finishing of the national information system of infectious diseases and its integration into European systems, improvement of the quality of diagnostic activities as part of the infectious diseases control, development and introduction of national standards that correspond to those in other European countries, etc., as well as providing the laboratory network of RIPHPC with up-to-date equipment for diagnostics of infectious diseases;
- Upon the adoption of the WHO International Health Rules in 2006, these were introduced in Bulgarian national legislation with the preparation and adoption of the Ordinance on Health Border Control on 9 October 2010. The Ordinance sets out the conditions and procedure for the implementation of health border control of the Republic of Bulgaria in order to protect public health and prevent the importation

and proliferation of diseases of international health significance. Control and health assessment is carried out on persons, luggage, cargo, containers, transport vehicles, goods and postal parcels, arriving to the territory of the Republic of Bulgaria from infected areas.

- Organisation of an up-to-date system of control of internal hospital infections (IHI) in health establishments – development of Health Standards on IHIs – 2007.

### **The Committee asks for up-to-date information on the immunisation coverage rates.**

The Ministry of Health purchases vaccines and the products necessary for the implementation of mandatory planned and targeted immunisations and re-immunisations; bio products for carrying out post-exposure prevention; and technical means for their application for the following 12 infectious diseases: tuberculosis, hepatitis B virus, diphtheria, tetanus, pertussis, poliomyelitis, measles, epidemic parotitis, rubeola, rabies, *Crimean-Congo* haemorrhagic fever, abdominal typhus.

Under the approved immunisation calendar of the Republic of Bulgaria, mandatory prevention immunisation is carried out upon reaching certain age, namely:

- **all newborn babies** are vaccinated against tuberculosis, and hepatitis B before their let out of the hospital;  
The average scope of these vaccines is about 98.2% for the one against tuberculosis, and 98.5% for the one against hepatitis B.
- **at the age of one month** the second dose of the vaccine against hepatitis B is placed, with the scope here reaching 97.8%;
- upon reaching the age of **2, 3 and 4 months**, children are vaccinated against diphtheria, tetanus, hoping-cough and poliomyelitis – average scope of 95.7%;
- the third dose of the vaccine against hepatitis B is placed at the age of **six months** which renders the immunisation complete /95.4% scope/;
- **between the age of 7 and 10 months**, babies without a mark of the tuberculosis vaccine from hospital are given the same vaccine again, but only after a negative tuberculosis test /95.6% scope/;
- upon **completing 13 months** children are given a combined vaccine against measles, rubeola and parotitis /96% scope/;
- upon **completing 16 months** children are given their first reimmunisation against poliomyelitis as well as against diphtheria, tetanus, hoping-cough. The deadline for their completion is the 24-month age of the child. The average scope is 95.6%.

The period between 2 and 6 years-old is free of immunisations. Afterwards, the immunisation calendar foresees the following vaccines:

- **at the age of 6** – a combined vaccine against diphtheria, tetanus, hoping-cough and poliomyelitis. This immunisation was introduced in the immunisation calendar as of April 2008 and therefore data concerning its scope will only be available at the beginning of 2009;
- **at the age of 7** – reimmunisation against tuberculosis for children with a negative tuberculosis test /94% scope/;
- **at the age of 11** – same as 7 years-olds /94.3% scope/;
- **at the age of 12** – reimmunisation with measles, rubeola and parotitis as well as a vaccine against tetanus and diphtheria /average scope of 94.1%/;
- **at the age of 17** - reimmunisation against tuberculosis for children with a negative tuberculosis test and a vaccine against tetanus and diphtheria /average scope of 91%/.

Upon completion of 25 years, reimmunisations are done once every 10 years with a vaccine against tetanus and diphtheria. The average scope among adults is 74%.

*Accidents prevention*

**The Committee asks for detailed and up-to-date information on domestic and leisure-time accidents, including accidents at school and those caused by animals.**

**T A B L E**  
**of traffic accidents, deaths and injuries, by years**

Year	Traffic accidents	Deaths	Injuries
2003	6997	960	8488
2004	7612	943	9308
2005	8224	957	10112
2006	8222	1043	10215
2007	8010	1006	9827
until 31 August 2008	5236	680	6548

Concerning adopted legislative changes in relation to the decrease of traffic accidents and accident victims, the Traffic Act amendments and supplements of 2007 (SG, No. 51/2007) must be taken into account. According to these amendments, the amount of fines is increased for certain harsh violations of traffic regulations causing serious traffic accidents; the mandatory use of childrens' safety systems in automobiles is introduced; the possibility to have 2 children under the age of 7 or one under the age of 14 riding in the back seat is abolished as there are no protection devices for them; obligations and responsibilities concerning the good shape of roads, traffic organisation and management, road signalisation working order and marking within and outside settlements, are made more concrete; legislative preconditions are introduced for the establishment of commissions on traffic safety under regional governors and mayors of municipalities, aimed at coordinating the activity of providing traffic safety on their territory; regulations on and obligations of pedestrians' and bicyclists' are made more precise.

Unfortunately, we do not have information concerning accidents on domestic and leisure-time accidents, including accidents at school and those caused by animals.

## **Article 12 – The right to social security**

### **Article 12§1**

**1) Please describe the general legal framework. Please specify the nature of, reasons for and extent of any reforms.**

**2) Please indicate the measures taken (administrative arrangements, programmes, action plans, projects, etc.) to implement the legal framework.**

**3) Please provide pertinent figures, statistics or any other relevant information**

The right to social security is guaranteed by provisions of the Constitution of the Republic of Bulgaria, which have a direct impact on the security protection of citizens – article 51, paragraphs 1 and 2 – the right to social security.

One of the main legislative sources of social security is the Social Security Code /SSC/.

#### **Personal scope - amendments:**

The following categories are added to the list of mandatory security against all social risks under the SSC (article 4, paragraph 1):

- persons included in the programmes From Social Assistance to Provision of Employment; and In Support of Motherhood, without being insured against unemployment;

- state executive magistrates;

- civil servants under the State Agency “National Security” Act;

- one-man traders, non-personified associations as well as managers in bankruptcy and liquidators;

Natural persons – members of non-personified associations are added to the list of mandatory security against disability due to general disease and against death (article 4, paragraph 3, of the SSC).

Spouses of civil servants in a long-term mission on diplomatic service during a mandate abroad, may be secured if they wish to do so on their own account against disability due to a general disease, old age and death, or against all insured social risks without occupational accident, occupational disease or unemployment, on a chosen security monthly income between the minimum and maximum amount of the income for a self-securing person, established under the State Social Security Budget Act for the respective year (article 4, paragraph 7, of the SSC).

#### **Security contributions and security income (in force since 1 October 2007) – article 6, of the SSC**

Amounts of security contributions for state social security, as follows:

- 26,5 percent – for persons working under the conditions of III category labour, secured against all secured social risks;

- 29,5 percent - for persons working under the conditions of II category labour, secured against all secured social risks;

- 29,5 percent – for persons under article 4, paragraph 1, subparagraph 1, and for examining magistrates under the Judiciary Act secured against all secured social risks;

- 25,5 percent – for persons secured against all secured social risks, minus unemployment; if these persons work under the conditions of I and II category labour, the security contribution is 28,5 percent;

- 22 percent – for persons secured against disability, old age and death, and occupational accident and occupational disease; if these persons work under the conditions of I and II category labour, the security contribution is 25 percent;

6. 25,5 percent - for persons secured against all secured social risks, minus occupational accident and occupational disease;

7. 22 percent - for persons secured against disability, old age and death.

In all cases, secured persons must pay a security contribution of between 0,4 and 1,1 percent against occupational accident and occupational disease, established under the State Social Security Budget Act for the respective year under groups of main economic activities.

Social security contributions for workers and persons under article 4, paragraph 1, subparagraphs 7 and 8, must be paid on received or accounted but unpaid gross monthly salaries, but not on less than the minimum monthly security income under paragraph 2, subparagraph 3, and not more than the maximum monthly amount of the security income. Security contributions for workers and persons under article 4, paragraph 1, subparagraphs 5, 7 and 8, and paragraph 3, subparagraphs 5 and 6, are distributed between insurers and insured as follows:

1. for 2000 and 2001 - 80:20;

2. 2002 - 2004 - 75:25;

3. 2005 - 70:30;

4. 2006 - 65:35;

5. (amended, SG, No. 105/2006) 2007 - 65:35;

6. (amended, SG, No. 105/2006) 2008 - 60:40;

7. (amended, SG, No. 105/2006) 2009 - 55:45;

8. (amended, SG, No. 105/2006) 2010 and the following years - 50:50.

Security contributions for workers and persons under article 4, paragraph 1, subparagraphs 7 and 8, must be paid on received or accounted but unpaid gross monthly salaries, but not more than the maximum monthly amount of the security income, and are charged to the state budget, respectively to the budget of the judiciary.

Security contributions for persons exercising only agricultural activity are on the account of the insured persons only and are due in advanced based on each monthly security income between 25 percent of the minimum and the maximum amount of the income, established with the State Social Security Budget Act for the respective year (article 6, paragraph 7, of the SSC).

The final amount of the monthly security income for persons under article 7 is defined for the period during which they have been exercising labour activity during the previous year, based on the incomes declared in verification with the yearly tax declaration under the Taxation on the Incomes of Natural Persons Act, and may not be less than the minimum monthly security income or larger than the maximum monthly security income. The final security contribution is due based on the yearly security income defined as the difference between the declared income and the total of incomes, for which advance security payments have been done. Security payments are made on account of the insured persons to the amounts established by the Pensions Fund, within the deadline for submitting the declaration.

#### **Procedure for payment of security contributions – changes**

The novelty in the procedure for payment of security contributions is that when salaries are accounted for but have not actually been paid, insurers pay security contributions that are to the account of the insurers and the insured persons until the end of the month for which it has been accounted for. Security payments of self-insuring persons are made in person or through security funds until the 10-th day of the month after the one they are due for.

Insurers pay security payments for every month separately by transferring funds from their accounts to the respective account of state public security and additional

mandatory pension security, upon payment of or accounting for salaries, including advance payments. Security contributions due for payment upon termination of the security or in case of leave are paid outside the regular payment of salaries or advances, are made together with the first set of following security contributions.

*(Ordinance on the Elements of Remuneration and Incomes for which Security Contributions are Due (title amended, SG, No. 1/2007)*

#### **Security seniority – changes**

Security seniority, without making security contribution, is counted as the time during which self-insuring persons, secured against all social risks without occupational accident, occupational disease, and unemployment, have been receiving financial compensations for temporary inability to work, pregnancy and birth and raising a little child as well as the periods of temporary inability to work, pregnancy and birth and raising a little child, during which they have been entitled to a financial compensation (article 9, paragraph 2, subparagraph 5, of the SSC).

#### **Compensation for temporary inability to work – changes**

SG, No. 105/2006 introduces certain amendments to the provisions regulating the right to compensation for the period of leave due to inability to work (article 40 and following, of the SSC).

Secured persons for all social risks, without occupational accident, occupational disease and unemployment, or for all secured social risks without unemployment, are entitled to a financial compensation instead of remuneration for the period of leave due to temporary inability to work, in case they have security seniority of at least 6 months.

Financial compensations for temporary inability to work, employment transfer due to reduced ability to work, pregnancy and birth and raising a little child, and the assistance from the state social security are calculated and paid by territorial units of the National Social Security Institute to the bank accounts submitted by secured persons. If a person is not entitled to compensation or assistance, the official who is in charge of the management on the payment of compensations and assistances, issues a refusal order. This order is revoked if within the prescribed deadline under article 115, paragraph 4, of the SSC, the person or the insurer presents new or additional proof establishing the right of the respective person to compensation or assistance.

The insurer pays the insured person for the first day of the temporary inability to work his/her average daily remuneration for the month in which the temporary inability to work has occurred, but not less than the average daily remuneration agreed to.

*(Ordinance on the Mandatory Insurance of Workers against the Risk of ‘Occupational Accident’)*

The regulation of the right to compensation for temporary inability to work to self-insuring persons, respectively the SSC also regulates the remuneration based on which the compensation of self-insuring persons is calculated – this is done to the amount of 80 percent (due to general disease) or to the amount of 90 percent (due to an occupational accident or occupational disease), of the average gross monthly remuneration or the average daily security income, on which contributions have been made for the respective risk over the period of six calendar months, preceding the month in which the inability to work has been incurred.

For the days included in the above-mentioned period, the average minimum monthly salary for the respective period is taken into account, if the person has been secured under the legislation of another country under the conditions of an international

treaty to which the Republic of Bulgaria is a party. This change affects both secured and self-securing persons.

The income based on which the financial compensation is calculated is taken into account for the days included in the period for which the compensation is calculated, during which the person has been receiving financial compensation from the social security for temporary inability to work or pregnancy and birth.

#### **Financial compensation for unemployment – changes**

SG, No. 105/2006, amends article 54a, paragraph 1, of the SSC, which regulates the right to financial compensation in case of unemployment. Persons for whom security contributions have been paid or are due for all social risks for at least 9 months out of the last 15 before the termination of the security, are entitled to financial compensation in case of unemployment. The other conditions which persons must meet remain as they were. The same Act for the Amendment and Supplement of the SSC, also adds a new paragraph 2 to article 54a, under which for the acquisition of the right to financial compensation, the following periods are also taken into account:

1. of paid and unpaid leave for raising a child;
2. of paid and unpaid leave for temporary inability to work and for pregnancy and birth;
3. of the unpaid leave of 30 work days in one calendar year;
4. considered as security seniority under the legislation of another country, on the basis of an international treaty to which the Republic of Bulgaria is a party.

The procedure for the granting and payment of financial compensations in case of unemployment is provided for by the Ordinance on the Granting and Payment of Financial Compensations in case of Unemployment.

The SSC amendments of SG, No. 105/2006, provide for the right to financial compensation for long-term unemployment.

Under article 54i of the SSC (new provision) the right to financial compensation in case of long-term unemployment is afforded to persons who are registered as unemployed in the respective territorial unit of the Employment Agency and meet the following conditions:

1. after receiving compensation for unemployment they have remained unemployed and for at least 12 months, preceding the month in which they have submitted the statement under article 3, have maintained their registration in the respective territorial unit of the Employment Agency;
2. they have reached the age of 60 years and 6 months for men, and 57 years and 6 months for women;
3. the total of their age and security seniority is no less than 60 months less than the one required under article 68, paragraphs 1 - 3;
4. they have not been granted pension;
5. they are not exercising labour activity for which they would be subjected to mandatory security under article 4.

The financial compensation for long-term unemployment is of the minimum amount established by the state social security budget act for the respective year. This kind of unemployment compensation is granted on the basis of an application to the territorial unit of the National Social Security Institute, and is paid each month, starting from the date of submitting the application, for a period of no longer than 30 months. The payment of the financial compensation for long-term unemployment is terminated under the conditions of article 54e, as well as in case of granting another kind of pension. Unemployed persons are entitled to a compensation for long-term unemployment only once.



## **Mandatory pension security – changes**

The pension represents a periodic payment from the social security funds, which substitutes the lost income from employment upon the setting in of the risk of old-age, general disease, occupational accident, occupational disease, or death.

From this point of view, the condition is set as a prerequisite before the incursion of the security risk for which the person is secured. In certain conditions, however, pensions are also granted without depending on the participation of persons in the work life and their obligation to make security contributions, i.e. regardless of whether they are secured – in such cases we are talking about pensions unlinked to work activity.

Pensions that are related to work activity and are subject to the participation of persons in the security process are: old-age and security seniority pension; disability due to a general disease pension; disability due to an occupational accident or occupational disease pension.

In 2006, a very important principle amendment of the legislation was introduced in relation to the minimum amounts of work activity pensions. A new approach was taken in the definition of these amounts, which is entirely within the spirit of modern pensions schemes. **This amendment introduced two regimes of the minimum amounts of pensions – pensions for work activity are subjected to the minimum amount of the pension for security seniority and old-age under article 68, paragraphs 1-3 of the SSC; while pensions unlinked to work activity continue to be subject to the amount of the social pension for old age.**

The minimum amount of the old-age and security seniority pension under article 68, paragraphs 1-3, is established via the Budget of the State Social Security Act /BSSSA/ for the respective year. Under article 9 of the BSSSA for 2008, the minimum amount of the old-age and security seniority pension is established as follows:

1. between 1 January and 30 June – BGL 102,85;
2. (amended, SG, No. 58/2008, in force from 1 June 2008) between 1 July and 31 December – BGL 113,49.

The Budget of the State Social Security Act for 2007 /BSSSA for 2007/ introduced a significant change in the legal order for the establishment of the amount of the pension. This is related to the provision of incentives to persons not to retire upon meeting the respective conditions that enable them to the right to pension, but to continue working. These incentives mean an increase of 1,5 percent of the burden which was added in certain conditions to the security seniority in the formula for the calculation of the pension.

The BSSSA for 2008 introduced further changes to article 70, paragraph 1 of the SSC, increasing the burden of the years of security seniority acquired after meeting certain conditions without having a pension granted, by 1,5 percent to 3 percent for each year.

Under article 70, paragraph 1, of the SSC, the amount of the security seniority and old-age pension is established by the income based on which the pension is calculated by multiplying the amount of: one percent of each year of security seniority and the respective proportion part of the share of years of security seniority. If persons have a security seniority, without conversion, of 37 years for men, and 34 years for women, and continue working after reaching the age stated in article 68, paragraphs 1-2, without being granted a pension, for every additional year of security seniority after this age, the share is 3 percent, and the respective proportional part of this share for the months of security seniority. The share for each year of security seniority after reaching the age under article 68, paragraph 1-3, is established for actual security seniority, without conversion, acquired after 31 December 2006.

There are also changes in the way to establish the amount of the pension for disability due to a general disease. Under article 75, paragraph 1, of the SSC, the amount of the pension for disability due to a general disease by multiplying the income from which the pension is calculated, by the amount calculated by: one percent per each year of security seniority and the respective proportionate part of the share of months of security seniority.

In case when on the date of incurring the disability, the secured person is of age lower than the provided for under article 68, the difference between his/her age and the age under article 68 is recognised as security seniority.

The amount of the pension for disability due to a general disease may not be less than:

1. (amended, SG, No. 57/2006) for persons with ability to work reduced by over 90 percent – 115 percent of the minimum amount under article 70, paragraph 7;
2. (amended, SG, No. 57/2006) for persons with ability to work reduced by between 71 and 90 percent – 105 percent of the minimum amount under article 70, paragraph 7;
3. (amended, SG, Nos. 1/2002 and 57/2006) for persons with ability to work reduced by between 50 and 70.99 percent – 85 percent of the minimum amount under article 70, paragraph 7.

The amount of the pension for disability due to an occupational accident may not be under:

1. (amended, SG, No. 57/2006) for persons with ability to work reduced by over 90 percent – 125 percent of the minimum amount under article 70, paragraph 7;
2. (amended, SG, No. 57/2006) for persons with ability to work reduced by between 71 and 90 percent – 115 percent of the minimum amount under article 70, paragraph 7;
3. (amended, SG, Nos. 1/2002 and 57/2006) for persons with ability to work reduced by between 50 and 70.99 percent – 85 percent of the minimum amount under article 70, paragraph 7.

Furthermore, the minimum amount of the hereditary pension may not be under 75 percent of the minimum amount under article 70, paragraph 7 (article 81, paragraph 2, of the SSC).

Pensions unrelated to work activity are: military disability pension (article 85, SSC); social pension for old-age (article 89, SSC); social pension for disability (article 90, SSC); distinguished services pension (article 91, SSC); and personal pensions (article 92, SSC).

Council of Ministers Decree No 29 of 6 June 2008 on the Establishment of a New Amount of the Social Pension for Old-Age (SG, No. 55/2008), defined a new amount of the social pension for old-age as of 1 July 2008 – BGL 84,12 per month. This amount includes the update for 2008, provided for under article 100 of the Social Security Code.

### **Questions of the European Committee of Social Rights**

**The Committee examined the social security system in details in its previous conclusion (Conclusions 2004, p. 60). The system is based on collective funding as it is funded either by contributions (employers, employees and the state) or by the state budget.**

Here, we would like to add that the social security system is also financed by self-securing persons. Under article 5, paragraph 2, of the SSC, self-secured persons have the obligation to pay their security contribution entirely at their own cost.  
*(Ordinance on the Social Security of Self-Securing Persons and Bulgarian Citizens Working Abroad)*

**In reply to the Committee's question, the report provides information on penalties for delay or non-payment of contributions by employers. Fines from 50 to 1,000 Bulgarian Lev (BGL; 25.60 to 512.80 €) are imposed for violations of the Social Security Code; the fine for drafting false documents concerning the payment of insurance contribution is 500 BGL (256.10 €) for each case.**

**The report also indicates that in order to reduce the extent of undeclared work the Labour Code, since 2002, requires obligatory registration of employment contracts. This measure has improved social security coverage; but the number of undeclared workers is still unknown.**

**The Committee recalls that, under Article 12§1 of the Revised Charter, the social security system should protect a significant proportion of the population at least in the following branches: health care, sickness, unemployment, old age, employment injury, family, and maternity. According to the report, in 2004, out of a population of 7.7 million, the number of insured persons was 2.4 and that of pensioners 2.3 million. The number of beneficiaries of unemployment benefit was about 87,400; no statistics are available on the number of beneficiaries of sickness, maternity, and family benefits. The Committee asks the next report to provide figures, for the period of reference, for every branch in percentage in order to be able to assess the effective coverage of the population (health care, sickness insurance and family benefits) and of the active population (sickness and maternity benefits, unemployment benefits, pensions, and work accident or occupational disease benefits).**

INFORMATION ON THE MAIN INDICATORS OF SOCIAL SECURITY  
 For the period 2005-2007

	2005	2006	2007
<b>Secured persons</b>			
Persons secured against all insurance risks	2 504 208	2 645 727	2 772 414
For General Disease and Motherhood Fund	2 318 624	2 444 185	2 623 859
For Occupational Accident and Occupational Disease Fund	2 247 283	2 362 837	2 533 676

**Total social expenditure on social security increased from 2.9 to 4.1 billion BGL (from 1.4 to 2.1 billion €). Income from contributions followed the same trend. Total expenditure on social protection per capita increased from about 366 to 540 BGL (from 187.60 to 276.90 €) and the share of the GDP remained stable around 11 %.**

**The amount of the sickness benefit is determined on the basis of the monthly social security income and cannot exceed the maximum of this income (in 2003 the average social security income was 280 BGL (143 €). According to the report, in 2003 the average sickness benefit was 209 BGL (107 €) and 295 BGL (151 €) in case of work accidents or occupational diseases. The Committee considers these amounts to be adequate, though it notes that, in 2004, the real growth rate of the benefit decreased**

sharply in comparison with the real growth rate of the previous years (roughly it was 8 % in 2000 and 2 % in 2004 for both kinds of sickness benefits). Moreover, the Committee notes that there is no longer information in the report on the minimum level of sickness benefits, which it found in its previous conclusion to be very low (Conclusion 2004, p. 63). It therefore asks the next report to provide this information.

Average amount of the compensation for temporary inability to work – average daily compensation /in BGL/	2005	2006	2007
Financial compensation for temporary inability to work due to a general disease	10,54	11,89	11,32
Financial compensation for temporary inability to work due to non-occupational accidents	12,18	13,36	11,57
Financial compensation for taking care of a sick relative and quarantine	10,34	11,24	10,60
Financial compensation for temporary inability to work due to occupational accidents and occupational diseases	15,24	16,56	15,16
Financial compensations for pregnancy and birth	8,95	9,85	12,74
Financial compensation for raising a little child	5,88	7,03	8,08

**The conditions for receiving unemployment benefit are: eligibility requirements (nine months insurance within the last fifteen months prior to the termination of the employment); being registered as unemployed; no entitlement to old-age pension; and not exercising any working activity subject to mandatory insurance. The length of the benefit is conditional upon the length of prior employment. Unemployed benefits are suspended when if the person receives sickness benefits for temporary incapacity of work. They are terminated when the person resumes employment, is no longer registered as unemployed, or reaches the pensionable age. Unemployed persons whose employment relation terminated because of their wishes or with their consent or due to their behaviour are entitled to the minimum unemployment benefit for four months. In reply to the Committee’s question, the report states that unemployment benefits are suspended in accordance with the 1997 Employment Promotion Act if an individual refuses a job offer which corresponds to his/her qualifications and skills, or when s/he terminates participation in training programmes or refuses to participate in this kind of measures. The Committee asks whether it is possible to appeal against a decision to suspend benefits.**

Under article 5 of the Ordinance on Granting and Paying Financial Assistance for Unemployment, financial assistance for unemployment is granted, refused, amended, suspended, renewed, discontinued and restored, under an order from an official charged with the management of unemployment security in the respective territorial unit of the NSSI, or another official entrusted with this task by him/her. The official must come out with a decision within 14 days of the submission of the application or from the incursion of the respective circumstances. These orders may be appealed under the procedure set out in Chapter Eight of the SSC.

Articles 117 and those following it regulate the procedure of appealing orders for suspension and discontinuation of unemployment compensations (paragraph 1, subparagraph 2, letter B). Appeals against such decisions are submitted to the director of the respective territorial unit of the National Social Security Institute, within fourteen days of receiving the order. The director of the territorial unit comes out with a motivated decision on the appeals or requests within one month of their submission. With this

decision, the director may repeal the orders and to decide the appeals and requests in terms of merits. The decision is then communicated to the interested parties within 7 days of its enactment.

The decision of the director of the territorial unit of the National Social Security Institute may also be appealed (article 118 of the SSC). It may be appealed within 14 days of its communication before the administrative court. The appeal is submitted through the director of the territorial unit who must forward it along with the entire file to the court within 7 days. The court examines the cases under the procedure of the Administrative Proceedings Code /APC/. Administrative court verdicts are subject to a cassation appeal under the procedures of the Administrative Proceedings Code. Secured persons must not pay any fees for cases under this procedure.

**The Committee notes that minimum level of unemployment benefits, which it found very low in its previous conclusion (Conclusion 2004, p. 63) did improve slightly during the reference period. In 2003, the minimum was still set at 70 BGL per month and the maximum at 140 BGL (respectively, 36 and 71.70 €); in 2004, the minimum level increased to 80 BGL (41 €) as a consequence of the increase in the minimum wage (120 BGL, 61.50 €). The Committee recalls that Article 12§1 requires that social security benefits are adequate, which means that, when they are income-replacement benefits, their level should be fixed such as to stand in reasonable proportion to the previous income and it should never fall below the poverty threshold defined as 50 % of median equivalised income and as calculated on the basis of the Eurostat at-risk-of-poverty threshold value. In 2003, the poverty threshold as defined above was 58.50 € per month. The minimum unemployment benefit was therefore manifestly inadequate and the situation not in conformity with the Revised Charter.**

<b>Financial compensation for unemployment /in BGL/</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>
Average monthly amount of the compensation for unemployment	97,11	105,91	110,24
Minimum amount of the compensation for unemployment	80	90	90
Maximum amount of the compensation for unemployment	140	160	180

**In its previous conclusion the Committee found the situation not in conformity with the Revised Charter as regards the minimum level of old-age pension, of the social old-age pension, of invalidity and survivors' pensions. This was due to the fact that all these pensions are multiplier of the social old-age pension, whose level was very low (46.40 BGL, 23.90 € per month in 2002). The Committee notes that the level of the social old-age pension increased only slightly (50 BGL, 25.60 € in 2003) and it was still far below the poverty threshold defined as 50 % of the median equivalised income (58.50 € in 2003). This means that, in addition to the social old-age pension, the minimum pensions for old-age (57,5 BGL, 29.40 €), invalidity (70 BGL, 35.80 €), and survivors' (45 BGL, 23 €) were in 2003 still below the poverty threshold. Notwithstanding a slight increase, the situation was still not in conformity in 2004. In reply to the Committee's question, the report indicates that only 5 102 persons are solely entitled to the social old-age pension out of 2.3 million pensioners. However, since the minimum level of the other kinds of pensions are calculated on the basis of the social oldage pension, a broader number of pensioners live upon manifestly inadequate benefits. The situation is not in conformity with the Revised Charter.**

See above, the information on article 12, paragraph 1.

The Committee finally notes that the average old-age pension, which amounted in 2003 to 110.60 BGL (56.70 € per month) is slightly below to the poverty threshold defined as 50 % of the median equivalised income. It therefore asks the Government to prove in the next report that old-age pensions are compensated by other means of subsistence.

The Committee recalls that the scope and level of family benefits are assessed under Article 16.

	2005	2006	2007
4. Average monthly amount of the pension for security seniority and old-age of a single pensioner /in BGL/	138,75	156,7	177,23
5. Average monthly amount of the security income for the calculation of the individual coefficient	331,62	354,5	398,17

#### Article 12§2

1) Please describe the general legal framework. Please specify the nature of, reasons for and extent of any reforms.

2) Please indicate the measures taken (administrative arrangements, programmes, action plans, projects, etc.) to implement the legal framework.

3) Please provide pertinent figures, statistics or any other relevant information

See above, mandatory pension security - changes

#### Update of pensions

Under article 100 of the SSC, pensions granted before 31 December of the previous year, are updated each year at of 1 July, with a decision of the Supervisory Board of the National Social Security Institute, with a percentage equalling the total of 50 percent growth of the security income and 50 percent of the consumer prices index for the previous calendar year.

*(Ordinance on Pensions and Security Seniority)*

#### Questions of the European Committee of Social Rights

During the reference period, the main change which occurred was the codification of all existing legislation. The Social Security Code regulates the three pillars system of social security: compulsory insurance (sickness, maternity, unemployment, old-age and death, invalidity, work accident and occupational diseases); compulsory supplementary social insurance (old-age and invalidity), voluntary supplementary social insurance (unemployment and old-age).

According to the report, the on-going reform has allowed so far improved living conditions, the functioning of the labour market, and increased employment and reduced the informal economy. Total social security expenditure and per capita social

**security expenditure increased during the last five years, though total expenditure remained stable in terms of GDP share (see Conclusion under Article 12§1 in this volume). Single benefits also increased in nominal terms; however the Committee notes that, in general, the rate of all benefits grew steadily in the period 2000-2003, but since then their real growth rates has declined.**

**The report describes in detail the institutional organization of social security, (the main body is the National Social Security Institute (NSSI)), as well as the functioning of the various funds (Sickness, Maternity, Unemployment, Pension, and Work accident and occupational diseases). Public resources are allocated according to the State Social Security Budget Act.**

**Supervision of compliance with the legal provisions on social security, including payment of contributions is carried out by the bodies of the NSSI.**

The National Revenue Agency /NRA – [www.nap.bg/](http://www.nap.bg/) unified as of 1 January 2006 the gathering and servicing of republican taxes (incomes tax, patents taxes, VAT, corporate taxes) and mandatory security contributions (health security, pension contributions, additional mandatory pension security, etc.).(*National Revenue Agency Act*)

As of the start of 2006, NRA offices also receive the notifications of employment contracts, declarations of secured persons, and declarations on security contributions due. The Agency also receives declarations (forms) for health contributions of persons secured by the state budget as well as declarations on social and health securities paid in advance.

Compensations for temporary inability to work, pregnancy and birth and raising a little child, for unemployment, for occupational accident and occupational disease as well as all other compensations continue to be paid out by the National Social Security Institute.

As of 1 January 2007, significant changes in security legislation were introduced in the field of calculation and payment of financial compensations for temporary inability to work, motherhood and assistance from the state social security. This activity was entrusted to the NSSI and its territorial units, to pay out compensations and assistance directly to the secured persons. The Ordinance on the Calculation and Payment of Financial Compensations and Assistance from the State Social Security entered into force.

**Sickness benefits are payable for temporary incapacity to work on the condition that the claimant has paid six months of contributions. This condition is lifted when incapacity is due to a work accident or occupational disease. Cash sickness benefits are paid for a maximum of fifteen days by the insurers. The Committee asks who takes charge of the payment of sickness benefit for temporary incapacity longer than fifteen days.**

Until 31 December 2006, insurers used to pay the secured persons for the first day of temporary unemployment (disease) a financial compensation that used to be at their expense. Under the new version of article 40, paragraph 4, of the SSC, the insurer pays the secured person for the first day of temporary inability to work the average gross salary for the month during which the inability to work has been incurred, but no less than the average daily salary that has been agreed to.

Therefore, under article 40, paragraph 4, of the SSC, for the first day after the setting in of the temporary inability to work, the employer pays the worker a salary, rather than a compensation for temporary inability to work for each period of temporary inability to work. For this remuneration for the first day of temporary inability to work, security contributions are due and must be paid.

The compensation for temporary inability to work is paid from the first day of the setting in of the recuperation of the ability to work or until the establishment of a disability

by a TEMC – article 42, paragraph 1, of the SSC. This means that for the first day of temporary inability to work (disease), the worker receives his/her average gross salary for the month in which the inability to work has been incurred, and from the second day on, he/she receives a compensation for temporary inability to work, which is paid out by the NSSI.



## **Article 13 – The right to social and medical assistance**

### **Article 13§1**

**1) Please describe the general legal framework. Please specify the nature of, reasons for and extent of any reforms.**

**2) Please indicate the measures taken (administrative arrangements, programmes, action plans, projects, etc.) to implement the legal framework.**

**In comparison with the previous report, the following changes had occurred in the legislation:**

#### **Social Assistance Act:**

Art. 2. (1) (amend. SG 120/02; amend. and suppl. – SG 52/07) The Bulgarian citizens, foreigners with permanent residence permit in the Republic of Bulgaria and the foreigners, to whom is conceded asylum, status of refugee or humanitarian status, and the foreigners being granted temporary protection, shall be obliged to render care for satisfying their basic needs.

(4) (amend. SG 120/02; amend. and suppl. – SG 52/07) Foreigners with permanent residence permit in the Republic of Bulgaria and foreigners, to whom is conceded asylum, status of refugee or humanitarian status, and the foreigners being granted temporary protection, and those for who this is provided in international agreement to which the Republic of Bulgaria is a party shall benefit of the right under Para 3.

Art. 5. (1) For fulfillment of the state policy in the field of social assistance a Social Assistance Agency shall be created under the authority of the Minister of labour and social policy.

(5) (amend. - SG 18/06) The territorial divisions of the Social Assistance Agency shall be regional directorates for social assistance at the regional administrative centers and directorates "Social Assistance".

(7) (amend. - SG 18/06) The activity, structure and number of the staff of the Social Assistance Agency, the number and the territorial range of its divisions shall be determined with a structural regulation, adopted by the Council of Ministers upon proposal by the Minister of labour and social policy.

Art. 12c. (new - SG 18/06, in force from 01.07.2007) (1) (Amend. – SG 58/2008, in force from 01.07.2008) Unemployed persons in working age, excluding the persons referred to in Art. 12b, par. 2, may receive monthly social assistance continuously for a period of 12 months.

(2) The right for monthly social assistance shall be restored after the expiration of a 12 month period from its termination under the conditions and the order as provided in the regulation for the implementation of this act.

(3) The provisions under par. 1 shall not be applied in the cases referred to in Art. 12b, par. 4.

Art. 14. (1) The social assistance shall be exempt from taxes and fees.

(5) (new – SG 120/02, amend. - SG 18/06) The persons, who had received social assistance in a non bona fide performance, shall be deprived from them for a term of two years.

Art. 14a. (new - SG 18/06) (1) In case of a written warning about funds received from social assistance in a non bona fide performance or after a decision of the director of the respective "Social Assistance" Directorate, an inspection shall be carried out by an official from the Directorate.

Art. 14b. (new - SG 18/06) (1) The order referred to in Art. 14a, par. 3 may be appealed under the provisions of the Administrative procedure code in a 7-day period from the day it has been received. The appeal stops the implementation of the order and preliminary implementation shall not be allowed.

(2) (amend. – SG 59/07) The compulsory execution of the order referred to in Art. 14a, Par. 3 shall be allowed upon request of Directorate “Social Assistance” under the provisions of Art. 418 of the Civil Procedure Code.

### **Regulation for Implementation of the Social Assistance Act**

Art. 9. (1) Persons or families whose income for the preceding month is lower than the determined differentiated minimum income shall have right to monthly assistance.

8. (amend. – SG 101/07) for a child:

a) until reaching 16 years of age and if he/she studies – until acquiring secondary education, including the graduation of XIII grade in a professional high school but not more than 20 years of age – 71 percent of GMI;

b) from 7 to 16 years of age and if he/she studies – until acquiring secondary education, including the graduation of XIII grade in a professional high school, and has 5 or more unjustified absences for the respective month – 30 percent of GMI;

c) from 7 to 16 years of age, who does not study - 20 percent of GMI;

9. for an orphan child; for a child accommodated in a family of close friends or relatives or in foster family under art. 26 of the Child Protection Act; for a child with permanent damage – 100 percent of GMI;

10. for a parent bringing up child/children alone:

a) up to 3 years of age – 120 percent of GMI;

b) up to 16 years of age, and if he/she studies – until the acquiring of secondary or professional education, but not more than 20 years of age – 100 percent of GMI;

11. for pregnant women 45 days before childbirth and for a parent bringing up a child up to 3 years of age – 100 percent of GMI.

Art. 10. (1) Monthly benefit shall be granted if the persons or the families meet also the following additional conditions:

7. (amend. SG 40/03; amend. – SG 101/07) the unemployed must be registered in the directorates "Employment Bureaus" for at least 9 months before filing the application for social assistance and must not have refused a job offer and inclusion in courses for qualification and re-qualification, organized by the directorates "Employment Bureaus".

(2) (amend. SG 97/01; amend. – SG 54/06) The requirements of par. 1, item 1 shall not regard the inhabitants of a sole own home where a person with permanently reduced working capacity of 50 percent or over 50 percent, or very sick member of the family lives, as well as when the home is not a source of additional income due to impossibility of renting, poor technical condition, health, hygienic, social or other reasons.

Art. 25. (1) (amend. SG 42/99, SG 26/02, SG 40/03; amend. – SG 54/06) The monthly, the targeted and one-off benefits, by the assessment of the director of directorate "Social Assistance", shall be provided in kind and also in the cases when:

1. the parents do not take care of their children;

2. the cash benefit is not used according to its purpose.

(2) The benefit under par. 1 can be granted by:

1. partial or full payment of fees in children's institutions, undertaking the expenses for food in the school canteens and public canteens;
2. purchasing of food, clothes, shoes, school accessories, etc.;
3. in another way determined by social enquiry.

Art. 36.

(2) (amend. – SG 101/07) Social services, provided in the community, are:

1. personal assistant;
2. social assistant;
3. home assistant;
4. home social patronage;
5. day centre;
6. social rehabilitation and integration centre;
7. family type accommodation centre;
8. temporary accommodation centre;
9. community support centre;
10. centre for working with street children;
11. social vocational training centre;
12. crisis centre;
13. foster care;
14. transitory homes;
15. protected homes;
16. supervised homes;
17. mother and baby unit;
18. asylums;
19. public canteens.

(3) (amend. – SG 101/07) Specialised institutions for provision of social services are the following:

1. children's homes:
  - a) orphanages;
  - b) homes for physically handicapped children;
  - c) homes for children with mental disability;
2. homes for elderly persons with disabilities:
  - a) homes for elderly persons with mental disability;
  - b) homes for elderly persons, having mental disorders;
  - c) homes for elderly persons with physical disabilities;
  - d) homes for elderly persons, having sensory disorders;
  - e) homes for elderly persons, having dementia;
3. homes for old persons.

### **Family Allowances for Children Act:**

Art. 4. (amend. and suppl. SG 69/04, SG 21/06, in force from 10.03.2006 regarding the expression "12 months") Right to family allowance of art. 2, par. 1, items 1, 3, 4 and 5 shall have the families and the pregnant women with average monthly income per member of the family for the last 12 months lower or equal to the income, determined for this purpose in the State Budget of the Republic of Bulgaria Act for the respective year, but not lower than the previous year, except in the cases under art. 7, par. 2.

Art. 5a. (new – SG 69/04, in force from 01.07.2004) (1) (amend. - SG 21/06, in force from 01.01.2007) The pregnant women, whose income per member of the family is lower or equal to the income under art. 4, shall be entitled to one-off assistance for pregnancy in amount determined annually in the State Budget of the Republic of Bulgaria Act for the respective year, but not lower than the previous year, when they have no right to indemnification for pregnancy and birth under the Social Security Code and live permanently in the country.

Art. 6. (1) The mother shall have the right to one-off benefit for living childbirth regardless of the family income, when the child has not been placed for bringing up in a specialized child-care establishment.

(2) (amend. - SG 21/06, in force from 01.01.2007) The amount of the benefit under par. 1 shall be determined annually in the State Budget of the Republic of Bulgaria Act for the respective year, which shall not be lower than the previous year and shall be differentiated according to the sequence of the children born by the mother.

(3) (amend. - SG 21/06, in force from 01.01.2007) At birth of twins, one of which is a second child to the mother, the support shall be paid for each twin in the amount for a second child.

(4) When determining the sequence of the children only the children living at birth shall be taken into account.

(5) The benefit under par. 1 shall be paid to the mother, and upon impossibility to receive it – to another lawful representative of the child.

(6) (amend. - SG 21/06, in force from 01.01.2007, suppl. 71/2008) If until the age of 2 permanent disability of 50 or above 50 percent are established to the child, additional one-off benefit shall be paid to the mother in extent determined annually in the State Budget of the Republic of Bulgaria Act for the respective year, but not lower than the previous year.

Art. 7

(2) (amend. - SG 21/06, in force from 01.01.2006) Under the conditions of par. 1, items 1 – 3 the monthly benefit for children, accommodated for bringing up at families of relatives, close friends or foster family under the provisions of art. 26 of the Child Protection Act, shall be given in cash and/or in the form of social investments regardless of family income.

(3) (new – SG 69/04, amend. - SG 21/06, in force from 01.01.2006;) The monthly benefit under par. 2 shall be also given in cash and/or in the form of social investments after reaching 18 years of age until graduating from high school but not later than 20 years of age, if the accommodated continue to live in the family.

(4) (prev. (3) – SG 69/04; amend. - SG 105/05, in force from 01.01.2006; amend. - SG 21/06, in force from 01.01.2006; amend. – SG 113/07, in force from 01.01.2008) The amount of the benefit under par. 1 shall be determined every year in the State Budget of the Republic of Bulgaria Act for the respective year.

(5) (new - SG 21/06, in force from 01.01.2006; revoked – SG 113/07).

(6) (new - SG 21/06, in force from 01.01.2006;revoked – SG 113/07)

(7) (new – SG 69/04, prev. text of par. 5, amend. - SG 21/06) Under the provisions of par. 1, item 1 and 3, par. 2 and 3 after reaching 18 years of age the monthly benefit shall be given in cash and/or in the form of social investments if the person continues to study and regularly goes to school until graduating from high school but not later than 20 years of age.

(8) (prev. text of par. 04, amend. SG 69/04, prev. text of par. 06, amend. - SG 21/06) Under the provisions of par. 1, item 1 and 3 the monthly benefit for children with permanent disability, established by the competent health bodies, shall be given in cash and/or in the form of social investments regardless of the family income in double amount of the benefit, determined by the provisions of par. 4.

Art. 8. (1) (amend. - SG 21/06, in force from 1.01.2007) The monthly benefit for bringing up of child for a period up to one year in amount determined annually in the State Budget of the Republic of Bulgaria Act for the respective year, but not lower than the previous year shall be given in cash and/or in the form of social investments to the mother (the adoptive mother), whose income per member of the family is lower or equal to the income under art. 4, under the condition, that:

1. (amend. - SG 21/06) the mother (the adoptive mother) is not insured and does not receive indemnification for pregnancy, childbirth and bringing up of child under the provisions of the Social Security Code;

2. the child has not been accommodated for bringing up at a specialized child-care establishment at full state maintenance;

3. the child lives permanently in the country.

(2) (amend. - SG 21/06) Under the provisions of par. 1 monthly benefit for bringing up a child shall be given in cash and/or in the form of social investments also to the lone adoptive father.

(3) (amend. - SG 21/06, in force from 1.01.2007) Under the provisions of par. 1, items 1 – 3 the monthly benefit for bringing up of child with permanent disability shall be given in cash and/or in the form of social investments until the child reaches 2 years of age regardless of the family income.

(5) (new – SG 69/04; amend. - SG 21/06) When the mother (adoptive mother) acquires right to benefit under art. 48a and art. 52a of the Social Security Code before the elapse of the respective calendar month, the benefit under par. 4 for this month shall be given in money and/or in the form of social investments in extent, determined proportionally to the number of the days from the beginning of the month until the date of acquiring the necessary period of contribution.

(6) (new – SG 69/04; amend. - SG 21/06, in force from 01.01.2006) Under the conditions of par. 1 – 5 the monthly benefit for bringing up a child shall also be given in cash and/or in the form of social investments to the families of relatives and friends, and foster families for children, accommodated under the provisions of art. 26 of the Child Protection Act regardless of the family income.

(7) (new – SG 69/04, amend. - SG 21/06) The benefit under par. 6 shall be given in cash and/or in the form of social investments under the condition that no member of the family, where the child has been accommodated, receives benefits under the provisions of art. 53, par. 3 of the Social Security Code.

Art. 9. (1) (amend. - SG 21/06) The benefit under art. 7 and 8 shall be given in cash and/or in the form of social investments during the month, following the month for which they are due to the mother (the adoptive father/mother).

(2) Benefit can be received by the father with the explicit written consent of the mother.

(3) (amend. - SG 21/06) If it is impossible for the mother (the adoptive father/mother) to receive the assistance, it shall be given in cash and/or in the form of social investments to the legal representative or guardian of the child.

(4) (amend. - SG 21/06, in force from 01.01.2006) The monthly benefit for children with divorced parents shall be given in cash and/or in the form of social investments to the parent who is exercising the parent's rights.

(5) (suppl. SG 69/04, amend. - SG 21/06) The monthly benefit under art. 7 and art. 8 for children, accommodated for bringing up at a family of relatives, close friends or at a foster family under the provisions of art. 26 of the Child Protection Act shall be given in cash and/or in the form of social investments to the persons with whom the child is accommodated.

Art. 10.

(2) (new - SG 21/06) The benefit referred to in Art. 2, par. 1, items 3 – 5 may be given fully or partially in the form of social investments for the purpose of providing equal opportunities for the children at their raising, upbringing, training, education, health care, development and socialization in the cases when:

1. the parents do not take care of their children;

2. (amend. SG 71/2008) the family benefit is not used as determined.

(3) (prev. text of par. 2, amend. - SG 21/06, in force from 10.03.2006 in respect to the expression “12 months”) After the elapse of 12 months after the granting of the monthly benefit under art. 7 and 8 a new application – declaration shall be submitted.

(4) (amend. SG 120/02, prev. text of par. 3 - SG 21/06, suppl. 71/2008) The family benefit for children shall be granted with an order of the director of directorate "Social Assistance" or a person authorized by him/her.

(5) (prev. text of par. 4 - SG 21/06, amend. 71/2008) The refusal for granting family benefit for children shall be motivated. The order for refusal shall be communicated to the individual who submitted the application in written form in a 7 day period after it has been issued.

(6) (Amend. SG 120/2002, prev. text of par.5, amend. 21/2006, 71/2008) For the unsettled questions by this Act, concerning the issuing, challenging and execution of administrative acts, the provisions of the Administrative Procedure Code shall apply.

Art. 10a. (new – SG 69/04, in force from 1.01.2005) (1) To the families, whose children have been registered in first year of state or municipal school, shall be granted with one-off targeted benefit for covering part of the expenses in the beginning of the school year.

(3) (amend. - SG 21/06) The targeted benefits for the pupils can also granted as a social investment upon assessment of the directorates "Social Assistance" with the cooperation of the school management.

(4) (amend. - SG 21/06) Under the provisions of par. 1 – 3 the one-off targeted benefit shall also be granted in cash and/or in the form of social investments to the families of relatives and friends and foster families for children, accommodated under the provision of art. 26 of the Child Protection Act, regardless of the family income.

Art. 14. (Amend. SG, 71/2008) (1) In case of written warning for family benefits, received in non bona fide performance, or after the assessment of the director of the respective “Social Assistance” Directorate, an official from the directorate shall execute an inspection.

Art 14a (New SG, 71/2008) (1) the order under art.14, par.3 may be appealed under the provisions of the Administrative Procedure Code in a 7 day term from the day of it had been received. The appeal suspends the execution and no preliminary execution is allowed.

### **Health Insurance Act**

Art. 33. (1) (amend., SG 110/99; prev. text of Art. 33 – SG 95/06, in force from the day The Treaty for accession of the Republic of Bulgaria to the European Union enters into force) Obligatory insured by the National Health Insurance Fund shall be:

3. (amend. - SG 18/06) the foreign citizens or the persons without citizenship with permanent stay permit for the Republic of Bulgaria, unless provided otherwise by an international agreement to which the Republic of Bulgaria is a party;

Art. 40.

(3)

9. (prev. item. 8 - SG 18/06) the parents, adoptive parents or spouses who take care for disabled with lost working capacity over 90 percent, who constantly need somebody else's help.

### **Health Act**

Art. 82. (1) Out of the scope of the compulsory health insurance of the Bulgarian citizens shall be conceded medical services, connected with:

2. (new - SG 59/06) midwifery assistance for all health uninsured women regardless of the way of delivery, in range and by order, determined by an ordinance of the Minister of Health;

### **Social Security Code**

Financial support for prophylactics and rehabilitation

Art. 13a. (new – SG 105/06) (1) Persons, insured for all insured social risks, for all insured social risks except for labour accident and occupational disease and unemployment, for all insured social risks except for unemployment or for disability, old age and decease and for labour accident and professional disease, shall have the right to get financial benefits for prophylactics and rehabilitation, provided that for them insurance installments have been deposited or are due for a period of 6 calendar months, preceding the month, in which the prophylactics and rehabilitation are carried out.

(2) The requirement for deposited or due insurance installments for a period of 6 calendar months under par. 1 shall not apply for persons with disabilities resulting from labour accident or occupational disease.

(3) Persons, getting a personal pension for disability shall also be entitled to benefits under par. 1, provided that they are not of the age under Art. 68, par. 1-3 and are not insured.

(4) The conditions for use and payment of financial benefits for prophylactics and rehabilitation to persons under par. 1 and 3, as well as the procedures of selecting legal persons – executors of this activity, shall be determined in an ordinance of the Supervisory Board of the National Social Security Institute.

### **Ordinance № RD-07-5 from 16.05.2008 on the conditions and order for granting targeted assistance for heating**

Art. 2 (1) (Suppl. SG- 67/2008, in force from 29.07.2008) Right to targeted assistance for heating shall have the persons and families whose average monthly income for the preceding 6 months prior to entering the request-declaration is lower or equal to the differentiated minimum income for heating and meet the conditions under art. 10 and 11 of the Regulation for Implementation of the Social Assistance Act (RISAA).

(2) When determining the right for targeted assistance for heating the amount of the pensions, set after 1.07.2008, shall be decreased by a coefficient of 1.104.

(3) Basis for determining the differentiated minimum income for heating is the guaranteed minimum income (GMI), the monthly amount of which is set with an act of the Council of Ministers.

(4) (Amend. SG-67/2008, in force 29.07.2008) The differentiated minimum income for heating is determined as follows:

1. for a person living alone – 210 % of the GMI;
  2. for a person with permanently reduced capacity to work of 50 % or above 50 % living alone – 249,6 % of the GMI;
  3. for an orphan child – 196,8 of the GNI;
  4. for a lone parent with a child under 18 years of age, and if he/she is studying – until finishing secondary or professional education but not above 20 years of age – 157,2 % of the GMI;
  5. for each of the living together spouses – 144% of the GMI;
  6. for a child from 0 to 18 years, if he/she is studying – until acquiring secondary or professional education but not above 20 years of age – 157,2 % of the GMI;
  7. for a child with permanent disability – 196,8 % of the GMI;
  8. for a person living together with another person(s) or a family – 201,6 % of the GMI;
  9. for pregnant women 45 days before childbirth – 183,6 % of the GMI;
  10. for a parent taking care of a child under the age of 3 – 183,6 % of the GMI;
  11. for a person above the age of 70 years – 183,6 % of the GMI;
  12. for a person above the age of 65 years living alone – 274,8 % of the GMI;
  13. for a person above the age of 75 years living alone 288 % of the GMI;
  14. for a person with permanently reduced capacity to work of 50 % or above 50 % - 183,6 % of the GMI;
  15. for a person with permanently reduced capacity to work of 70 and above 70 % - 223,2 % of the GMI;
  16. for a person with permanently reduced capacity to work of 90 and above 90 % - 274,8 % of the GMI.
- (5) When present more than one ground for determining the percentage under par. 4, the higher percentage is applied.

### **Integration of People with Disabilities Act**

Art. 42. (1) (amend. – SG 97/06) People with permanent disabilities are entitled to monthly supplements for social integration according to their individual needs in consideration of the type of disability, the degree of reduced capacity to work and reduced capability for social adaptation.

(2) The supplement under par. 1 shall be differentiated and represents financial funds, which add to their own incomes and are designated for covering additional expenses for:

1. transport services;
2. information and telecommunication services;
3. training;
4. balneological treatment and rehabilitation services;
5. (revoked, prev. item 6 - SG 105/05) accessible information;
6. (prev. item 7 - SG 105/05; amend. – SG 97/06) rent of municipal lodging;
7. (new - SG 18/06, in force from 01.01.2007; amend. – SG 97/06) dietary nourishment and medical products.

(3) (new – SG 97/06) The individual needs under par. 1 shall be determined on the grounds of methods, approved by the Minister of Labour and Social Policy after the proposal of the Executive Director of the Agency for People with Disabilities and of the Executive Director of the Social Assistance Agency.

(4) (prev. par. 3 – SG 97/06) The total amount of the monthly supplement under par. 1 shall be formed as a sum of the resources, determined under par. 2



(5) (prev. par. 4 – SG 97/06) The addition shall be granted upon proposal by the commission under art. 13, par. 2 on the basis of social assessment.

(6) (prev. par. 5 – SG 97/06) The addition shall be granted on the basis of an application, submitted by a claimant or a person, authorised by him.

(7) (prev. par. 6 – SG 97/06) After the assessment of all the circumstances, reflected in the social assessment, the director of directorate "Social Assistance" or an official, authorised by him shall issue an order for its granting.

(8) (prev. par. 7 – SG 97/06) The order for granting or for refusal shall be communicated in written form to the person who had submitted the application, in 7 days term after its issuing.

(9) (prev. par. 8 – SG 97/06) The refusal for granting monthly supplement for social integration shall be motivated obligatorily.

(10) (amend. - SG 30/06, in force from 12.07.2006; prev. par. 9 – SG 97/06) The order under par. 6 shall be appealed before the director of the regional directorate "Social Assistance" under the provisions of the Administrative procedure code.

(11) (prev. par. 10 – SG 97/06) The people with permanent disabilities, accommodated with full state or municipal maintenance in medical establishments as well as in specialised institutions for a term longer than one month, shall not be entitled to the supplement under par. 1 for the period of their stay in them.

(12) (prev. par. 11 – SG 97/06) The claims of the persons for monthly supplements for social integration shall expire in a three month term counting from the end of the month, for which they refer.

(13) (prev. par. 12 – SG 97/06) The determination of the amount, the conditions and the order for granting, terminating and renewal of the supplement under par. 1 shall be provided in the regulation for implementation of the act.

Art. 42a. (New – SG 97/06) Entitled to a monthly supplement in consideration of the type of disability shall be the persons:

1. with difficulties in movement, with reduced capacity to work from 50 to 70 per cent – pursuant to Art. 42, par. 2, item 1;

2. with permanent hearing and/or visual disorders, resulting in reduced capacity to work of 71 and more than 71 per cent – pursuant to Art. 42, par. 2, item 5.

Art. 42b. (new – SG 97/06) Entitled to a monthly supplement in consideration of the degree of the reduced capacity to work shall have the persons with permanent disabilities:

1. with 50 and more than 50 per cent of reduced capacity to work – pursuant to Art. 42, par. 2, item 3;

2. with 71 and more than 71 per cent of reduced capacity to work – pursuant to Art. 42, par. 2, item 1;

3. with more than 90 per cent of reduced capacity to work, entitled to assistance – pursuant to Art. 42, par. 2, item 2.

Art. 42c. (new – SG 97/06) Children with reduced capability for social adaptation shall have the right to a monthly supplement under Art. 42, par. 2, item 1, 3 and 5.

Art. 42d. (new – SG 97/06) 91) Persons with permanent disabilities with more than 90 per cent reduced capacity to work, children with reduced capability for social adaptation and disabled veterans shall have the right to supplement under Art. 42, par. 2, item 4, which shall be granted once a year provided that medical prescription from a doctor-specialist is available.

(2) The persons with permanent disabilities entitled to assistance shall receive the double amount of the supplement under par. 1 to cover the expenses for one assistant, if they use such.

Art. 42e. (new – SG 97/06) Children with 71 and more than 71 per cent reduced capacity for social adaptation shall have the right to a monthly supplement under Art. 42, par. 2, item 2.

Art. 42f. (new - SG 97/06) The persons with permanent disabilities with 50 and more than 50% of reduced capacity to work shall have the right to a monthly supplement under Art. 42, par. 2, item 6, if they live on their own and the rental agreement has been concluded with them.

Art. 42g. (new – SG 97/06) Persons with permanent disabilities with 71 and more than 71 per cent reduced capacity to work and children with reduced capacity for social adaptation shall have the right to supplement under Art. 42, par. 2, item 7 under conditions and order set with an ordinance of the Minister of Health and the Minister of Labour and Social Policy.

Art. 43. (1) Right to monthly supplement in amount 70 percent of the minimum working salary for children with permanent disabilities up to 18 years of age and until finishing of secondary education but not later than 20 years of age shall have:

1. parents (adopters), when they bring up children with permanent disabilities;
2. families of relatives or close and foster families, where children with permanent disabilities are accommodated pursuant to art. 26 of the Child Protection Act.

**3) Please provide pertinent figures, statistics or any other relevant information, in particular: evidence that the level of social assistance is adequate, i.e. the assistance should enable any person to meet his/her basic needs and the level of the benefits should not fall below the poverty threshold. Information must therefore be provided on basic benefits, additional benefits and on the poverty threshold in the country, defined as 50% of the median equivalised income and calculated on the basis of the poverty risk threshold value published by Eurostat.**

The poorest families whose income is lower than the determined differentiated minimum income (DMI) are assisted by monthly social benefits. DMI is determined individually for every individual and is equal to the product of the guaranteed minimum income and the individual percent, determined according to the age, health condition, educational work load, the presence of cohabitation. The family DMI is equal to the sum of the DMI of its every member. The amount of the benefit is determined as the difference between the DMI of the individual/the family and the incomes for the preceding month (compared to the month for which the right is set).

Borderline of access to monthly social benefits under art. 9 from RISAA

Category	Percent of the GMI	Differentiated minimum income (DMI)
Individual above 75 years of age living alone	165%	90,80 lv.
Individual above 65 years of age living alone	140%	77,00 lv.
For individuals above 65 years of age	100%	55,00 lv.
Individual living with another person(s) or family, and for each of the living together spouses	66%	36,30 lv.
For individuals under the age of 65, living	73%	40,15 lv.
For an individual with 50 and above 50 % permanently reduced capacity to work	100%	55,00 lv.
For an individual with 70 and above 70 % permanently reduced capacity to work	125%	68,80 lv.

For a child under 16 years of age, and if he/she is studying – until acquiring secondary education, including until finishing XIII grade in a professional high school, but not above the age of 20	91%	50,05 lv.
For a child from 7 to 16 years of age, and he/she is studying until acquiring secondary education, including finishing XIII grade in a professional high school, but not above the age of 20, and he/she has 5 or more unexcused absences for the respective month	30%	16,50 lv.
For a child from 7 to 16 years of age that is not studying	20%	11,00 lv.
For an orphan child; for a child, accommodated in the family of relatives and close or in a foster family pursuant to art. 26 of the Child Protection Act; child with permanent disability	100%	55,00 lv.
For a lone parent of child/children under 3 years of age	120%	66,00 lv.
For a lone parent of child/children under 16 years of age, and if he/she is studying – until acquiring secondary or professional education, but not above the age of 20	100%	55,00 lv.
For pregnant women 45 day prior to childbirth and for a parent, bringing up a child under the age of 3 years	100%	55,00 lv.

The unemployed persons in capable of working age who apply for granting of monthly social benefits must have a 9 month uninterrupted registration at the directorate “Employment Bureau”. This category of individuals is encouraged to join programmes for temporary employment, literacy courses, qualification and re-qualification, aiming at better integration on the labour market and ensuring an income received from working. They can be an object of uninterrupted social assistance for a term not longer than 12 months. Exception is made for the following categories of individuals: parent caring for a child under the age of 3; persons with disability with permanently reduced capacity to work of 50 and above %; persons taking care of seriously ill member of the family or for seriously ill person, cohabitating with him/her; persons with severe mental disorders, verified by the respective medical establishments; persons above 18 years of age studying at daily form of education in the schools from the system of public education and in the secondary specialized schools.

For the period 2005-2007 monthly social benefits were given in sum as follows to:

- 2005 – 212 180 cases, including:
  - o 186 631 cases of persons in capable of working age;
  - o 188 144 unemployed persons;
  - o 1 553 persons under the age of 65, living alone;
- 2006 – 183 689 cases, including:
  - o 164 230 cases of persons in capable of working age;
  - o 173 493 unemployed persons;
  - o 1 701 persons under the age of 65, living alone.
- 2007 – 130 646 cases including:
  - o 120 794 cases of persons in capable of working age;
  - o 121 702 unemployed persons;
  - o 1 581 persons under the age of 65, living alone.

An average of 90 % from the beneficiaries of the monthly social assistance are individuals in capable of working age. This fact, once more, confirms the correct

direction that is apprehended and executed in the field of social assistance – activation of the unemployed persons in capable of working age to join actively the labour market, to obtain qualification and re-qualification, and thus increase their possibilities and chances for realization of income from working and inclusion in the system for social insurance, which will guarantee their income from pension in the future. For this aimed effect to be achieved, however, it is necessary that the level of social assistances granted to be lower and not to stimulate the dependency from the system for social assistance and passive behavior of the respective persons.

From the budget of the Ministry of Labour and Social Policy for 2006, 608,6 millions leva are spent:

- paid benefits pursuant to the Family Allowances for Children Act – 253,7 millions of leva;
- paid benefits pursuant to the Social Assistance Act – 91,2 millions of leva;
- targeted assistance for heating pursuant to Ordinance № 5 from 30.05.2003 – 83,3 millions of leva;
- payment of benefits under the Integration of People with Disabilities Act – 162,1 millions of leva;
- realization of programmes and measures pursuant the Child Protection Act – 4,0 millions of leva;
- health insurance installments of the individuals under art. 40, par. 2, items 1,4 and 8 from the Health Insurance Act – 13,4 millions of leva.

From the budget of the Ministry of Labour and Social Policy for 2007, 577,3 millions of leva are spent:

- paid benefits pursuant to the Family Allowances for Children Act – 243,4 millions of leva;
- paid benefits pursuant to the Social Assistance Act – 74,0 millions of leva;
- targeted assistance for heating pursuant to Ordinance № 5 from 30.05.2003 – 76,5 millions of leva;
- payment of benefits under the Integration of People with Disabilities Act – 140,5 millions of leva;
- realization of programmes and measures pursuant the Child Protection Act – 4,6 millions of leva;
- health insurance installments of the individuals under art. 40, par. 2, items 1,4 and 8 from the Health Insurance Act – 10,4 millions of leva.

### **Questions of the European Committee for Social Rights**

**The Committee request for more details about the social assistance in kind and the social services (categories of individuals included and number of persons that had received benefits during the reviewed period (2005 – 2007) and information showing the adequacy of the assistance in comparison with the life expenses.**

The targeted and one-off benefits are destined for assisting the individuals and families in covering special needs – transportation services (rail and ground transport of persons with permanent disabilities and mother of many children), incidentally occurring needs of medical, public utilities, educational or other type, as well as for issuing of a personal identification card. The accent falls on the actual social work and assessment of every individual case, aiming at making an objective assessment of the social, property and health status of the assisted individuals and families.

The implemented programme by the Ministry of Labour and Social Policy for targeted energy assistance is the most widely ranged in the field of social assistance and protection of people with low incomes. After evaluation of the importance of this programme for the past 5 year period, the conditions and order for granting this kind of assistance has been changed multiple times due to the necessity of bringing up to date of the borderline of access, the actual emerging of problems at the people's supply with solid fuels, the entering into the way of life of natural gas as an energy source for heating and the guaranteeing of better protection for the retired people as one of the risk groups in the society. The main goal of the programme has always been for it to be maximum effective for people that need the help of the state during winter time, socially just and responsible towards the Bulgarian taxpayer. The principle of social solidarity upon which the whole system of social assistance is built demands a precise balance between people's needs and financial capabilities, which shall guarantee the trust and support of Bulgarian citizens towards the implemented policy.

The most considerable alterations in the programme are connected with the changing economical conditions in "Energy" field and in particular the privatization of the installation for centralized heating system and the companies for distributing electricity, the amendments of the Energetic's Act and the liberalization of the prices of the offered services by the companies to the end community consumer. After calculating the actual raise in the prices of the energy sources, the amount of the assistance is determined every year in the manner that it covers 100% the change and thus guarantees actual protection of the people.

With every heating season the number of assisted individuals and families decreases gradually:

- for heating season 2003/2004 the number of beneficiaries of the programme is 542 685;
- for heating season 2004/2005 – 520 236;
- for heating season 2005/2006 – 466 159;
- for heating season 2006/2007 – 360 807;
- for heating season 2007/2008 – 300 340.

In fact for a 5 year period the number of assisted individuals and families decreases with 44,66% under the condition that during 2005 the amount of the guaranteed minimum income was increased, and during 2006 the border line for access was increased as for the elderly persons this increase constituted more that 9 %. This trend is conditioned by several factors – the reduction of the unemployment, the reinforcement of the control on granting the benefits and most of all the raise of the actual income of the people. A very important moment from the mechanism for social assistance – the inclusion of individuals into the system in a given moment does not mean that they will fall into its range after the disappearance of the conditions that served as grounds for granting assistance.

With the view of ensuring maximum protection for people with low incomes for the forthcoming heating season, in July 2008 the Ordinance for the conditions and order for granting targeted assistance for heating was amended and the borderline for access for this kind of assistance was augmented with 20% for all types of individuals. It should be noted that that the raise of the pensions from 1<sup>st</sup> of July 2008 is taken into account and this augmentation respectively will not have an effect on the possibility of people that fulfill the conditions for assistance to be included into the system. The determination of the right to access is on the base of the average monthly income for a period of the previous 6 months in comparison to the month of presenting the application-declaration. The targeted assistance is given one single time, in advance for

the whole heating season (5 months) and is paid in cash meaning that every claimant having such right will receive the sum of 282,50 leva. Thus the people are given the opportunity to manage better their family budgets during the winter season when the expenses for heating make up not a small part of their common community expenses.

The services offered in the community are a successful model for support of families with children and of the children as well. In 2008 the process for deinstitutionalization through development of social services in the community for children and their families continued. By June 2008 the following are already functioning:

- 49 day centers for children and young people with disabilities – the day center is a complex of services that create conditions for attending the users on a daily or weekly basis in connection with food delivery, satisfaction of daily, health, educational and rehabilitational needs, and the need of organizing the free time and personal contacts;
- 15 centers for social support – the center for social support is a complex of social services, connected to the prevention of abandonment, prevention of violence and dropping out of school, deinstitutionalization and reintegration of children, training in skills for self-dependant life and social integration of children from institutions, consultation and support of families in risk, assessment and training of future foster parents and adopters, consulting and support of children with anti-social behavior;
- 9 centers for work with street children – this is a complex of social services, connected to the prevention of children getting on the street and dropping out of school, social rehabilitation and integration of children, living permanently or occasionally on the street, through individual work with the child and his/her family, family consultations and support, medical and sanitary-medical services, literacy training for the children, training in parental skills;
- 9 units “Mother and baby” – provides temporary accommodation up to 6 months of pregnant women and mothers at risk of abandoning their children, encourages parental attachment, assists the young mothers through social, psychological and legal consulting and support.
- 2 centers for accommodation of family type – this is a complex of social services provided in an environment close to the family one for a limited number of children (not more than 15).

In a final stage is the concluding of an agreement with the World Bank for a loan in the amount of 40 millions euro that will finance the Project for social inclusion. The Project for social inclusion is directed at achieving the following results:

- improved readiness for school of children from families with low incomes and children with disabilities under the age of 7;
- increased well-being of the children;
- broadening the range of the services connected with child care, provided to children with low income and children with disabilities under the age of 7 .

The Project includes the following components:

1. Integrated social services and services connected with child care.

Programmes for parents of children between the age of 0-3 – orienting parents of small children from the vulnerable communities and parents of children with

disabilities; individual parental consultations; mobile work in the community, in less accessible communities, for example the Roma neighborhoods and the distant villages.

The programmes for children between the age of 3-7 includes activities like reduction of the fee for kindergarten, creation of family centers, transportation, improved health care.

Investment in infrastructure and materials.

Training – different activities like training of providers of services, training of kindergarten staff, training of nannies.

2. Capacity building
  - 2.2 Capacity building on local level
  - 2.3 Assessment of the effect

It is also positive that the number of private suppliers of social services for children that have a permit from the State Agency for Child Protection is increasing. By the end of January 2008 the number of licensed suppliers is 285 already.

Programme “Support of families with children” – under the Family Allowances for Children Act (for 2006).

1. One-off benefit for pregnancy

For 2006, one-off benefit for pregnancy are given to 20 761 women. The paid sum is 3 174 956 leva.

2. One –off benefits for childbirth

For 2006, 69560 mothers received the benefit, 69 639 children were born, the total sum paid is 13 627 150 leva, and 324 mothers received additional one-off benefit for 330 children with disabilities for the sum of 33 000 leva.

3. Monthly assistance for a child until graduating from secondary school, but not above the age of 20

For 2006, the monthly average number of assisted families is 595 213 for 880 376 children. The sum paid is 202 630 270 leva.

4. Monthly benefits for bringing up a child under the age of 1 year

For 2006, the monthly average number of 25 062 mothers were supported and the sum paid is 30 811 921 leva.

5. One-off targeted benefit for first graders

With view covering some of the expenses in the beginning of the school year, 33 995 families are assisted, 34 365 first graders from the state and municipal schools with the sum of 3 498 651 leva.

Programme “Support of families with children” – under the Family Allowances for Children Act (for 2007).

For the period January – December 2007 pursuant the Family Allowances for Children Act, 706 291 families on monthly average were assisted with family benefits for pregnancy, childbirth and bringing up of children, including 19 193 pregnant women and 835 012 children. The spent resources for the Programme are in the amount of 243 358 812 leva for 2006, on average 741 703 families were supported, including 20 761 pregnant women and 880 376 children. The sum spent is 253 742 684 leva.

1. One-off benefit for pregnancy

For 2007, one-off benefit for pregnancy are given to 19 193 women. The paid sum is 2 859 784 leva.

2. One –off benefits for childbirth

For 2007, 69 089 mothers received the benefit, 69 754 children were born, the total sum paid is 13 62 467 leva, and 352 mothers received additional one-off benefit for 356 children with disabilities for the sum of 35 600 leva.

3. Monthly assistance for a child until graduating from secondary school, but not above the age of 20

For 2007, the monthly average number of assisted families is 565 742 for 835 012 children. The sum paid is 292 647 644 leva.

The average number of families that receive monthly benefits for children until graduating from secondary education pursuant art. 7 from FACA where income criteria is set, has decreased by 29 471 families for 2007 which is 5% in comparison with 2006.

With 45 364 /5,15 %/ is lower on monthly average the number of children for whom the benefit has been paid. This is a consequence of the entered in force from the 1<sup>st</sup> of September 2006 amendments in the Regulation of Implementation of the Family Allowances for Children Act. The families do not receive assistance for children that have 5 unjustified absences for the month. The reduction is also caused by the augmented income of the families.

4. Monthly benefits for bringing up a child under the age of 1 year

For 2007, the monthly average number of 23 638 mothers were assisted and the sum paid is 29 495 817 leva. In comparison with 2006, the reduction of assisted women under the provisions of art. 8 of the FACA that bring up children under the age of 1 year is 1 424 (5,9%).

5. One-off targeted benefit for first graders

With view covering some of the expenses in the beginning of the school year, 28 629 families are assisted, to 34 365 first graders from the state and municipal schools were provided with one-off benefits in the form of social investments. The benefit was received by 29 105 – winter jacket, shoes, sport suit, t-shirt with short and long sleeves, worth 120 leva per child.

96 105 818 leva were paid by the Social Assistance Agency under the provisions of the Integration of People with Disabilities Act (2005) when 46 890 000 leva were planned, including:

- monthly supplements for children with permanent disabilities under the age of 18 and until graduating from secondary school but not above the age of 20 – 22 689 960 leva for the average monthly number of 17 895 children;
- monthly supplements for social integration – 73 415 858 leva for 464 469 persons.

In implementation of the Integration of People with Disabilities Act for insuring of social and economical protection, in 2005 the Agency for People with Disabilities (APD) has managed expenses with the total value of 30 861 464 leva, distributed in benefits as follows:

- financing of targeted assistance for the purchase and restoration of *auxiliary means, devices and equipment (AMDE)* for the people with disabilities with total worth of 30 214 240 leva;
- provision of the right for targeted benefit for sign language services by individuals with hearing disabilities – 155 562 leva were paid to 7 280 individuals;
- provision of the right for targeted benefit for companion for persons with movement disabilities with 90% reduced capacity to work – 269 957 leva were paid to 14 844 claimants;
- provision of the right for targeted benefit for the use of companion by the people with sight disabilities – 194 705 leva were paid to 12 946 individuals;



- for assuring the right of one-off targeted benefit for adjustment of the residence of people with permanent disabilities with over 90% reduced capacity to work, moving in an wheelchair – 38 913 leva were paid to claimants;
- realization of the right to targeted benefit for purchasing and/or adjustment of personal vehicle to 8 beneficiaries, worth 9 600 leva.

From 1<sup>st</sup> of January 2005 the Agency for People with Disabilities carries out the activity for issuing the permits for production, import, sale and support of AMDE for people with disabilities – for the reviewed period 68 applications were entered, 42 permits were issued and 14 rejections were made.

In 2006 under the provisions of the Regulation for Implementation of the Integration of People with Disabilities Act, the Social Assistance Agency has rendered assistance to a monthly average of 465 361 people with disabilities, including 19 795 children. The assimilated funds for the period are 131,9 millions of leva or there is an over expenditure of 25,18% from the planned 105,4 millions of leva. The insufficiency is due to the following factors:

- continuously increasing number of people with disabilities that apply for integration supplements;
- the resources for the monthly benefits for children with permanent disabilities under the age of 18, until graduating from secondary school but not above the age of 20, are calculated for 16 700 children with an 112 leva benefit under the provision of the Act but the actually supported children are in average around 19 795 and the sum paid is 28,6 millions of leva. In 2005, on average 17 319 children received the sum of 105 leva for each, and the resources spent were in the amount of 22,7 million of leva;
- the same is the case with the monthly benefits for social integration of people with disabilities. For the reviewed period in 2006, 103,3 millions of leva were paid to 445 566 persons on average per month or with almost 30 millions of leva more were paid in 2005 – 73,4 millions of leva to 529 010 persons on average per month.

In 2006, the Agency for People with Disabilities has spent resources in amount of 33,5 millions of leva, including resources for targeted assistance – 29,8 millions of leva and for employment and social integration of people with disabilities – 3,7 millions of leva. In comparison with 2005, there is a reduction of 1,1 million leva of the expenses for auxiliary means, devices and equipment for people with disabilities. The reasons for that are:

- the introduced strict control of the local representatives of the Agency for People with Disabilities and the executed over 800 inspections pursuant Ordinance N 1 on the terms and procedure for production, import, sale and support of auxiliary means of companies – importers and producers and their distributors;
- reduced limit prices of auxiliary means, devices and equipment for people with disabilities.

In 2006, pursuant the signed contracts with the unions of the deaf, blind and disabled persons, 80 % more targeted benefits were paid for people with hearing or sight disabilities or with problems with mobility for companions and translators. In result, to a substantive number of people with disabilities were given greater possibilities for integration into the social and cultural life.

In 2007, pursuant the Regulation for Implementation of the Integration of People with Disabilities Act, the Social Assistance Agency has supported 464 099 persons with disabilities on average per month, including 19 754 children with disabilities. The assimilated resources for the period are in amount of 140 474 548 leva including 9 834 782 leva for targeted benefits for the purchase and repair of medical articles and/or auxiliary means, devices and equipment. For 2006, in total 131 926 981 leva were paid on average per month to 449 618 people with disabilities including 19 739 children. During the reviewed period, the number of people with disabilities to whom assistance is refused has been kept the same.

In 2007 on activity, pursuant the Integration of People with Disabilities Act, the Agency for People with Disabilities has assimilated expenses in the amount of 29 749 362 for benefits. As a result from executing this activity the Agency for People with Disabilities helped the social and economic protection of people with disabilities by providing resources for their targeted assistance, namely targeted benefits for assisting people with disabilities for purchase and repair of medical articles, auxiliary means, devices and equipment worth 24 726 793 leva. This expenditure ensured the purchase and provision to people with disabilities of 122 410 medical articles, auxiliary means, devices and equipment.

Pursuant to the contract with the Union of the Deaf persons in Bulgaria, targeted benefits for sign language services were paid to 9 665 claimants with hearing disabilities on the amount of 183 634 leva.

Pursuant to contract with the Union of the Blind persons in Bulgaria, targeted benefits for a companion of blind people were paid to 13 195 claimants in the amount of 501 405 leva.

Pursuant to the contract with the Union of the People with Disabilities in Bulgaria, targeted benefits for companion were paid to 17 898 individuals with problems with their mobility in the amount of 680 114 leva.

For 2007, the Agency for People with Disabilities approved the presented by the Directorate “Social Assistance” applications for the following types of targeted benefits:

- for helping people with disabilities to purchase and repair of medical articles, auxiliary means, devices and equipment and additional cash benefit for transportation expenses in the country – 103 651 leva;
- one-off benefits for adapting the residences of people with disabilities with wheelchairs – 24 471 leva;
- one-off benefits for purchase and adjustment of personal motor vehicles for people with permanent disabilities – 15 600 leva.

“National programme for the full inclusion of pupils in obligatory school age”

On the grounds of Decision of the National Assembly from 11.03.2005, the National programme for the full inclusion of pupils in obligatory school age was approved. The Programme aims at carrying out of strategic priorities, connected with providing conditions for access to education of these pupils with no difference to ethnical appurtenance, gender, origin and religion, through the creation of an opportunity to everybody to receive education regardless of his/her place of residence and economic state.

The main goal of the programme is holding of children in school and helping the parents with the provision of food for the children. Other specific goals of the programme is the reduction of children drop-out rate from 1<sup>st</sup> to 4<sup>th</sup> grade from the state and municipal schools, increasing the motivation among parents to send their children to school, helping the families in bringing up the children and ensuring of breakfast to

the children. The programme is realized at the principle of national, municipal and school levels when distributing the rights and responsibilities.

The programme gives the opportunity for equal chance for all children, without estimating the social status of the children and their families. Lasting effect for keeping the children in school, reduction of the risk of dropping out from the educational process and relief of the family budget of the parents is observed at the monitoring realized in the country.

For the period January – June 2008 including, 13 003 057 leva are assimilated, and the average monthly number of the included pupils is 272 592. For the same period of 2007, the assimilated resources were in the amount of 13 741 316 leva and the average number of children included in the programme was 286 109.

**Taking into account the data presented in the previous report (2005) about the amount of the social assistance, the Committee considers that, as a whole, it is very inadequate, and underlines that the level of social assistance for a person under 65 living alone is manifestly inadequate.**

It must be noted that the income is far not the sole criteria in connection with which the right for assistance is granted. It is related to the assessment of every individual case and also depends on the property status, family status, health condition, employment, age, the presence and amount of the savings and other specific circumstances. The aim is not only to provide effective social protection to those in need of assistance by the state, but also to create stimuli in particular to people in capable of working age to increase their activity for inclusion on the labour market as an important condition for the amelioration of their well being. Furthermore, when making an assessment of the effectiveness of the system for social assistance and the amount of the benefits received, it should be taken into account the whole package of measures and benefits (monthly, targeted, one-off, for energy, inclusion in different programmes, the rendering of social services, etc.) that are in place for the assisted persons when the differentiated approach is applied, on which the whole system is built.

From this point of view the Ministry of Labour and Social Policy permanently works in the direction for perfecting of this system in conformity with financial capabilities and priorities of the state in the interest of the people that have fallen in a difficult situation and having the need of support by the state. In this connection, the guaranteed minimum income (GMI) is a value in comparison to which different types of social payments are determined like the following ones: the amount of the social benefits under the Social Assistance Act, the amount of the integration supplements under the Integration of People with Disabilities Act and the amount of the financial benefit for the prevention and reintegration, bringing up a child by close and relatives and foster families under the Child Protection Act.

Without changing the level of the GMI, important amendments in the system for differentiated income had been made, so that the occurred economic changes to be taken into consideration and also to not let the dropping out of the system for social assistance of people that without state assistance would not be able to cope with the difficult situation they have fallen into. In 2006, amendments were made to the Ordinance N 5/30.05.2003 on the terms and procedure for granting targeted benefits for heating and they entered in force for the new heating season, considered from 01.11.2006. Based on those amendments through augmentation of the differentiated minimum income for heating the borderline for access to assistance for all individuals and families was increased by 9%. In 2007, new amendments were made to the Ordinance for the next heating season, aiming to compensate the actual raise of the

pensions through reduction with quotient 1,21 of their amount when determining the right to benefits. This gave the retired that were already an object to targeted assistance the opportunity to continue using of targeted benefits for heating.

Even though, until the present moment, the amount of the guaranteed minimum income (55 lv.) has not been changed from the middle of 2005, one should not make the conclusion that such fact is detriment to the concerned individuals. It should be taken into consideration that this income is one index value on the basis of which, through a system of individual percentages, is calculated the corresponding differentiated minimum income that defines the borderline of access to social assistance of the separate groups, and the level of risk for each of them is also taken into account. The purpose is to guarantee the best protection of the groups of the population with lowest income, at most risk and in most difficult situation. It is also important to be pointed out that when determining this borderline, the principle of determining such kind of levels that can ensure adequate social protection, is observed. At the same time there is a stimulus on the active behavior of the unemployed persons at the labour market and the school work load of the children until graduating from secondary education with the purpose of maximum limitation of the risk of their social exclusion. In the field of social assistance, the following factors are taken into account: level of unemployment, relative part of assisted unemployed persons in capable of working age compared to the total number, amount of minimum and average salary in the state, influence of the amount of granted benefit on the activity of the unemployed persons to look for and accept jobs, etc. For example, for the period of 2005-2007 the level of unemployment has declined from 10,1% to 6,9%. For the period 2000-2007, the income of the households shows a stable trend to increase. The total income on average per person from household increases nominally from 1 574 leva to 3 105 leva, or approximately two times, and from 2005 to 2007 this raise is from 2 415 leva to 3 105 leva or an increase with 28,57%. Our main goal is the reduction of the dependence on the system for social assistance through actual raise of people's income and through development of the social services for support of the people who, due to different objective reasons, have difficulties or are in an impossibility to organize and support their everyday life.

In the context of the aims made and the priorities put forward for 2007, the Regulation for Implementation of the Social Assistance Act was amended:

- with view the stimulation of responsible parenting and promotion of the school attendance of children until their graduation from secondary education, the borderline of access to assistance for each child that regularly goes to school was increased from 41,30 lv. to 50,00 lv., or a raise with 21% (8,70 lv.). The augmentation of the individual percent is from 75 to 91 percent from the guaranteed minimum income.
- At the same time, a sanction for the children that have 5 or more unjustified absences for the corresponding month has been implemented, and the borderline for access for assistance in those cases has been reduced from 41,30 lv. to 16,50 lv. – reduction with closely 60% (24,80 lv.). The individual percent has decreased from 75 to 30 from the guaranteed minimum income.
- For children in obligatory schooling age that do not attend school, the borderline of access to assistance has decreased from 20,40 lv. to 11,00 lv. – reduction of 46 % (9,40 lv.). The individual percent has decreased from 37 to 20 % from the guaranteed minimum income.

All of those changes show that in the frame of the active guaranteed minimum income, the necessary flexibility and adaptability to the dynamically changing economic sphere is shown, so that unreasonable limitation of the possibilities of social assistance

of people that really need that could not happen. At the same time, the most effective expenditure of the money of the Bulgarian taxpayer is guaranteed as a supreme form of social solidarity. It should not be forgotten, of course, that all these measures are within the framework of the financial capabilities of the state and the set in the governmental programme priorities in the social policy.

The question about the change of the amount of the guaranteed minimum income is in the scope of attention of MLSP for a long time. Possibilities for this end are analyzed in relation of the impact that such a change would have on the whole system of payments, connected with the guaranteed minimum income. Calculation of the resources necessary is done and a proposition for the augmentation of its amount from the beginning of 2009 has been made which is officially deposited into the Ministry of Finance.

In relation with the ensuring the access to medical help to persons that are subject to the system for social assistance, we are presenting the following information:

Pursuant to the Health Insurance Act (art. 40, par. 3, items 5 and 9), the citizens that satisfy the conditions for receiving monthly social benefits and targeted benefits for heating under the provisions of the Social Assistance Act, the accommodated in specialized establishments for social services as well as the parents, adopters or the spouses that take care of people with disabilities with lost capacity to work over 90 % who need constant care if they are not insured on another ground, shall be insured from the republican budget through Directorates "Social Assistance". In this manner these categories of people use all rights of medical service and access to these services in the amount stipulated in the National Framework Contract between the National Health Insurance Fund and the Bulgarian Medical Association.

With a Decree N 17 of the Council of Ministers from 31.01.2007 for assignment of the terms and procedure for expenditure of the targeted resources for diagnostics and treatment in medical establishments with medical help for Bulgarian citizens for 2007 and for 2008 that do not have an income and/or private property which could ensure them personal participation in the health insurance process, resources from the republican budget are provided for payment of medical treatment of the indicated target group.

**In its previous conclusion, the Committee requested information on the situation of persons of Roma origin in terms of social assistance. The report states that Roma have the same social assistance rights as other persons. The Committee specifies that its question concerned not only the legal situation but also actual access by Roma to social assistance. Therefore, it repeats its question.**

In relation to the question about the access of the Roma ethnical community to social assistance, we could not provide official information about the number of assisted persons and families from this origin because no direct or indirect discrimination is allowed in this assistance (including on ethnical base) which constitutionally and legally stipulated. Therefore, in the practice, no declaration of ethnical appurtenance is required and the Social Assistance Agency does not have such data on its disposal.

**The Committee asks for examples of decisions taken following the refusal of social assistance benefits and information on time-limits for rulings on such appeals.**

See Appendix 3.

## Article 13§2

- 1) Please describe the general legal framework. Please specify the nature of, reasons for and extent of any reforms.
- 2) Please indicate the measures taken (administrative arrangements, programmes, action plans, projects, etc.) to implement the legal framework.
- 3) Please provide pertinent figures, statistics or any other relevant information, if appropriate.

**In comparison to the previous report, the following changes in the legislation have occurred:**

### **Protection from Discrimination Act (Title amend. SG, 68/2006)**

Art. 7. (1) Discrimination shall not be considered:

14. (prev. item 13, SG 69/2008) special measures for persons or groups of person in a disadvantaged situation on the base of the indicators under art.4, par. 1 with the aim of balancing their possibilities as far as and as long as these measures are necessary;

15. (prev. item 14, SG 69/2008) the special protection of children without parents, minors, single parents and persons with disabilities, established by law;

### **Questions of the European Committee for Social Rights**

**The Committee took into consideration the information on Protection against Discrimination Act and it understood from this Act that it relates to employment, education and training and not social welfare protection.**

According to art. 4 of the Protection against Discrimination Act any direct or indirect discrimination, based on personal or public status, disability, age, marital status, property status or any other signs, established by law or in an international agreement to which the Republic of Bulgaria is a party, is prohibited.

Pursuant to the additional provisions of the Integration of People of Disabilities Act, direct discrimination is placing a person on the base of a disability in a disadvantaged position in comparison with another person who was, is or could be put in comparable similar circumstances. Indirect discrimination is putting a person on the base of a disability in a disadvantaged position in comparison with another person through apparently neutral provision, criteria or practice unless this provision, criteria or practice is objectively justified with view a legal aim, not connected with the disability and the means for achieving the goal are suitable and do not exceed the necessary for that purpose.

### **Social Assistance Act**

Art. 3. (amend. SG 120/02) When executing social assistance, it shall not be permitted direct or indirect discrimination, based on sex, race, colour of skin, ethnic origin, citizenship, political or other beliefs, religion or belief, disability, age, sexual orientation, family status or origin, membership in trade and other public organizations and movements.

## Article 13§3

- 1) Please describe the general legal framework. Please specify the nature of, reasons for and extent of any reforms.
- 2) Please indicate the measures taken (administrative arrangements, programmes, action plans, projects, etc.) to implement the legal framework.
- 3) Please provide pertinent figures, statistics or any other relevant information, if appropriate.

The number of the national telephone line for consultations of citizens is published on the Internet site of the National Health Insurance Fund (the most frequently asked questions from citizens are: what covers the prophylactic examination, what dental services are paid by the NHIF, how to restore to the health insurance rights). Questions also of interest are connected with the child and mother healthcare and the payment of the consumer fee (and its waiving). Emphasized interest is shown towards the clinical tracks for rehabilitation, and also about the possibilities for restoring to the lost rights of health insurance. The consultants on the „hotline” answer also to questions connected to the medicinal list of NHIF and the technology for receiving of different medicines.

On the NHIF web site is also published the address of the reception-hall of NHIF for consultations of citizens. The Information center for the rights and obligations of the citizens is also working effectively.

The leaflets of the NHIF on paper and online continue to give information about the patients, included in different health programmes as mother healthcare – “I will become a mother” – information leaflet for future mothers, child healthcare and leaflets about the health insurance installments.

The brochures, distributed by the NHIF, contain information about the most frequently asked questions as: rights and obligations of the patients, resulting from the free movement of people, goods and services, connected to the membership of Bulgaria in the EU, information about treatment in clinical tracks, etc.

### **Report on the implementation of the state budget of Republic of Bulgaria for 2006**

Structure of the health insurance payments on the different directions for 2006

- primary out of hospital medical help – 100,5 millions of leva;
- specialized out of hospital medical help – 111,2 millions of leva;
- dental help – 61,0 millions of leva;
- medico-diagnostic activity – 46,2 millions of leva;
- medicines for at home treatment – 270, 0 millions of leva;
- in-hospital treatment – 735,1 millions of leva.

### **Report on the implementation of the state budget of Republic of Bulgaria for 2007**

Structure of the health insurance payments on the different directions for 2007

- primary out of hospital medical help – 113,9 millions of leva;
- specialized out of hospital medical help – 123,8 millions of leva;
- dental help – 69,3 millions of leva;
- medico-diagnostic activity – 51,2 millions of leva;
- medicines for at home treatment – 282, 1 millions of leva;
- in-hospital treatment – 821,0 millions of leva;

- other health insurance payments – 0,3 millions of leva.

In comparison to 2006 the health insurance payment in 2007 has increased with 172,2 millions of leva.

With the State Budget of Republic of Bulgaria for 2006 Act under §91, 5 millions leva were allocated for diagnostic and treatment of Bulgarian citizens that have no health insurance right or are with suspended ones.

From the period after the entering to force of the Decree of the Council of Ministers N 13 / 30.01.2006 until 31.12.2006 in Directorates “Social Assistance” on the territory of the whole country 4 498 application-declarations were entered. 2 245 were approved. Until the end of the reviewed period, 879 060 leva were transferred to the medical institutions for hospital help for rendering medical help to people with no health insurance.



## **Article 14 – The right to benefit from social welfare services**

### **Article 14§1**

- 1) Please describe the general legal framework. Please specify the nature of, reasons for and extent of any reforms.**
- 2) Please indicate the measures taken (administrative arrangements, programmes, action plans, projects, etc.) to implement the legal framework.**
- 3) Please provide pertinent figures, statistics or any other relevant information to demonstrate the effective access to social services (beneficiaries in total and per category of social welfare services, number and geographical distribution of services, staff number and qualifications).**

In comparison to the previous report, the following changes have occurred in the legislation:

#### **Social Assistance Act:**

Art. 2. (1) (Amend., SG 120/02, amen. and suppl. 52/2007) The Bulgarian citizens, the foreigners with permanent residence permit in the Republic of Bulgaria and the foreigners, to whom is conceded asylum, status of refugee or humanitarian status, and the foreigners, granted temporary protection shall be obliged to render care for satisfying their basic needs.

(2) The social assistance means conceding support in money and/or in kind and rendering services for satisfying basic vital needs of citizens when this is not possible by means of their work and their possessions.

(4) (Amend., SG 120/02, amend. and suppl.52/2007) Foreigners with permanent residence permit in the Republic of Bulgaria and foreigners, to whom is conceded asylum, status of refugee or humanitarian status, the foreigners, granted temporary protection and those for who this is provided in international agreement to which the Republic of Bulgaria is a party shall benefit of the right under Par. 3.

(5) The receiving of monthly social assistance benefits shall be dependent on exercising socially useful works, except in case of maternity or when the age and/or health condition of particular person are not appropriate for such activities.

#### **Family Allowances for Children Act:**

Art. 1. (amend. SG 69/04, suppl. - SG 21/06) This Act shall provides the conditions for acquiring the right to family assistance for pregnancy, childbirth and bringing up of children, the types and the order for receiving them.

Art. 2. (amend. SG 69/04) (1) (prev. text of art. 02 - SG 21/06) Family assistance under this Act shall be:

1. (suppl. - SG 21/06) one-off cash benefit at pregnancy;
2. (suppl. - SG 21/06) one-off cash benefit at childbirth;

(2) (new - SG 21/06) The benefits referred to in par. 1, items 3 – 5 may be received in cash and/or in the form of social investments under the terms and procedure established in the Regulation of Implementation of the Act.

Art. 3. Right to family assistance for children shall have:

1. (new – SG 69/04) the pregnant women – Bulgarian citizens;
2. (prev. 1 – SG 69/04) the families of Bulgarian citizens – for the children they bring up in the country;
3. (prev. 2 – SG 69/04) the families, in which one of the parents is Bulgarian citizen – for the children with Bulgarian citizenship, who they bring up in the country;
4. (prev. 3 – SG 69/04) the families of relatives, close friends or foster families - for the children, accommodated under the provisions of art. 26 of the Child Protection Act;
5. (prev. 4, amend. SG 69/04) the pregnant women – foreign citizens, and the families of foreign citizens, who stay permanently and bring up their children in the country, if the receiving of such assistance has been provided in another act or in international agreement, to which the Republic of Bulgaria is a party.

Art. 4. (amend. and suppl. SG 69/04, SG 21/06, in force from 10.03.2006 regarding the expression “12 months”) Right to family assistance of art. 2, par. 1, items 1, 3, 4 and 5 shall have the families and the pregnant women with average monthly income per member of the family for the last 12 months lower or equal to the income, determined for this purpose in the State Budget of the Republic of Bulgaria Act for the respective year, but not lower than the previous year, except in the cases under art. 7, par. 2.

Art. 5a. (new – SG 69/04, in force from 01.07.2004) (1) (amend. - SG 21/06, in force from 01.01.2007) Pregnant women, whose income per member of the family is lower or equal to the income under art. 4 shall be entitled to one-off assistance for pregnancy in amount determined annually in the State Budget of the Republic of Bulgaria Act for the respective year, but not lower than the previous year, when they have no right to benefit for pregnancy and childbirth under the Social Security Code and live permanently in the country.

(2) When the pregnant women is insured for all insurance social risks, for all insurance social risks without accident at work, professional disease and unemployment or for all insurance social risks without unemployment, but does not receive benefits for pregnancy and childbirth because she does not have the necessary insurance period under art. 48a of the Social Security Code, the one-off benefit shall be paid in amount, determined proportionally to the number of the days from the beginning of the leave for pregnancy and childbirth until the acquisition of the necessary insurance period under art. 48a of the Social Security Code but for not more than 45 days.

(3) The one-off benefit for pregnancy shall be paid for the period of 45 days before the determined term for birth.

Art. 6. (1) The mother shall have the right to one-off benefit for living childbirth regardless of the family income, when the child has not been placed for bringing up in a specialized child-care establishment.

(2) (amend. - SG 21/06, in force from 01.01.2007) The amount of the benefit under par. 1 shall be determined annually in the State Budget of the Republic of Bulgaria Act for the respective year, which shall not be lower than the previous year and shall be differentiated *according to the sequence of the children born by the mother*.

(3) (amend. - SG 21/06, in force from 01.01.2007) At birth of twins, one of which is a second child to the mother, the benefit shall be paid for each twin in the amount for a second child.

(4) When determining the sequence of the children only the children living at birth shall be taken into account.

(5) The benefit under par. 1 shall be paid to the mother and upon impossibility to receive it – to another lawful representative of the child.

(6) (amend. - SG 21/06, in force from 01.01.2007, suppl. 71/2008) If until the age of 2, permanent disability of 50 or above 50 percent are established to the child, additional one-off benefit shall be paid to the mother in extent determined annually in the State Budget of the Republic of Bulgaria Act for the respective year, but not lower than the previous year.

Art. 7. (1) (amended, SG, No 69/2004; No 21/2006) Monthly assistance for a child until he or she graduates from secondary school but not over the age of 20, shall be given in cash and/or in the form of social investments for families whose income per member of the family is lower or equal to the income mentioned in article 4, under the condition that the child is:

1. not being placed for raising on full state support in a specialised institution for children;

Art. 10. The family allowances for children

(2) (new - SG 21/06, in force from 01.01.2006) The allowances referred to in Art. 2, par. 1, items 3 – 5 may be received in full or partially amount in the form of social investments for the purpose of providing equal opportunities for the children at their raising, upbringing, training, education, health care, development and socialization.

### **Social Assistance Act**

Art. 18. (amend. SG 120/02) (1) (amend. - SG 18/06) The social services shall be implemented by:

1. the state;
2. by the municipalities;
3. by Bulgarian individuals, registered under the Commercial law, and corporate bodies;

### **Regulation for Implementation of the Social Assistance Act**

Art. 9. (1) Persons or families whose income for the preceding month is lower than the determined differentiated minimum income shall have right to monthly assistance.

(2) Basis for determining the differentiated minimal income shall be the guaranteed minimal income whose monthly amount shall be determined by an act of the Council of Ministers.

(3) (amend. SG 31/05) The differentiated minimal income shall be determined as follows:

1. for persons over 75 years of age, living alone – 165 percent of the guaranteed minimum income (GMI);
2. for persons over 65 years of age, living alone – 145 percent of the GMI;
3. for persons over 65 years of age – 100 percent of the GMI;
4. for a person, cohabiting with another person (persons) or family, and for each of the spouses living together – 66 percent of GMI;
5. for a person up to 65 years of age, living alone – 73 percent of GMI;
6. for a person with permanently reduced capacity to work by 50 and over 50 percent – 100 percent of GMI;
7. for a person with permanently reduced capacity to work by 70 and over 70 percent – 125 percent of GMI;
8. (amend. – SG 101/07) for a child:

- a) until becoming 16 years of age and if he/she studies – until acquiring secondary education, including the graduation of XIII grade in a professional high school but not more than 20 years of age – 71 percent of GMI;
  - b) from 7 to 16 years of age and if he/she studies – until acquiring secondary education, including the graduation of XIII grade in a professional high school, and has 5 or more unjustified absences for the respective month – 30 percent of GMI;
  - c) from 7 to 16 years of age, who does not study - 20 percent of GMI;
9. for an orphan child; for a child accommodated in a family of close friends or relatives or in foster family under art. 26 of the Child Protection Act; for a child with permanent damage – 100 percent of GMI;
10. for a parent bringing up child/children alone:
- a) up to 3 years of age – 120 percent of GMI;
  - b) up to 16 years of age, and if he/she studies – until the acquiring of secondary or professional education, but not more than 20 years of age – 100 percent of GMI;
11. for pregnant women 45 days before childbirth and for a parent bringing up a child up to 3 years of age – 100 percent of GMI.
- (4) (amend. SG 31/05) If more than one of the grounds under par. 3 are present, the higher amount shall be applied.
- (5) The amount of the monthly benefit shall be determined as a difference between the differentiated minimal income or the sum of the differentiated minimal incomes and the incomes of the persons or families for the preceding month.
- (6) (new – SG 101/07) The income shall be declared for the month it has been received regardless of the period it refers to.
- (7) (new – SG 101/07) In order to ascertain circumstances as per par. 3, item 8, letters "a" and "b" the directorates "Social Assistance" shall use the information received under the provisions of Art. 17, par. 3, item 4 and par. 4 of the Regulation for Implementation of the Family Allowance for Children Act, adopted by Decree No 139 of the Council of Ministers from 2002 (Prom. SG. 67/2002, amend. and suppl. SG. 93/2004, corr. SG. 97/2004, amend. and suppl. SG. 115/2004 and SG. 71/2006).

#### Art. 10.

7. (amend. SG 40/03; amend. – SG 101/07) the unemployed must be registered in the directorates "Employment Bureaus" for at least 9 months before filing the application for social assistance and must not have refused a job offer and inclusion in courses for qualification and re-qualification, organized by the directorates "Employment Bureaus".
- (2) (amend. SG 97/01; amend. – SG 54/06) The requirements of par. 1, item 1 shall not regard the inhabitants of own home that is the only one where a person with permanently reduced working capacity of 50 percent or over 50 percent, or very sick member of the family lives, as well as when the home is not a source of additional income due to impossibility of renting, poor technical condition, health, hygienic, social or other reasons.

#### Art. 11. Entitled to monthly assistance under Art. 9 shall not be:

1. (amend. SG 97/01, suppl. SG 40/03; amend. – SG 54/06) the persons of legal age up to 30 years co-habitants with their parents of whom the income per member of the family exceeds the triple amount of the guaranteed minimal income, except in the cases when these persons and/or their parents are people with permanent disabilities;

Art. 12. (1) (amend. SG 40/03; amend. – SG 101/07) Unemployed persons referred to in Art. 12c, par. 1 of the Social Assistance Act, who are not included in employment programmes, approved by the Minister of Labour and Social Policy, shall receive monthly assistance on condition that they have not refused to participate in programmes organized

by the municipal administration for providing social services, ecological programmes for development of public utilities and hygienic work in the populated areas for not less than 5 days.

(2) (amend. – SG 54/06; amend. – SG 101/07) The monthly assistance for the persons under par. 1, who have refused to participate in the programmes organized by the municipalities shall be suspended.

(3) (amend. SG 97/01; suppl. SG 46/02; amend. SG 40/03; amend. – SG 54/06; amend. – SG 101/07) The requirements under par. 1 and the suspension of monthly assistance under par. 2 shall not apply to:

1. the persons, taking care for children up to 3 years of age:
  - a) mother or father (adoptive mother, adoptive father);
  - b) parent, who brings up the child alone;
  - c) guardians;
2. pregnant women after the third month of their pregnancy;
3. the persons with permanent disability or with established temporary incapacity to work for more than 20 days in the month;
4. (amend. – SG 54/06) the persons, for the period they take care of an ill member of the family or for an ill relative in ascending or descending line up to second degree;
5. the persons, taking care of a member of the family or for a relative in ascending or descending line up to second degree, who are with permanent disability and permanent need of somebody else's assistance;
6. the persons with severe mental disorders, established by the competent bodies.

Art. 19. (1) (amend. SG 97/01, amend. SG 31/05; amend. – SG 54/06) The persons with 71 percent or over 71 percent of permanently reduced working capacity, the children up to 16 years of age with reduced capability for social adaptation and disabled by war soldiers shall have the right to free trip twice a year – going and return, by railroad and bus transport in the country.

Art. 25. (1) (amend. SG 42/99, SG 26/02, SG 40/03; amend. – SG 54/06) The monthly, the purposed and one-off benefits, by the assessment of the director of Directorate "Social Assistance", shall be provided in kind and also in the cases when:

1. the parents do not take care of their children;
2. the cash benefit is not used according to its purpose.

(2) The benefit under par. 1 can be granted by:

1. partial or full payment of fees in children's institutions, undertaking the expenses for food in the school canteens and public canteens;
2. purchasing of food, clothes, shoes, school accessories, etc.;
3. in another way determined by social enquiry.

(3) (new, SG 42/99; amend. – SG 54/06) The monthly benefit, determined in kind, for persons and the families who have refused to receive it, shall be suspended for the corresponding month.

Art. 26

(6) (suppl. SG 40/03; amend. – SG 54/06) When processing the application-declarations the Directorates "Social Assistance" will obligatory demand through official channels the necessary information from the territorial structures if the National Revenue Agency, from the directorates "Employment Bureaus", from the territorial departments "Social Insurance" and from other state and municipal institutions as well as from individuals and legal entities, and they shall be obliged to provide it within 14 days term from the date of its request.

Art. 32. (1) (prev. text of art. 32 - SG 97/01, amend. SG 40/03; amend. and suppl. – SG 101/07) The monthly assistance shall be amended, suspended, renewed and stopped with an order by the director of Directorate "Social Assistance" or an official, authorised by him.

(2) (new – SG 97/01, amend. SG 40/03; amend. – SG 54/06; amend. – SG 101/07) The monthly assistance shall be stopped:

1. from the 1<sup>st</sup> of the month during which the unemployed person has refused to take part in the programmes referred to in Art. 12;
2. from the 1st of the month during which the term under Art. 12c, par. 1 of the Social Assistance Act has expired;
3. from the 1st of the month following the month during which the grounds for their granting have dropped.

(3) (new – SG 101/07) In those cases referred to in par. 2, items 1 and 2 the right of monthly benefit shall be renewed upon expiration of 12 months from its suspension.

(4) (new – SG 54/06; prev. text of par. 3 – SG 101/07) Any change of the circumstances in relation to which the monthly benefit is being amended, suspended or renewed, shall be reflected in an additional questionnaire of the person or the family according to Appendix No 7.

### Social Services

See the information on art. 13

Art. 36a. (new – SG 40/03, amend. SG 31/05) (1) (suppl. – SG 101/07) The executive director of the Social Assistance Agency shall permit opening, change of the type of specialised institution or social service in the community, the capacity and/or number of staff, or closing of specialised institutions for rendering social services and social services to the community in connection with activities delegated by the state and meet the standards and the criteria for social services, upon proposal by the director of the regional directorate for social assistance.

(2) To the proposal under par. 1 shall be attached the following documents:

1. (amend. – SG 101/07) motivated decision of the municipal council regarding opening, change of the type of the specialised institution or the social service in the community, pointing out the capacity of the social service in question, the number of the staff, as well as regarding closing of the specialised institution or the social service in the community;

2. copy of a document for ownership of the building, in which the services will be conceded.

(3) (suppl. – SG 101/07) when there is an established violation of the standards and the criteria for social services, the executive director of the Social Assistance Agency shall permit change of the type of specialised service, the capacity and/or the number of the staff, or closing of specialized institutions for rendering social services and of social services in the community when they are activities delegated by the state, upon motivated proposal by the inspectorate under art. 5, par. 4 of the Social Assistance Act.

(4) When the proposal under par. 3 is for closing of specialized institution for rendering social services for children or social services for children in the community, an opinion from the chairman of the State Agency for Child Protection shall be required.

(5) (suppl. – SG 101/07) In 14 days term after receiving the proposal under par. 1 or 3, with an order, the executive director of the Social Assistance Agency shall permit or refuse the opening, change of the type of social service, the capacity and/or the number of

the staff, and/or the closing of the specialised institution for rendering of social services or the social service in the community.

(6) The order under par. 5 shall be subject to appeal under the provisions of the Administrative Procedure Act.

Art. 40e. (new – SG 40/03) (1) (amend. – SG 101/07) The suppliers of social services shall keep registers of the clients.

(2) The kept register shall contain information about:

1. (amend. – SG 101/07) the name, the permanent and/or the present address, the date of birth and the family status of the clients;

2. (suppl. – SG 101/07) the document for accommodation of the persons at the specialised institution or for acceptance of the social services within the community;

3. (amend. – SG 101/07) the name, the permanent and/or the present address and the telephone number of guardian, trustee or close relative of the clients;

4. (amend. – SG 101/07) the name, the address and the telephone number of the personal physician of the clients;

5. (suppl. – SG 101/07) the date of accommodation/ acceptance;

6. the date of leaving;

7. (amend. – SG 101/07) the date, the hour and the reason for the death in those cases where the client who has deceased in a specialised institution or who has been provided with a social service within the community.

Art. 40f. (new – SG 40/03, suppl. SG 31/05; amend. – SG 101/07) The social services, rendered at specialised institutions, and the services under art. 36, par. 2, items 5, 7 – 12 and 14 - 18, must meet the following standards and criteria for location and necessary equipment:

1. accessibility, well maintained household and natural environment;

2. sufficient dormitory premises, premises for social contacts, premises for eating, sanitary premises and other premises with facilitated access;

3. existence of auxiliary means for communication, of appropriate information boards for the accommodated persons with hearing, sight or other physical disorders, as well as installed systems for calling, supplied with an easily accessible button for alarm signal in all places necessary;

4. providing for each accommodated person of dormitory premises, furnished and equipped in an appropriate way according to the established needs of the person and his personal choice;

5. ensured heating, lighting, water supply and ventilation of the premises according to the sanitary norms and the safety requirements;

6. observing of the sanitary and the hygienic norms for control over the dissemination of infections according to the legislation in force.

### **Child Protection Act**

Principles of protection

Art. 3. Child Protection is based on the following principles:

9. (new, SG 36/03; amend. - SG 38/06) specialized health care for the child.

10. (new - SG 38/06) preventive security and protection measures for the child;

11. (prev. item 8 - SG 36/03; prev. text of item 10 - SG 38/06) control over the efficiency of the undertaken measures.

Measures for protection

Art. 4. (amend., SG 36/03) (1) Child protection under this Act shall be implemented through:

3.(new - SG 38/06) adoption;

11. (amend. - SG 38/06) special care for the children with disabilities;

12. (new – SG 59/07) undertaking of provisional measures for protection of a child in cases and under the provisions of Art. 12 of the Convention on jurisdiction, applicable law, recognition, enforcement and co-operation in respect of parental responsibility and measures for the protection of children, concluded in Hague on 19 October 1996 (ratified with an Act – SG 09/06) (SG 15/07), herein after referred to as "The Convention of 1996".

Special protection

Art. 5.

(3) (new, SG 36/03, amend. SG 28/05, amend. SG 94/05; amend. - SG 103/05) The protection of children with revealed talents shall be carried out by terms and procedure, determined in an ordinance of the Council of Ministers after the proposal of the Minister of Culture, the Minister of Education and Science and the Chairperson of the State Agency of Youth and Sports, stipulating also measures for:

Art. 6. Child protection is executed through:

3.(new, SG 36/03; amend. - SG 38/06) the Minister of Labor and Social Policy, Minister of Interior, Minister of Education and Science, Minister of Justice, Minister of Culture, Minister of Health and the mayors of the municipalities.

Powers of the Chairman of the State Agency for Child Protection (New, SG 36/03)

Art. 17a. (new, SG 36/03) The Chairman of the State Agency for Child Protection shall have the following powers:

9. (amend. - SG 38/06) to create and maintain national information system the functioning of which shall be determined in the regulation for implementation of the Act; the system shall contain data:

a) for the children in risk;

b) for the children with revealed talents;

c) from the registers, kept by the regional directorates for social assistance of the Social Assistance Agency under the provisions of the Family Code;

d) for specialized institutions for children;

e) for non-profit legal entities working on child protection programmes;

f) for the children not attending school;

g) for the providers of social services for children;

h) other data of importance for child protection;

10. assist the activity of the non-profit legal entities for child protection;

11. organize and carry out scientific and research activity in the sphere of child protection;

12. develop a regulation for the structure, organization and activity of the National Council for Child Protection that shall be adopted by the Council of Ministers;

13. organize and manage the activity of the National Council for child protection as Chairman of the Council;

14. (suppl. - SG 38/06) organize inspections on the observation of children's rights by all state, municipal and private schools, kindergartens and nurseries, service units, health care establishments, directorates "Social Assistance", social services for children suppliers and non-profit legal entities working in the sphere of child protection, and in cases of violation of the rights shall give obligatory prescriptions, personally or through a person, authorized by him;



15. carry out surveillance and control over the specialised institutions for bringing up children regarding the observance of the children's rights and give obligatory prescriptions;

16. submit annually to the Council of Ministers a report on the activity of the Agency.

#### National Council for Child Protection

Art. 18 (1) (Amend. 75/2002, 36/2003, 28/2005, 94/2005, 103/2005, 38/2006) A National Council for Child Protection with consultative and coordinating functions shall be created at the State Agency for Child Protection, in which representatives from the Ministry of Labour and Social Policy, Ministry of Justice, Ministry of Education and Science, Ministry of Health, Ministry of Interior, Ministry of Finance, Ministry of Culture, State Agency of Youth and Sports, National Social Security Institute, central Commission for fight with the antisocial behavior of the minors and under aged and National Union of the Municipalities in the Republic of Bulgaria, and legal entities with non-profit activity that work in the field of child protection, shall participate in it.

#### Commission Child Protection (New, SG 36/03)

Art. 20a. (new, SG 36/03) (1) (amend. - SG 82/06, 69/2008) In Directorate "Social Assistance", a Commission for Child Protection with consultative functions shall be established with the participation of representatives of the municipal administration, Directorate "Social Assistance", the District Directorates "Police", the regional inspectorates of education of the Ministry of Education and Science, the regional health care centres the local *commissions for fighting the antisocial acts of minors and underage*, as well as of non-profit legal entities and others, carrying out activities in the field of child protection.

(2) The Chairman of the Commission under par. 1 shall be the director of Directorate "Social Assistance".

#### Measures for Child Protection

Art. 23. The measures for protection in the family environment shall be:

2.(amend. - SG 38/06) directing to appropriate social services in the community;

### **Integration of People with Disabilities Act**

Art. 15. (1) The people with permanent disabilities are entitled to medical and social rehabilitation.

(2) The medical rehabilitation shall be treatment activity, implemented by multidisciplinary teams under the terms and procedure of the Medical Establishments Act and the Health Insurance Act, and it includes;

1. maintaining medicament therapy;

2. physical therapy;

3. speech and visual therapy;

4. kinesitherapy;

5. ergotherapy;

6. psychotherapy;

7. labour treatment;

8. (suppl. – SG 46/07, in force from 12.06.2007) prescribing medical products, auxiliary means and facilities.

(3) Participation in the medical rehabilitation can take also the families of the people with permanent disabilities, when the needs of the treatment process impose this.

(4) The social rehabilitation is the creation of skills for conducting independent life through rehabilitation of the sight, hearing and speech, motional rehabilitation, psychological assistance, rendering of social services and other activities.

See the information on art. 13.

### **Asylum and Refugees Act**

Art. 29. (amend. – SG 52/07) (1) During the proceedings the foreigner is entitled:

1. to remain on the territory of the Republic of Bulgaria;
2. to shelter and food;
3. to social assistance under the procedures and in the amount set for the Bulgarian citizens;
4. to health insurance, accessible medical care and free medical service under the conditions and the procedure applicable to the Bulgarian citizens;
5. to psychological help;
6. to obtain registration card;
7. to a translator or interpreter.

(2) To the rights under art.1 are also entitled the foreigners to whom proceedings pursuant to art. 67a, art.2, item 1 are constituted in order to be determined which state is competent to consider the application for granting a status. The rights under par. 1, item 1, 6 and 7 shall be also granted to foreigners, to whom proceedings under Art. 67a, par. 2, item 2 have been constituted in order to be determined which state is competent to consider the application for granting a status.

(3) The foreigner shall have the right to access to the labour market, provided that the proceedings are not finalized within one year after the submission of the application for a status due to reasons out of his/her control.

(4) The foreigner shall be accommodated in a transit, registration-and-reception center or in another sheltering place by the State Agency for Refugees after the assessment of the health status, family and financial status of the foreigner under the terms and procedure, determined by the Chairman of the State Agency for Refugees. The foreigner shall be subject to medical examination and tests and shall remain under quarantine until the results become known.

Other strategic documents that deal with poverty and social isolation: “National Report on Strategies for Social Protection and Social Inclusion of Republic of Bulgaria for 2006 – 2008”; “Strategy for Ensuring Equal Opportunities for People with Disabilities for 2008-2015”; “Action Plan for Ensuring Equal Opportunities for People with Disabilities for 2008-2009”, “National Action Plan for Employment for 2008” and “Joint Memorandum on Social Inclusion”.

### **Questions of the European Committee of Social Rights**

**The Committee has taken into account the received information from the previous report about the homes for children and elderly people with mental and physical disabilities but would like to receive additional information on the types of measures undertaken for the improvement of the not very satisfactory condition of these institutions.**

Social Services for Children

The policy for rendering targeted assistance to children and their families is a priority for the Government of Bulgaria. The main directions in this sphere are:

- guaranteeing the right of every child to have a family;
- ensuring the appropriate living standard and overcoming child poverty through a system for social protection and social assistance;
- accelerating the deinstitutionalization and the gradual removing of the classical type of institutional care;
- development of high quality social services in the community and promotion of responsible parenting.

Almost eight years ago the Republic of Bulgaria overtook a series of reforms in the field of child and family policies. As a result a system for protection of children's rights was developed and decisive steps were made for increasing children well-being. Today we have a modern legislation that is constantly developing, new administrative structures for child protection the work of which is based on individual approach and continuous broadening and development of the net of social services for children and families in the community. We are facing, of course, a number of challenges for which resolution we are working with the united efforts of all institutions, the representatives of the local authorities and the civil society.

On the basis of the Report – an analysis of the accomplished inspections by the State Agency for Child Protection (SACP) in the Homes for children with disabilities in the period of February – April 2008, the following conclusions can be made:

In most of the homes the quality of health care for the children varies from “Very good” to “Satisfactory” but in none of the home is not defined as “bad”. The children in all 26 homes *have personal medical doctors*;

In 25 of the 26 homes the educational needs of the accommodated children are met, access to educational institutions is insured to most of the children depending to the level of their development. With the children that do not attend school from all the 26 institutions, work under literacy programmes and programmes for development of social skills are done;

Another important indicator for the quality of the rendered services in the homes for children with disabilities is the individualization of the care. The assessment of the State Agency for Child Protection varies from “very good” to “satisfactory”. An important place in relation to this takes the development and implementation of the plans for care for every child. There are no homes that had received a bad evaluation on this indicator;

In most of the homes a procedure for protection from violence is created and in most of them conditions for free expression of opinion and taking of independent decisions is also created. Through the creation of a Hotline the children accommodated in the homes shall be able to give signals for violence when necessary;

The commissions have evaluated as “very good” the opportunities for social integration and adaptation of the children in most of the homes. The present programmes for educating the children in social skills, skills for independent life and professional skills are evaluated as “very good” and “satisfactory”.

Taking into account the importance of the work in the homes in relation with restoring and sustaining relations with the parents for social integration of the children, the accomplishment of relations with the parents and the team work with the Department “Child Protection” (DCP) is evaluated as “very good” and “satisfactory”.

Most of the specialized institutions for children with disabilities have prepared and the rest are in process of preparing of an Institutional Projects on the basis of the assessment and position of the interdepartmental commission of the SACP that has made the assessment in 2006. In them, as a future development of the homes, it is foreseen the opening of “Protected Residences” (PR) and “Centers for family-type accommodation”

(CFTA), as well as “Day Centers for Children with Disabilities” (DCCD). In process of implementation are the plans for closing the specialized institutions in Mogilino and in Gorna Koznitsa. Social services in the regions where children and youths shall leave the institutions are planned – Protected Residences and Centers for Family-Type Accommodation. A CFTA is opened in Rousse in which 6 of the children from Mogilino will be accommodated by 01.10.2008.

The created unit for deinstitutionalization on national level under a project of UNICEF and SAA has the main goal for giving support and conditions for development in the process of deinstitutionalization.

With a view of the established omissions in the work or in the observance of the Ordinance on the criteria and standards for social services for children, with the methodical help and support are engaged the Regional Directorates “Social Assistance” and the Directorates “Social Assistance”.

### **Social Services for Elderly People and People with Disabilities**

Priority goal of the Ministry of Labour and Social Policy is the improvement of the life conditions of the people accommodated in specialized institutions and the consolidation of administrative capacity of the staff working in them.

In this connection a Plan for reforming the homes for elderly people with disabilities (Appendix 4) was developed.

The following were also developed:

- assessments and plans for development of the specialized institutions;
- methodical instructions for the implementation of the new legal documents, related to the narrowing the entrance and broadening the exit in connection with the process of deinstitutionalization.

### **Improvement of the living conditions of the people accommodated in specialized institutions**

Upon a proposal of the Inspectorate at the Executive Director, in connection with the failure to fulfill the standards and criteria for rendering social services, regulated in the Regulation for Implementation of the Social Assistance Act (RISAA), with an order by the Executive Director the Home for elderly people with mental disability – Lyaskovo, Stara Zagora Region, and Home for Temporary Accommodation – Bourgas, were closed.

The capacities of 3 Homes for elderly people and 3 Homes for elderly people with mental disabilities were increased.

The capacities of 26 other specialized institutions were reduced – 6 Homes for people with physical disabilities, 11 Homes for people with mental disabilities, 3 Homes for elderly people, 1 Home for elderly people in dementia and 5 Homes for elderly people with psychic disorders.

In connection with the process of deinstitutionalization the Home for children and youths with mental disabilities in Djurkovo, Laki municipality was restructured to Home for elderly people with mental disability, the Home for temporary accommodation - to Protected residence and Home for elderly people – Varna - to Home for elderly people and Home for elderly people with physical disabilities.

With view the improvement of the living quality of the accommodated in the specialized institutions individuals, the number of the staff was increased in 94 specialized institutions for elderly people and people with disabilities with 717 places on regular pay-roll.

Working meetings with representatives from the municipalities were held and actual proposals were explained through which they could apply for funding under the PHARE programmes project “Deinstitutionalization through rendering of services in the community for risk groups” /component 2/, as well as “Programme of the Japanese Government for granting free assistance for projects on local level”, the Social Investment Fund (SIF), Project “Beautiful Bulgaria” and the “Social Assistance” Fund.

The municipalities have developed projects and applied under programmes at the abovementioned funds with the aim of realization of construction and restoration works, connected with the improvement of the condition of the material base in correspondence with the standards and criteria, regulated in art. 40f of the RISAA. The carried out construction and restoration activities lead to the improvement of the living conditions of the people with disabilities, accommodated in specialized institutions.

Under the “Project for improvement of the life conditions of the people with mental disabilities”, Home for elderly people with mental disabilities – Batak was restructured through reduction of the capacity and opening of two protected residences. In order to insure good condition of the buildings, gradual construction and restoration activities were completed as follows: repair and reconstruction of 2 buildings from the Homes for Elderly People with Mental Disabilities Buildings’ Fund, furnished with financing of the Batak Municipality, two Protected Residences were opened; general repairs and reconstruction of two more buildings from the Homes for Elderly People with Mental Disabilities Buildings’ Fund – Batak; general repair and reconstruction of the laundry and sewing halls; a new kitchen block was constructed.

Under the project for “Social Investments and encouragement of employment” of the SIF, with the cooperation of the World Bank, under the patronage of the Ministry of Labour and Social Policy, on first stage, in 2006 one building was constructed for a Home for Elderly People with Dementia – Opanets, Dobrich Municipality, worth 380 000 leva. It is in conformity with the contemporary European requirements for servicing people with disabilities.

By the end of 2007 the second stage of the project started and was realized – the construction of a hospital with 30 beds.

In implementation of the development plan for Home for Elderly People with Mental Disabilities (HEPMD) – gara Samuil, Samuil Municipality, Razgrad Region, in 2007 a general repair of the floors, walls and ceiling with funds from project “Delivery of kitchen utilities and reconstruction of the kitchen block of HEPMD – gara Samuil”, defended before the Social Investment Fund, worth 742 055 leva.

Three new day premises were constructed for social activities with independent rooms for sewing and knitting, and for training and organizing of activities on interests. A cabinet for rehabilitation is equipped in which a rehabilitator - labour therapist organizes and carries out rehabilitation activities with consumers in need of physiotherapy, premises for seclusion, furnished appropriately and predisposing to relaxation and seclusion.

Passages for wheelchairs are constructed at the central and side entrances. With view the facilitation of access of people with mobility problems, different appliances are constructed – handles on the railings, as in the female part of the building the whole stairway cage is used. The institution is set in conformity with the requirements for fire and emergency safety, pursuant to the legislation on force and the legal documents of the Office for Fire and Emergency Safety. A warning and calling system is installed in the institution.

The reconstruction of the building of the Home for people from 18 to 35 years with mental disabilities (HPMD) – Fakiya, Sredets Municipality, Bourgas Region, is financed

by the Social Investment Fund, Social Assistance Fund and funds of Sredets Municipality. The implemented project is worth 552 143, 62 leva.

With the provided resources a full reconstruction of the building is carried out in accordance with the standards and criteria for location and equipment pursuant to art. 40f from the RISAA. The specialized institution has in its disposal furnished and equipped dining hall, living room, studying sector, 2 health cabinets, and premises for seclusion. The building is adapted to people with disabilities under the requirements and standards for providing of accessible environment.

With view the improvement of the care for elderly people with disabilities, accommodated in specialized institutions, in the period August – September 2005 a Second national monitoring was conducted in 27 homes for elderly people with mental disabilities (HEPMD) and in 15 homes fore elderly people with psychic disorders (HEPPsD) by the Inspectorate at the Executive Director of the SAA. The inspections reflected the implementation of the plans of each of these institutions, prepared after the conducted in 2004 First National Monitoring.

In 2006, after the conducted National Monitoring, assessments and development plans were prepared for the 25 Homes for elderly people with physical disabilities and 4 Homes for elderly people with sensory disorders.

In connection with the improvement of the care for the consumers of social services, accommodated in specialized institutions for the period of 2005-2007, specialized institutions were opened, closed and restructured.

In 2005 the total number of specialized institutions for homeless people, old people and elderly people with disabilities was 162 with capacity of 12 352 places.

In 2006 the total number of specialized institutions for the same categories of people was 170 with capacity of 12 574 places.

By 31.12.2007 on the territory of the country, 182 specialized institutions for old people and elderly people with disabilities are functioning with total capacity of 13 830 places.

In connection with the large number of people waiting to be accommodated in specialized institutions for the period from the beginning of 2005 until the end of 2007, 15 homes with total capacity of 473 places were opened, from which 10 homes for old people, 1 home for elderly from 18 to 35 years with mental disabilities and 3 homes for temporary accommodation and 1 home for elderly people with physical disabilities.

For the improvement of the living conditions of the clients of social services in the community and in the specialized institutions in 2007, an supplemented state grant was insured and distributed in the amount of 2 288 103 leva.

### **Carrying out of methodical activity, connected to the improvement of the quality of life of elderly people and people with disabilities**

The collected information from the conducted National Monitorings of the specialized institutions for social services for people with disabilities as a basis for:

- account for the observance of the standards and criteria for rendering of social services;
- preparation and actualization of a Methodology for control activity on rendering of social services in specialized institutions;
- development of a Plan for the improvement of the condition of the elderly people with disabilities, accommodated in specialized institutions, containing operative aims, activities for their realization, terms, responsible bodies and funding;

- development of two instructions in connection with the amendment of the Tariff of the fees for social services, funded by the republican budget, approved with Ordinance # 91 of the Council of Ministers from 2003 on the specialized institutions and the Directorates “Social Assistance”;
- development of 2 instructions in connection with the opening of specialized institutions and social services in the community and the process of deinstitutionalization;
- development of methodical directions on the implementation of the standards and criteria for feeding and health care;

With view of the improvement of the quality of social services in the community and in the specialized institutions and the care for elderly people and for increasing the qualification of the staff in the specialized institutions, training seminar were conducted under the project “Innovation in the policy for people with disabilities in Bulgaria” – 30 social workers and labour therapists from HEPMD, HEPPsD and DCYMD, were trained.

Training courses with role playing games with subject “Team building, team work and settling of disputes in the practice of specialized institutions and social services in the community. Team leadership.” and lecture course with subject “Obligatory documentation in the specialized institutions. Fees for social service consummation” were conducted with view improving the capacity of the staff in the specialized institutions and the municipal administrations. 139 directors of specialized institutions and services in the community and representatives from the municipal administrations were trained.

There were conducted:

- 2 seminars in connection with the results of the Second National Monitoring and the process of deinstitutionalization;
- Seminar for analyzing the result from the National monitoring at the homes for elderly people with physical disabilities and sensory disorders;
- 2 seminars with inspectors from the Inspectorate at the Executive Director of the Social Assistance Agency in connection with the presentation of Methodology for control activity on the rendering of social services in the specialized institutions for the conducting of a Third National Monitoring;
- 9 seminar for consolidating the administrative capacity of the staff from the specialized institutions for elderly people with disabilities and the social workers from the Directorates “Social Assistance”, 322 social workers were trained;
- 3 working meetings with inspectors from the Inspectorate at the Executive Director of the Social Assistance Agency with the aim of getting acquainted with the Results from the Third National Monitoring of the specialized institution for people with mental disabilities;
- 3 working meetings in connection consolidating the administrative capacity of the experts from the regional directorates for social assistance and the social workers from the Directorates “Social Assistance”, according to approved by the Executive Director of the Social Assistance Agency annual plan.

At the conducted in 2004 First National Monitoring of the specialized institutions with mental disabilities, a very high percent of persons convicted under judicial disability consuming social services which could lead to potential infringement of their human rights, making the process of re-socialization even more difficult.

In this connection, “Assessments, recommendations and development plans for the specialized institutions for people with mental disabilities” were prepared, and the high

percent of persons convicted under judicial disability has to be clarified as it is put in the recommendations. Interdepartmental commissions on regional level were formed. They included representatives from the corresponding municipality, the Regional Directorate for Social Assistance, the Inspectorate of the SAA, the court and NGOs, working on the protection of human rights.

In all of the then functioning 27 Homes for elderly people with mental disabilities /HEPMD/ interdepartmental commissions were created and their activity is now concluded. As a result of the inspections, the following proposals were made:

- for changing the measure from putting in full judicial disability to limited one of 70 consumers of social services;
- for revoking of the measure limited judicial disability of 6 consumers.

For all of the then functioning 13 Homes for elderly people with psychic disorders (HEPPsD), interdepartmental commissions were formed and as a result of the inspections the following proposals were made:

- for change of the measure putting into judicial disability from full to limited of 22 consumers;
- for revoking the measure putting in limited judicial disability of 5 consumers.

After submission of the documents of the consumers of social services from the HEPMD at the court, the following decisions were taken:

- change of the measure of putting in judicial disability from full into limited of 6 consumers of social services from HEPMD – Russokastro village, Kameno municipality, Tvarditsa city and Banya city, Karlovo municipality. Until the 31.07.2008 the proceedings for change of the measure of putting into judicial disability from full to limited of one person from HEPMD – Russokastro village.
- Revoking of the measure putting in judicial disability of 6 consumers of social services from HEPMD – Kudelin village, Bregovo municipality and the city of Banya, Karlovo municipality.
- Rejection to change the measure of putting in judicial disability of 57 consumers of social services from HEPMD – Goren Chiflik city, Dolni Chiflik municipality, Butan village, Kozloduy municipality and Banya city, Karlovo municipality.

Action are taken for the preparation of the necessary documents for submission at the court for taking of decision on the made proposals for change or revoking of the measure putting into judicial disability of 10 of the consumers from HEPMD – Slavovitsa village, Septemvri municipality, Village “Kachulka” – Sliven and Malko Sharkovo village, Bolyarovo municipality.

After the submission of the documents of the consumers of social services from the HEPMD at the court, the following decisions were taken:

- change of the measure of putting in full judicial disability into limited of 5 consumers of social services from HEPMD – Rodino village, Smolyan municipality and Petkovo village, Smolyan municipality;
- Revoking of the measure putting in judicial disability of 1 consumer of social services from HEPMD - Petkovo village, Smolyan municipality;
- Rejection to change the measure of putting in judicial disability of 1 consumer of social services from HEPMD - Petkovo village, Smolyan municipality.

Actions were taken for preparation of the necessary documents for submission at court and taking of decisions on the made proposals for change or revoking of the measure



putting in judicial disability of 11 consumers of HEPPsD – Razlog village, Strumyantsi municipality and Zubernovo village, Malko Tarnovo municipality.

In connection with the Conception for deinstitutionalization of the specialized institutions for children and of the social institutions for elderly people with disabilities, interdepartmental commissions were formed for preparation of social assessment of all the accommodated in the institutions people on their objective condition and making of lists of suitable people for accepting in Protected Residences and of people suitable for reintegration. As a result of the conducted work, the commissions made the following conclusions:

- the total number of people suitable for leading out of the specialized institutions into Protected Residences – 505;
- there is a large percentage of people accommodated in specialized institutions for whom preconditions for leaving out and accommodating into Protected Residences or reintegration in the family environment are missing;
- from another side, the number of people suitable to be reintegrated in the family environment is also large but such environment is missing;
- in some places the interdepartmental commissions have noted the necessity of additional meeting with the close and relatives of the people suitable for reintegration that have refused to undertake the commitment /for example from HEPMD from 18 to 35 years, Tri Kladentsi village, Tratsa municipality) to discuss again the possibilities for reintegration as well as the refusal from psychological and social assistance of the family;
- the commissions have found cases when after continuing the individual social and labour-therapeutic activity that accompanies the medicinal therapy and psychological consultation, on a later stage, the consumer of social services can be included in a group for leaving out of the specialized institutions;
- in some municipalities where specialized institutions are functioning, no people suitable for accommodation in Protected residences and for reintegration were found;
- when preparing the evaluation of some people, a potential for development has been discovered and actual aims have been outlined for conducting of individual work;
- there are case when the type and level of disability of the people did not correspond to the type of institution they are accommodated in which imposes their transfer to suitable for their health condition specialized institutions.

With view to the realization of the deinstitutionalization it is necessary: the initiation of the active participation of the municipalities in granting of a suitable buildings – municipal property with the purpose the creation of Protected Residence and other social services in the community; the initiation of development of projects on EU Programmes which is a suitable variant for funding of social services; getting acquainted with good practices on rendering the social service “Protected Residence” and, in this connection, exchange of information between the municipalities; additional discussion and introducing with the method of the social service “Protected Residence” in order to achieve more convincing offering to families and to the people with disabilities.

**The Committee would like to receive information with a confirmation that the different provisions on social assistance are coordinated by the existing national framework on national and local levels**

## **Structural Regulation of the Social Assistance Agency**

### Specialized Administration

Art. 11. (Amend. SG 14/2005) the specialized administration is organized in:

1. (amend. SG 59/2006) General Directorate “Social Assistance” which includes the regional directorates for social assistance and the directorates “Social Assistance”;
2. Directorate “Child Protection”;
3. Directorate “International cooperation, programmes and European integration”.

Art. 12. General Directorate “Social Assistance”:

1. coordinates, supports and manages operatively the activity of the territorial divisions of the Agency;
2. carries out methodic management on:
  - a. granting social benefits and family allowances for children;
  - b. rendering social services in the specialized institutions and in the community;
  - c. social rehabilitation and integration of people with disabilities;
  - d. (revoked SG 14/2005);
  - e. creation of conditions for employment of the assisted people;
  - f. receiving, spending and giving account for humanitarian aids and donations;
3. participates in the development of projects of enactments on social assistance;
4. develops instructions and methodic materials on the implementation of the enactments in the field of social assistance;
5. (amend. SG 14/2005) participates in the development of conceptions, in the realization and coordination of programmes and strategies for social protection of the groups at risk;
6. gives opinions and proposes to the executive director of the agency the opening or closing of specialized institutions for social services;
7. keeps a register of the individuals, registered under the Commerce Act, and of the legal entities that can render social services;
8. (New SG – 14/2005) performs analysis of the submitted proposals, complaints, warning and request in the field of social assistance and the rights of people with disabilities;
9. (New SG – 14/2005) processes, checks and prepares answers to submitted requests, warnings, complaints, and proposals in the field of social assistance and the rights of people with disabilities;
10. (New SG – 14/2005) has meetings with citizens and gives consultations of individuals and legal entities on matters of social assistance and the rights of people with disabilities;
11. (prev. item 8 SG – 14/2005) prepares trimester reports and analysis for the activity of the social assistance in the country.

Art. 13 (revoked SG – 59/2006)

Art. 14 Regional directorates for social assistance:

1. implement the state policy in the field of social assistance, child protection and rehabilitation and social integration of people with disabilities on the territory of the district;
2. coordinates and controls the activities of the “Social Assistance” Directorates;

3. gives methodical help to the “Social Assistance” Directorates on:
  - a. granting of social assistance and family allowances for children ;
  - b. social rehabilitation and integration of people with disabilities;
  - c. activities on child protection;
  - d. implementation of employment programmes;
  - e. the receiving, spending and giving account of the humanitarian aids and donations;
4. explores the needs of the population in the field of social assistance and social services;
5. prepares opinions and makes proposals to the General Directorate “Social Assistance” for the opening and closing of specialized institutions for social services;
6. carries out inspections and prepares answers on the submitted proposals, complaints, warnings and requests;
7. analyses the submitted proposal, complaints, warning and requests;
8. controls the implementation of the measures for child protection;
9. executes inspection on complaints and warning of infringement of the rights of children;
10. cooperates and collaborates to legal entities working in the field of child protection;
11. executes cooperation with the district and municipal administration and with non-governmental organizations when implementing policies in the field of social protection of the groups in risk in the community;
12. organizes and carries out regional conferences on the social assistance and child protection issues;
13. receives citizens and gives consultations to individuals and legal entities on social assistance, child protection and the rights of people with disabilities matters;
14. executes organizational and methodical help and control over the activity of the “Social Assistance” Directorates in the field of informational services;
15. supports and actualizes a data base on district level;
16. prepares trimester reports for its activity.

Art. 16 “Social Assistance” Directorates

1. (amend. SG – 59/2006) implement the state policy in the field of social assistance, child protection, rehabilitation and social integration of people with disabilities on the territory of the respective municipalities;
2. trace the people and families in need of social assistance;
3. carry out the activity of accepting of documents of people and families, applying for social assistance;
4. execute inspection on place, examine the documents and gather information on the granting of social assistance to persons and families;
5. execute the entire work for granting, payment, rejection and suspension of social assistance and family allowances for children;
6. execute activities on social rehabilitation and integration of people with disabilities;
7. (amend. SG – 59/2006) execute the routine practical work for child protection in the respective municipalities;
8. execute temporary accommodation and temporary suspension of accommodation of children at families of relatives and close, in foster families and in specialized institutions;

9. determine and implement actual measures for child protection and control their execution;
10. grant targeted financial assistance, meant to support the child and its family, with the purpose of prevention and reintegration, bringing up the child at close and relatives and foster families;
11. (amend. SG- 59/2006) examine the needs of the population of social services in the respective municipalities;
12. execute actual social work directed towards the groups at risk with the aim of their social inclusion in the community;
13. execute work on the leading out of and accommodation in the specialized institutions;
14. consult and work individually with every person in need of social adaptation and integration;
15. (amend. SG – 59/2006) make proposals to the mayors of the respective municipalities for granting of alternative services in the community;
16. (amend. SG- 59/2006) make proposals to the regional directorates for social assistance for the opening and closing of specialized institution for social services;
17. give methodic help and collaboration to the municipal administration at rendering social services in the community and in the specialized institutions;
18. perform inspections and prepare answers to the submitted proposals, complaints, warnings and requests for social assistance and child protection;
19. analyze the received proposals, complains, warnings and requests;
20. cooperate and collaborate to individuals and legal entities working in the field of child protection and social services;
21. (amend. 59/2006) carry out the cooperation with the municipal administration and with non-governmental organizations at implementing the policy in the field of social protection of the groups at risk in the respective municipalities;
22. receive citizens and give consultations on social assistance, child protection and the rights of people with disabilities issues;
23. prepare trimester report on their activity;

Art. 16a (New SG – 14/2005) “Child Protection” Directorate:

1. executed methodical management of the activities for child protection;
2. participates in the preparation of projects of enactments in the field of child protection;
3. develops instructions and methodical materials on the implementation of the enactments in the field of child protection;
4. (New SG- 95/2007) executes methodical management for rendering of social services for children;
5. (prev. item 4 SG – 95/2007) participates in the development of conceptions, in the realization and coordination of programmes and strategies for child protection;
6. (prev. item 5 SG – 95/2007) analyzes of the received proposals, complaints, warnings and requests in the field of child protection;
7. (prev. item 6 SG – 95/2007) processes, checks and prepares answers on submitted complaints, warnings, requests and proposals in the field of child protection;
8. (prev. item 7 SG – 95/2007) receives citizens and gives consultations to individuals and legal entities on issues in the field of child protection;
9. (prev. item 8 SG – 95/2007) monthly makes conclusions and analyzes the information on the natural indicators for the activity for child protection in the

- “Social Assistance” Directorates and in the regional directorates for social assistance;
10. (prev. item 9 SG – 95/2007) prepares trimester reports on National programme for child protection and the stipulated in its national plans activities that are a commitment of the executive director of the Agency;
  11. (prev. item 10 SG – 95/2007) prepares annual reports on the activity of the directorate.

### **Social Assistance Act**

Art. 4. (1) (Amend., SG 120/02) The Council of Ministers shall determine the state policy in the field of the social assistance.

(2) (Amend., SG 120/02) The Minister of Labour and Social Policy shall develop, co-ordinate and implement the state policy in the field of social assistance.

(3) (Amend., SG 120/02) The state policy in the field of social assistance shall be implemented in cooperation with district administrations, local authorities and the NGOs, carrying out socially useful activities, creating conditions and cooperating for the implementation of programmes and projects in this field.

(4) (Amend., SG 120/02) For the implementation of the cooperation under Para. 3 shall be created a Council for Social Assistance which is a public advisory body at the Minister of Labour and Social Policy. Representatives of the Ministry of Labour and Social Policy, the Ministry of Finance, the Ministry of Health, the Ministry of Education and Science, the Ministry of Regional Development and Public Works, the National Association of the Municipalities of the Republic of Bulgaria, the nationally representative organizations of employers and workers as well as representatives of NGOs, carrying out socially useful activities in the field of social assistance shall participate in it.

(5) The structure and the activity of the Council for Social Assistance shall be regulated by an Ordinance issued by the Minister of Labour and Social Policy.

Art. 5. (Amend. SG 120/02) (1) For the purposes of implementation of the state policy in the field of social assistance an Agency for Social Assistance to the Minister of Labour and Social Policy shall be established.

(2) The Agency for Social Assistance shall be an executive agency – secondary administrator of budget funds to the Minister of Labour and Social Policy and it shall be a legal entity with residence in Sofia.

(3) The Agency for Social Assistance shall be represented and managed by an executive director.

(4) To the executive director of the Agency for Social Assistance shall be created an inspectorate.

(5) The territorial divisions of the Agency for Social Assistance shall be regional directorates for social assistance in the district administrative centers and “Social Assistance” Directorates on the territory of each municipality.

(6) To the “Social Assistance” Directorates shall be created “Child Protection” units.

(7) (Amend. SG – 18/2006) The activity, the structure and the number of the staff of the Agency for Social Assistance, the number and territorial scope of its divisions shall be determined with a Structural Regulation, adopted by the Council of Ministers upon proposal by the Minister of Labour and Social Policy.

Art. 6. (Amend., SG 120/02) The Agency for Social Assistance shall:

1. implement the realization of the state policy for social assistance;
2. implement activity for granting social assistance and rendering social services;
3. control the observance of approved criteria and standards for social services activities;
4. deliver permissions for opening and closing of specialized institutions for social services;
5. (Amend. SG – 18/2006, in force from the date of entering in force of the Treaty of integration of Republic of Bulgaria in the European Union) register individuals under art. 18, para. 1, items 3 and 4, rendering social services;
6. prepare summarized annual reports and analyses of the social assistance activity in the country, which shall be presented to the Minister of Labour and Social Policy;
7. participate in the preparation of drafts of normative acts in the field of social assistance;
8. implement other activities, determined by a law or an act of the Council of Ministers.

### **Regulation for Implementation of the Social Assistance Act**

Public control over the Social Assistance system:

Art. 52. (1) (Amend., SG 40/03) For the purposes of exercising public control over the activities of social assistance, a Public Council shall be established upon decision of the Municipal Council with the following functions:

1. To assist in implementation of the social assistance policy of the municipality;
2. To discuss regional strategies, programmes and projects related to social assistance;
3. To assist in coordination of provision of social services to individuals registered under the Commerce Act, and to legal entities;
4. To carry out control over the quality of social services in accordance with the recognized criteria and standards;
5. To produce standpoints regarding opening and closing down of specialized institutions for social services on the municipal territory.

(2) (Revoked SG – 40/2003).

(3) (Amend. SG 97/01, 40/03) The Public Council shall consist of at least three, but as much as nine persons and it shall include representatives of institutions, individuals registered under the Commerce Act, and legal entities which are related to social assistance activities.

(4) (New SG, 40/03) The members of the Public Council shall be obliged to observe the legislative requirements in respect to protection of information about persons and families benefiting from social assistance system, data which they have come to know in pursuance of their duties.

Art. 53. Public Councils shall be entitled to require and receive information from the “Social Assistance” Directorates regarding social assistance activities.

Art. 54. (Suppl. SG 97/01, amend. SG 40/03) In case of observed negligence or warnings on offences in carrying out the social assistance activities, the Public Councils shall inform in writing the chairperson of the Municipal Council and the Inspectorate to the Executive Director of the Social Assistance Agency.

**The Committee would like to receive information whether an individual right for independent assessment on the provision of access of the applicant to the wanted service exists, and also what are the criteria for access to other social services.**

The supplier of services is obliged to provide to potential consumers a project contract for granting social services. Moreover, he is obliged to provide information in writing with a description of the rendered social services, the experience of the supplier in rendering social services, the rules and conditions for benefiting from the services and the procedure for application.

When it concerns services rendered in specialized institutions or long-term services in the community, the supplier is obliged to assess the needs of every consumer and to formulate aims that must be achieved. The formulated aims are called individual plan and it describes the activities necessary for fulfillment of the everyday, health and educational needs of the clients, the need of rehabilitation, the need for organizing the free time and the need of contact with the family, close and friends. When it comes to people, accommodated in specialized institutions, the individual plan must also include measures for their leaving out of the institution and social inclusion.

The individual plan includes all the spheres that concern the criteria and standards. The idea of this plan is that on the base of specified criteria, actual aims shall be formulated in respect to every client and due to these aims, the client may assess at what level the service she/he is receiving is of good quality.

Its execution is assessed every six months and, when necessary, the information is actualized.

With view the protection of the interests of the social service consumers, RISAA provides the possibility for creation of councils of the consumers of social services, of their guardians and trustees. These councils can exercise public control; they have advisory functions in the execution of activities for provision of social services and they control their quality. Upon observed infringements, the councils of the consumers shall inform in writing the Inspectorate at the executive director of the Social Assistance Agency.

In accordance with the method for rendering social services in the community – the service is rendered after assessment of the needs of the potential consumer. The assessment of the consumer is performed by a professional with the participation of the potential consumer of the service. In case of a short-term service or when the service is rendered in a crisis situation, the assessment may be performed after the rendering of the service has begun.

The assessment of the needs obligatory includes an examination and characterization of:

- The general physical and mental condition of the potential consumer:
  - Seeing, hearing and communication abilities;
  - Ability for movement, necessity of technical auxiliary means, devices or equipment;
  - Mental health;
  - Mental functions;
- Ability to cope with every day activities and domestic shores;
- Social activity and interests;
- Relation with the family;
- Other social contacts;
- Living standards;
- Requirements for medicinal treatment and diets;
- Additional needs, connected to specific conditions;

- Safety and risks.

On the base of this assessment, in the plan for rendering the service are described specific activities, aimed at achieving the greatest possible fulfillment of the individual needs of the particular consumer.

The assessment of the consumers is actualized once every six months but can be reconsidered earlier at a request from the consumer or his/her relatives, close or legal representative, and also in occurred changes in the condition of the consume or in the his/ her specific needs.

The “Social Assistance” Directorates in the municipalities perform activities for rehabilitation and social integration of people with disabilities; they consult and work individually with every one in need of social adaptation and integration; perform actual social work, directed at supporting the groups in risk with aim their social inclusion in the community; explore the needs of the population of social services in the municipality; make proposals to the mayor of the municipality for provision of alternative services in the municipality.

**The Committee would like to receive a confirmation to the information from the previous report that the citizens of countries, Parties to the European Social Charter /revised/ receive equal treatment.**

#### **Social Assistance Act**

Art. 2. (1) (amend. SG 120/02; amend. and suppl. – SG 52/07) The Bulgarian citizens, permanent residence permit in the Republic of Bulgaria and the foreigners, to whom is conceded asylum, status of refugee or humanitarian status, and the foreigners being granted temporary protection, shall be obliged to render care for satisfying their basic needs.

(4) (amend. SG 120/02; amend. and suppl. – SG 52/07) Foreigners with permanent residence permit in the Republic of Bulgaria and foreigners, to whom is conceded asylum, status of refugee or humanitarian status, and the foreigners being granted temporary protection, and those for who this is provided in international agreement to which the Republic of Bulgaria is a party shall benefit of the right under Para 3.

Art. 3. (amend. SG 120/02) When executing social assistance, it shall not be permitted direct or indirect discrimination, based on sex, race, colour of skin, ethnic origin, citizenship, political or other beliefs, religion or belief, disability, age, sexual orientation, family status or origin, membership in trade and other public organizations and movements.

**The Committee would like to receive information if the right of seclusion, meeting with the family, protection of the property, including protection of personal data of the inhabitants of the homes for people with mental and physical disabilities, is enjoyed by them in practice.**

In all 26 homes for children with disabilities there are children that have interrupted their ties with the families. The conclusion of the commission that performed the inspections/report – analysis from the performed inspections in the Home for children with disabilities by the State Agency for Child Protection in the period from February to April 2008) is that in most of the homes everything possible for their restoration has been done.



A place for meetings with parents has been differentiated, and in most of the homes there are specialists for work with parents.

Obligatory prescriptions have been issued for improving the individualization of the care and for providing of space for meetings with families. With methodical help for their implementation, experts from RDSA and “SA” Directorates are engaged.

**The Committee had taken into consideration the information from the previous report on the geographic distribution of social services but would like it to be indicated of the geographic distribution of social services corresponds to the specific needs on places.**

The planning and opening of social services for children is directly linked with the Municipal strategies for child protection, developed with the collaboration with the regional directorates for social assistance and the “Social Assistance” Directorate and analysis of the information for the condition and needs of the child population of the municipalities and districts. A conclusion can be made that in the big municipalities there is active position and policy for opening and functioning of social services while in the small municipalities function significantly less in number and type social services, with view the information about the opened and the functioning social services at places. To a certain degree, the difficulties at the developing and the rendering of social services are caused by the lack of resources in the material base as well as of specialists to work there.

**The Committee would like to receive data for the total annual expenses for social services by years – 2005, 2006 and 2007.**

See Appendix 5.1 and 5.2.

**The Committee would like to receive information on the carried out control over the provision of social services.**

## **2005**

In 2005 a total of 76 inspections were performed in specialized institutions for people with mental disabilities, from which 8 complex inspections in specialized institutions; 29 inspections by the established Method for control activity and 39 inspections on the implementation of the instructions, recommendations and development plans.

### **Complex inspections in specialized institutions**

8 complex inspections were performed in specialized institutions for social services: HEPPsD – Petkovo village, Smolyan municipality; HEPPsD – Radovets village, Topolgrad municipality; HEPPsD – Svilengrad; HEPMD – Kachulka village, Sliven; Social Educational professional Centre – Bata village, Pomorie municipality; HCMD – Iskra village, Karnobat municipality, HCMD – Djurkovo village, Laki municipality and HCMD – Dobromirski village, Kirkovo municipality.

The main omissions and infringements that were established during the inspections are on the furnishing of the premises, the obligatory documentation, the feeding, the health care and the surrounding environment.

Inspections under the established Method for control activity

29 inspections were performed in specialized institutions for people with physical disabilities and sensory disorders by the established Method for control activity in the following homes: HEPPD – Stolat village, Sevlievo municipality; Gabrovo, Plovdiv; Assenovgrad; Orsoya village, Lom municipality; Gorna Verenitsa village, Montana municipality; Byala city, Varna district; Goritsa village, Pomorie municipality; Baley village, Bregovo municipality; Slivek village, Lovech municipality; Ezerovo village, Parvomay municipality; Kozloduy; Yasna Polyana village, Primolsko municipality; Slishovysi village, Tran municipality; Gorski Goren Trambesh village, Gorna Oryahovitsa municipality; Provadiya, Lovsko village, Loznitsa municipality; Harsovo village, Samuil municipality; Kyustendil; Shtarkovo village, Lessichovo municipality; Aydemir village, Rousse municipality; Dolno Draglishte village, Razlog municipality; Home for Elderly and People with Physical Disabilities and Rehabilitation Section, Stara Zagaroa; Home for Elderly People with Sensory Disorders – Pirdop; Valchedram, Haskovo, Sofia and Home for War Invalids (HWI), Bankya.

From the performed inspections, the conclusion that the most frequent infringements and omissions are related with the inadequate quality of the material base and the ineffective work in the specialized institutions can be imposed. The most often obligatory prescriptions that were made are related to the improvement of the material base, the quality of life and the quality of the care provided to the consumers of social services. The performed inspections prove the necessity of training of the staff of the specialized institutions about the criteria and standards for social services and the requirements of the legislation. The number of employees on pay-roll in some specialized institutions is insufficient. All of this directly influences the care provided to the consumers of social services.

From the characteristics of the location of the institutions for the people with physical and sensory disorders it may be concluded that most of them are located in small villages, in distant from the bigger cities / between 20 and 50 km. / with not sufficiently well developed net of specialized medical services, as well as other social services, which creates difficulties at the possibilities for socialization and integration.

During the last years, in most of the HEPPD and the HEPSD has been invested in improvement of the material base and the quality of life of the serviced people. Yet, not enough attention is paid to the accessibility to specialized institutions. The change in the model for taking care is troubled also by the lack of well equipped premises for physiotherapy and other types of therapy – labour therapy, music therapy, art-therapy, sensory-therapy and others, which are part of the contemporary requirements in the field of social services for people with physical disabilities and sensory disorders.

In some institutions a reconstruction of the existing premises must be done with view the provision of conditions that resemble these of the family environment – it is necessary of more dormitories with less people in them to be differentiated and the creation of possibilities for increasing the personal space of every consumer of social services.

All of the inspections were concluded with the preparation of file records with obligatory prescriptions that are presented to the specialized institutions and to the respective municipal administrations. For elimination of the allowed omissions and infringements, 425 obligatory prescriptions with specific terms were given for execution (12 inspections on average).

Inspections on the implementation of the prescriptions, recommendations and development plans

39 inspections were performed in relation to the Second National Monitoring of the specialized institutions of people with mental disabilities – 13 of which in Homes for

elderly people with psychic disorders (HEPPsD) and 26 – in Homes for elderly people with mental disabilities (HEPMD). The results of the performed inspections in the different sections are the following:

In almost all of the specialized institutions measures were undertaken for tracing and making contact with close and relatives of the accommodated people. In most of the homes, the social workers have sent letters and have conducted telephone conversations with the directors of Directorates “Social Assistance” and with the mayors of the municipalities on which territory the allocated lived. Conversations were also conducted with close and relatives of the serviced people. An exception make HEPPsD – Svilengrad and HEPMD – Oborishte village, Valchi dol municipality.

In almost every specialized institution premises for visits by close and relatives are ensured and most of them are furnished with suitable furniture, paintings and flowers are placed which makes the atmosphere close to the family one. During the inspections some of the premises were at process of repair. There is no such room in HEPMD – Banya, Karlovo municipality which is caused by the lack of premises, and in HEPPsD – Svilengrad, due to the forthcoming move to a new building.

In almost every home that had a prescription for moving the allocated people into a Protected Residence, measures were undertaken and the allocation of some of them is already realized, with the exception of HEPPsD – Radovets village, Topolovgrad municipality and HEPMD – Lozevo village, Shoumen municipality.

In 36 specialized institutions good conditions for feeding were created. Enough chairs and tables were ensured and in some of them complementary utensils were bought.

Significant positive change in the feeding environment is achieved in HEPPsD – Pravda village, Dulovo municipality. The tables are covered with colorful table cloths. On each table napkins, vases with flowers and sets with salt, vinegar and oil are placed. Air conditioner and a machine for cold and warm water, charged with mineral water are placed in the canteen. Every day a person from the accommodated (member of the council of the consumers of social services) writes down the daily menu on a special board. There is a TV, a radio and a library with books and newspapers. The time outside the one determined for feeding is used for relaxation and amusement. Two coffee automates, charged with non caffeine coffee, are placed for the needs of the serviced people. There is fully renovated lavatory at the canteen. The sinks are with cold and warm water and on each of them liquid soap is placed. There are hand dryers on the walls and boxes with paper towels for single use as well as mirrors.

Personal choice of food to the consumers of social services is ensured to 48,7% of the specialized institutions. The commissions have conducted conversations for discussing the possibility of creating councils of consumers of social services and their trustees (art. 54a from the RISAA) for protecting the interests of the accommodated in relation with feeding and other types of provided social services.

A correct diet, good quality, healthy and nutritious food is ensured in 35 specialized institutions.

In some of the specialized institutions an employee with suitable education is determined to be responsible for the implementation of the criteria and standards for health care.

Only in one specialized institution – HEPPsD, Razdol village, Strumyantsi municipality, written plans for health care are not prepared.

In HEPMD – Kachulka village, Sliven municipality, there is a premise equipped with the most contemporary fitness and rehabilitation devices (threadmill, stepper, veloergometer, massage table, balls, badmintons and others).

In a small part of the specialized institutions no educational programmes for work with the consumers of social services, in conformity with their individual opportunities,

were prepared. There are created and provided: groups on interests, materials for reading, writing, drawing, playing on entertaining games, audiovisual equipment, subscription to newspapers and magazines.

In most of the specialized institutions annual plan-programmes are prepared for organizing of sports events, cultural activities, celebrations of national and religious holidays, organization of excursions, etc.

In some of the specialized institutions, programmes for raising the qualification of the personnel were developed: courses for after graduate qualification (in relation with the care for people with mental disabilities), participation in training programmes, etc. in accordance with the recommendations in almost all specialized institutions the duty characteristics of the staff were actualized and enough qualified personnel was ensured (social workers, nurses, rehabilitators and labour – therapist).

All the inspections were concluded with the preparation of a report with obligatory prescriptions which are given to the specialized institutions and the respective municipal administrations. For elimination of the omissions and infringements, 241 obligatory prescriptions are given with specific terms of their execution (an average of 6 inspections).

## **2006**

In 2006, a total of 81 inspections in specialized institutions for social services in the community were performed, from which: 10 are complex ones for the specialized institutions; 12 – inspections on the execution of the prescriptions, recommendations and developments plans; 44 – inspections on the established Method for control activity; 3 – inspections on the criteria and standards for social services in the specialized institutions and 12 inspections on the criteria and standards of the social services in the community.

### **Complex inspections in the specialized institutions for social services**

10 complex inspections in institutions for rendering of social services were performed: HCMD – Dobromiritsi village, Kirkovo municipality; HEPPsD – Radovets village, Topolovgrad municipality; HCMD – berkovitsa; HEPPsD – Svilengrad; HWI – Bankya; HEPPD – Plovdiv; HEPsD – Sofia, HEPsD – Pirdop, HEPPD – Slishovtsi village, Tran municipality and HEPPD – Assenovgrad.

As a result from the performed inspection and the established infringements in HCMD – Dobromiritsi village, Kirkovo municipality is closed considered from 01.04.2006.

For the established omissions and infringements of particular standards and criteria for rendering of social services, in the other 9 institutions were given obligatory prescriptions.

### **Inspections on prescriptions, recommendations and development plans**

In the period 14<sup>th</sup> of November 2005 - 17 of February 2006, 12 inspections were performed in specialized institutions for elderly people in dementia in relation to the Second national monitoring and inspections in relation with the implementation of the given obligatory prescriptions in the following homes: HEPD – Dryanovo; Gorsko Kosovo village, Suhindol municipality; Dobri Dol village, Lom municipality; Salash village, Belogradchik municipality; Kazanlak; Slavyantsi village, Sungulare municipality; Ognen village, Karnobat municipality; Opaets village, Dobrich municipality; Rousse; Bistrilitsa village, Berkovitsa municipality; Razgrad; Sofia and Gorna Mahala village, Kaloyanovo municipality.

Inspections on the established Method for control activity /Third National Monitoring/

44 inspections were performed in specialized institutions with mental disabilities and psychic disorders on the established Method for control activity. In the inspections the following was established:

In most of the specialized institutions the consumers that have resumed the relations with close and relatives are few or none. In the places where the D”SA” and the social workers have established contact with close and relatives, a large number of refusals for taking back to the family of consumers were received. The most frequent motivation were connected with family reasons, lack of residence, worsen health condition, age and financial impossibility.

Inspections on the implementation of the criteria and standards for rendering of social services

12 inspections were performed on the implementation of the criteria and standards for rendering of social services in the community by individuals and legal entities including: 3 inspections – day centers on state responsibility given for management to individuals or legal entities; 5 – in private day centers and 2 in private rehabilitation centers as follows:

During the inspections performed it was established that some of the services are not sustainable. In case of non-observance of the requirements of the criteria and standards for social services, obligatory prescriptions were issued.

## **2007**

In 2007 a total of 51 inspections were performed in specialized institutions for social services and social services in the community for people with mental disabilities 7 of which were complex ones in specialized institutions; 13 – inspection on the established Method for control activity and 31 – complex inspections of rendering of social services in the community.

### **Complex inspections in specialized institutions**

On the territory of the country there are 13 homes for elderly people in dementia with 864 places. The resources for maintenance from the state, financed through the municipal budgets, for 2007 are in the amount of 3 001 600 leva.

In November – December 2007 a monitoring of all the 13 homes for elderly people in dementia was performed.

The purpose of the performed monitoring in the homes for elderly people with dementia is to carry out control and to render continuous care for providing adequate social services to people with dementia as well as their social integration in the spirit of the established European practices based on the respective methods and prepared reports.

From the performed inspections the following conclusions can be made:

The number of staff is increased for 2006 with 42 duties on pay-roll and for 2007 with 38 duties on pay-roll which has significantly improved the quality of the social services rendered.

In almost all specialized institutions for elderly people in dementia training of the staff is performed with the joint participation of the state, the municipalities and the NGOs.

General and other repairs of the material base are performed in all specialized institutions for improvement the quality of life of the consumers of social services.

The equipment of the living rooms, kitchen blocks, canteens and the laundry rooms has been improved but still the furnishing of the bedrooms in 8 specialized institutions is not adequate. In all specialized institutions for elderly people with dementia qualitative, healthy and nutritious food is ensured.

Good medical care of the consumers of social services is ensured by personal medical doctors, dentists and the medical staff of the specialized institutions.

The standards and criteria for organizing the leisure time in relation with planning of cultural, entertaining and other activities that may give opportunity for personal contacts with close and relatives are observed in almost all specialized institutions.

Access to information is ensured in the specialized institutions for elderly people with dementia through subscriptions to different newspapers and magazines and audio-visual equipment, consistent with the number of accommodated persons.

The processes of reintegration and deinstitutionalization are approved through alternative services in the community – personal and social assistant and home assistant.

Most of the specialized institutions are working on projects of different organizations for ensuring additional resources for improving the quality of life of the consumers of social services – construction of a new or repair of the old material base and replacement of equipment.

Complex inspections on the rendering of social services in the community

In 2007 31 complex inspections on the rendering of social services in the community were performed. In a small number of them /7 social services/ non-fulfillment of a certain standards is established, which resulted in giving prescriptions.

## **Article 14§2**

**1) Please describe the general legal framework. Please specify the nature of, reasons for and extent of any reforms.**

**2) Please indicate the measures taken (administrative arrangements, programmes, action plans, projects, etc.) to implement the legal framework.**

**3) Please provide pertinent figures, statistics or any other relevant information to demonstrate the participation of the voluntary sector to the provision of social services, as well as the effective access of individuals to these services.**

## **Questions of the European Committee of Social Rights**

**The Committee would like to receive information on how the access and effectiveness of social services, conceded by individuals or legal entities, is guaranteed.**

Social services are carried out by the state, the municipalities, individuals, registered under the Commerce Act and legal entities. The individuals, registered under the Commerce Act and the legal entities may carry out social services after inscription in the register of the Social Assistance Agency. In the term “legal entity” are included also the legal entities with non-profit purpose that are suppliers of social services together with business representatives on equal footing.

The order for inscribing of the suppliers of social services is described in the Regulation for Implementation of the Social Assistance Act. An additional requirement for the suppliers for services for children was introduced – a license for carrying out services for children should be obtained.

With the amendments of the Social Assistance Act in 2003 it is aimed for the NGOs carrying out social services to be stimulated. The persons that can carry out social services had been determined, obligatory criteria and standards for carrying out of social services had been introduced, the mechanism for control had been improved, conditions for promotion of social services suppliers had been created. The scope of persons that can be social services suppliers had been broadened.

With the amendments in the Bulgarian legislation for the first time it was foreseen the possibility for the legal entities with non-profit purpose, suppliers of social service, to receive financing from the municipal budgets and/or from the republican budget. The granting of the resources is accomplished after the organization of a competition by the mayor of the municipality. The legislation stipulates the possibility of mayors of municipalities to entrust the management of specialized institutions and of social services in the community to other suppliers of social services, including legal entities with non-profit purpose. All the activities in the sphere of the social services are entrusted after a competition or negotiation when there is only one candidate at the observance of the criteria and standards for social services, regulated in the Regulation for the Implementation of the Social Assistance Act and the Ordinance on the criteria and standards of the social services for children, adopted by the Council of Ministers.

In implementation of the IPDA in 2005 the Agency for People with Disabilities financed a project for employment and integration of people with disabilities with total funding accounting at 3 030 200 leva /in this sum there are not included transfers to the municipalities worth 82 994 leva and the confirmed resources from the SAA in the amount of 24 196 leva/:

- ensuring employment to people with disabilities in a habitual working environment – during the period of the report upon a proposal from the APD a method for financing regular employers' projects that want to hire people with permanent disabilities was approved. The Agency finances the ensuring of access, the adaptation and/or the equipment of the workplaces of the beneficiaries. 24 employers were financed. Employment to 37 persons with permanent disabilities was ensured for a term of 36 months.
- In 2005 the APD started the indemnification of 30% from the deposited insurance installments for all insurance risks by the employers from the specialized and habitual working environment as stipulated in Ordinance #4 from 20.05.2005. For the reference period, 612 780 leva were compensated to 71 organizations that take advantage of those preferences.
- During the reference period of the report the APD financed the participation of 43 specialized enterprises and cooperatives of people with disabilities at the Plovdiv's Fair at the total worth of 100 000 leva;
- Financing of non-governmental organizations of and for people with disabilities, aiming at rehabilitation and social integration of people from the target group.

In 2005, 48 NGO projects were financed, worth 281 999 leva:

- ensuring employment to people with disabilities in specialized working environment – in 2005 upon a proposal of the APD a method of assessment of projects of specialized enterprises and cooperatives of people with disabilities was established:
  - A) method for assessment of projects with social direction /aiming at providing healthy and safe conditions at work and etc./ through this method in 2005q 23 specialized enterprises and cooperatives were financed in the total amount of 625 813 leva.
  - B) Method for assessment of projects of investment business projects /aiming technological renovation of these organizations/. On this method in 2005q 28 specialized enterprises and cooperatives were financed in the total amount of 1 297 884 leva.

A register of the specialized enterprises and co-operations of people with disabilities was created. In 2005q 104 organization of this type were registered.

In 2005 in implementation of art. 9, para. 1 of the IPDA, the APD developed and implemented Informational data base for the people with disabilities. By the 31<sup>st</sup> December 2005 the informational data base is filled in with 20 000 entries of people with disabilities.

In implementation of the IPDA, in 2006, the APD had financed employment and integration of people with disabilities projects with the total value of 3,7 millions of leva, 0,7 million leva more than in 2005. The increased amount of the subsidies granted to employers in specialized work environment led to consolidation of the specialized enterprises and insured ergonomic, safe and healthy working conditions. New work places for people with disabilities were created in integrated working environment and a number of positive results were achieved for the social integration of the people with disabilities. The number of the approved subsidized projects was increased, compared to 2005, with 20%, the amount of the limit of the subsidies, as well as the covered immediate consumers with closely 15%. In 2006 a new programme for financing projects for independent economic activity of people with disabilities was also started.

As a result of the nearly 400 implemented inspections on the APD financed projects, 55 000 leva were collected from fines, sanctions and forfeits, claims have been filled against inexact partners of the Agency in the amount of 160 000 leva.

On activity "Other Offices and Activities on Social Insurance, Assistance and Employment" in 2007 were spent a total of 3 657 416 leva. The execution of this activity is the so called active policy of the APD "Employment and Social Integration of the People with Disabilities".

For compensation of 30% of the deposited by the employers insurance installments under art. 26 and art. 40 of the IPDA, 803 939 were spent.

For financing of employers projects under art. 25 from the IPDA by the 31<sup>st</sup> of December 2007, 233 023 leva were paid to 30 employers for insuring employment to people with disabilities in habitual work environment.

During the reference period, 30 projects on the method for assessment of projects with social purpose of the specialized enterprises and cooperatives of people with disabilities were financed in the amount of 1 009 372 leva as well as 7 projects on the method for assessment of investment business projects in the amount of 627 698 leva.

By 31<sup>st</sup> of December of 2007 resources on 35 concluded contracts for starting the development of independent social activity of people with permanent lost capacity to work were paid in the amount of 450 017 leva.

For the period resources are spent for partial financing of 26 projects on the method for assessment of projects of non-governmental organizations for professional training and re-qualification, for rehabilitation and social integration of people with disabilities in the amount of 367 870 leva.

In 2007, resources were spent for partial financing of 5 projects of non-governmental organizations in the amount of 165 652 leva. The financing is done on the method, approved by the Executive Director of the APD. The module provides access and adaptation of cultural, historical and sport objects with international, national and regional importance. Participants in the competition may be state, municipal and non-governmental organizations.