



CPT/Inf (2008) 6

**Response of the Government of  
"the former Yugoslav Republic of Macedonia"  
to the report of the European Committee  
for the Prevention of Torture and Inhuman  
or Degrading Treatment or Punishment (CPT)  
on its visit to "the former Yugoslav Republic  
of Macedonia"**

**from 15 to 26 May 2006**

The Government of "the former Yugoslav Republic of Macedonia" has requested the publication of this response. The report on the CPT's visit to "the former Yugoslav Republic of Macedonia" in May 2006 is set out in document CPT/Inf (2008) 5.

Strasbourg, 13 February 2008

Note:

In accordance with Article 11, paragraph 3, of the Convention, certain names have been deleted.

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**Interim Response of the Macedonian Authorities to the report  
of the European Committee for the Prevention of Torture  
and Inhuman or Degrading Treatment or Punishment  
on its visit to the Republic of Macedonia  
from 15 to 26 May 2006**

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**In reference to the observations and the recommendations made by the Delegation of the CPT at the occasion of their visit to the Republic of Macedonia in May 2006, as stated in the letter of Ms Silvia Casale, President of the CPT, sent on 24 November 2006, the competent authorities of the Government of the Republic of Macedonia are submitting the following interim responses:**

**The Ministry of Interior**

The Security and Counterintelligence Department, having due regard of the competencies of the CPT and appreciating CPT's valuable contribution to overcoming the deficiencies and shortcomings in the procedures i.e. in the protection of fundamental human rights and freedoms guaranteed under the Constitution of the Republic of Macedonia, reiterates its readiness for open cooperation at all levels with the CPT representatives.

CPT's recommendations have always been dully and seriously taken into consideration. Hence, the CPT itself has concluded that there is marked improvement in the work of this Department in terms of respecting fundamental rights and freedoms of citizens in the course of police procedures.

**Paragraph 36 (subpara. 4)** As regards the allegations that the Security and Counterintelligence Department has unauthorized locations for detention of persons suspected of having committed crimes the investigation of which is under the Department's competences, the Department categorically states that all facilities used by the officers of this organizational unit of the Ministry, which are possession of the Ministry of the Interior, are well known and during its regular meetings the CPT was able to see and inspect such facilities. In performing activities under its competencies, the Department endeavors to consistently apply the laws and other regulations and as a body within the Ministry of the Interior, the Department has never been nor will it be outside the control of this Ministry.

## **The Ministry of Justice**

The Ministry of Justice has given a summary response to several paragraphs concerning the conditions in the prison establishments, namely paragraphs 51, 60, 67, 68, 70, 86, 99, 125:

Acting upon CPT's Report, the Administration for Execution of Sanctions informs that as thus far it accepts CPT's considerations, comments and conclusions and makes efforts to undertake further activities to overcome the established deficiencies. In this respect, there have been several meetings held with the wardens of the penitentiary-correctional facilities who have been informed about the remarks and recommendations for overcoming certain situations and for elimination of eventual deficiencies in the treatment of detained and convicted persons. There has been an analysis prepared about the situation in the Administration for Execution of Sanctions and of the situation in the penitentiary - correctional and correctional-educational facilities of the Republic of Macedonia, as well as Information about the current state of affairs regarding the functioning of the Correctional - Education Facility in Tetovo. These documents have been submitted to the Government for consideration and endorsement for purposes of undertaking concrete measures and activities to improve the conditions in the penitentiaries and in the correctional facilities.

1. The Analysis of the situation at the Administration for Execution of Sanctions and of the situation in penitentiary and correctional facilities in the Republic of Macedonia examines in great detail the overall situation in the penitentiary and correctional facilities in the country, establishing consequently the necessary requirements to satisfy the minimum standards in respect of the convicted persons, as well as in respect of the staff at these institutions, defining measures and manners to overcome the situation. In this context, the previous CPT recommendations have been also reiterated. There have been concrete plans and schedules defined for the realization of a series of activities that will significantly improve the conditions in all penitentiary -correctional facilities. Namely, it is proposed that based on the established situation the Government is to implement staged priority activities primarily related to increasing the capacities and improvement of the accommodation conditions for convicts, minors, and detainees at penitentiaries and correctional facilities, and to creating opportunities for better quality re-socialization, health care, and better securing of the prison population by completing the staffing of all prison services.

The following measures have been proposed:

a) Intensification of the construction works in order that **the new semi - open institutions start functioning** - the prisons in Kumanovo, Ohrid, Prilep, and Strumica, in light of the fact that penitentiaries are faced with lack of premises and appropriate accommodation conditions for convicts and detainees, and in light of the necessity to accelerate activities for the start of functioning of the new network of penitentiary - correctional facilities.

b) There are activities underway **for adjustment of the Stip Penitentiary into another closed penitentiary - correctional institution**, by which the situation of over-crowdedness at the Idrizovo Penitentiary would be alleviated and the separation of coconspirators or perpetrators of crimes from victims of crimes would be enabled.

c) Activities will start for **construction of an institute- hospital** where persons suffering addiction, the chronically ill and persons with mental problems would serve their prisons sentences. Specialized medical teams will implement the basic treatment and conduct continuous examinations of the situation. These activities are based on the growing problem of convicts addicted to opiate drugs, as well as inmates with mental problems. This will help overcome and prevent cases of inappropriate treatment of addicts and inmates with mental problems.

d) In order that the prison staff performs its duties professionally and qualitatively, as well as that the staff apply humane and proper treatment, paying at the same time due attention to security and maintaining order and discipline at the facilities, it is necessary to **recruit a significant number of staff of all profiles in all penitentiary –correctional facilities in the country, especially medical staff and staff for the Treatment Ward.** In this context, there are efforts made for continuous professional training and refreshment courses of the prison staff that is in direct contact with the convicts. There are guidelines given in this respect about the provision of health care for convicts and detainees, and all prison Governors have been instructed to undertake activities to improve the quality of the medical examinations and the thoroughness of documenting the information in the medical files, being also instructed as to what a medical file for each individual prisoner is to contain.

Furthermore, it has been emphasized that in all cases in which it will be determined that the injuries that the doctor has established are consistent with the ill-treatment allegations of detained persons, the Public Prosecutor is to be immediately informed.

**At its session held on 6 March 2007, the Government of the Republic of Macedonia adopted the Analysis of the situation in the penitentiary correctional facilities.** Part of the activities for which funds have been ensured are already underway, while as regards the funds for other proposed activities the implementation of which requires 8 to 10.000.000, 00 EURO, they will be provided after the rebalance of the 2007 Budget and through a credit line. This would resolve most of the issues that the CPT has presented its recommendations about.

a) **Paragraphs 67, 68** In respect of the issues of ensuring sufficient hygienic area for each individual prisoner and a bed for each prisoner, then the issue of reconstruction of the sanitary facilities

- at the **Idrizovo Penitentiary** there will be funds provided for:
  - reconstruction of the third wing of the maximum security ward;
  - complete renovation of the open ward at the institute, i.e. reconstruction of the water supply, electric and sewage installations;
  - Modernization of the kitchen and relocation of the bakery;
  - Renovation of the boiler room and the laundry;
- **(Paragraphs 60)** While at the **Skopje Penitentiary** the following activities have been undertaken:
  - one prison wing has been completely renovated;
  - the high security ward has been renovated, i.e. the sanitary facilities have been renovated, the floor covering has been replaced and the walls have been painted;
  - After funds have been secured the detention facility will be extended by the construction of a new wing having the capacity of accommodating 200 detainees;
  - all premises and sanitary facilities in the old prison wing will be renovated;
  - the open Prison Ward will be renovated.

2.(Paragraphs 118, 125) The Information on the current situation in the functioning of the Tetovo Correctional - Eductrational Facility presents a full review of the accommodation, treatment conditions, as well as of problems the Institution is facing owing to the lack of appropriate facilities for the functions it performs, exasperated by the fact that the temporary placement of this Institution in the Skopje Penitentiary has been prolonged for 6 years now.

At its session held on 6 March 2007, the Government endorsed this Information and established a Committee composed of Cabinet ministers to review the situation and draft proposals for reassignment of the premises and to offer a possible solution ensuring premises adequate to the needs and functions of the Tetovo Correctional - Education Facility.

### **General Comment**

The Administration for Execution of Sanctions will continue following the situation with respect to human rights protection in the course of executing sanctions and detention at penitentiary - correctional facilities, conducting regular expert-instructional inspections and being in continuous contacts and communication with the facilities' services.

### **The Ministry of Health**

**Paragraph 50** Regarding the recommendation by the CPT for issuing clear guidelines to all prisons to ensure appropriate assessment and protection of the mental health of the persons at risk of self-harm or suicide, the Ministry of Health has distributed written guidelines to the competent sector at the Ministry of Justice, i.e. the Directorate for the Execution of Sanctions, for consistent application of the CPT standards (enclosing as well the Health in Prisons CPT standards) related to the health care in prisons, and especially to the protection of mental health and the prevention of self-inflicted injuries and suicides.

In regard to the protection of minors, it is considered that this requires a multidisciplinary approach and the involvement of professionals from different areas (including teachers, trainers and psychologists) for the purpose of responding to the specific needs of the minors within a secure educational and socio-therapeutic environment; this can also be achieved by following the CPT standards related to the health care in prisons and minor persons deprived of their freedom.

In respect of providing health education, education activities have been conducted and education materials (brochures, film) have been provided to prisoners and prison staff about HIV/AIDS and sexually transmitted diseases under the HIV/AIDS Program and the Tuberculosis Program, which are carried out with the grant support from the Global Fund. The educational film has been seen by 1857 convicted persons, and 1450 brochures have been handed out (a copy of the brochure is attached hereby). In addition, 94 convicts have been trained under these programs as peer educators.

Under the Tuberculosis Program, the Lung Diseases Institute, as well as a team from the Directorate for the Execution of Sanctions, have held educational seminars on the prevention of tuberculosis for this group of vulnerable persons, covering 1540 convicts to date. Moreover, brochures have been prepared about tuberculosis-vulnerable groups (a copy is attached hereby).

## **The situation in psychiatric institutions**

**Paragraph 128** In compliance with the recommendation by the CPT for reassessment of the policy of holding mentally ill persons together with persons with learning disabilities, steps have been undertaken at the Demir Hisar Psychiatric Hospital for revision of the diagnoses of the patients admitted to the Hospital, as well as for structuring the wards aiming at proper organization of the wards for the mentally ill and for the learning disabled. The process is in progress and is expected to be completed by the end of March 2007.

The Ministry of Health has appointed a new Director who is professionally qualified for implementation of the reforms and who runs the institution with good feasantance.

**Paragraph 129** In the course of its regular inspections of the psychiatric hospitals and of the hospitals in which there are neuropsychiatry wards, the State Sanitary and Health Inspectorate has observed that the Commissions at the Assemblies of the Municipalities in which there are psychiatric hospitals have not been fully established. The Health Inspectorate has informed the mayors about the need to fulfill this obligation and inspections are to be conducted in the upcoming period.

Regarding the formation of a Commission for Mental Health in the Municipality of Demir Hisar, decision has been brought on the formation of a Commission for Mental Health, then two Commission members have been appointed (a representative of the Municipality and a specialist psychiatrist from Bitola; the nominations from the other institutions are expected).

In addition, communication has been established with the Deputy Ombudsman at the Office of the Ombudsman in Bitola, with whom regular visits to the psychiatric hospital two times per week have been arranged.

In cooperation with the WHO, a publication is being prepared that will enable awareness-raising, targeting especially mental health care professionals and beneficiaries, as well as the wider community, and promoting the implementation of the Law on Mental Health. In 2007, training seminars on the implementation of the Law on Mental Health are planned for managers and health workers, as well as for the inspectors from the State Sanitary and Health Inspectorate.

Regarding the observation by the CPT that the penalty for ill-treatment by mental health care institutions staff<sup>1</sup>, which in addition to individuals can also be imposed on institutions by their temporary closure for a period between six months and two years, is excessive and that it is disproportionate to the offence referred to in Article 40, it is considered that the aforementioned provision, in addition to the special prevention which is part of every sanction, i.e. punishment of the perpetrator who has violated the provisions of the Law, also serves the purpose of general prevention, that is to say, to act preventively vis-à-vis other entities in terms of warning off similar violations of the regulations. Taking into consideration the principles used by judges in pronouncing sanctions, especially principles of legality, accusatory proceedings and contradictoriness of proceedings (*audiatur et altera pars*), this does not mean that the ultimate sanction would be pronounced.

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<sup>1</sup> See Article 10 paragraph 1 and Article 40 paragraph 1 subparagraph 5 of the Law on Mental Health.

With regard to the request for information on the implementation of the provisions of the Law on Mental Health that explicitly prohibit conducting clinical and experimental research on psychiatric patients, it is considered necessary to point out that this provision included in the Law represents a ban and clinical experiments and research have not been and are not being conducted.

**Paragraph 130** The procedure for opening of the Mental Health Care Centre is in progress. The Center will be accommodated in the old administration building of the Demir Hisar Psychiatric Hospital and it will apply multi-professional and multi-sectoral approach. The operation of this Center shall be organized in accordance with the operation principles of the Prilep Mental Health Care Center.

Aiming at opening a Mental Health Care Center in Bitola as well, thus reducing the number of beds in the Psychiatric Hospital and taking care of other patients in the region, the Ministry of Health has commenced a procedure to provide premises, by transfer of a Ministry of Defense building located in the Bitola army barracks.

The problem of outstanding salaries for employees of the Prilep Mental Health Care Center was settled. Thus, the Center continues to work successfully. It will be also an education center for the hospital staff in the context of further development of the Demir Hisar and Bitola Centers.

In connection with the sustainability of the Mental Health Care Centers, the Ministry of Health has prepared a Program for health care of persons with mental disorders. This Program provides for about 23 million denar for the operation of these Centers. In this regard, in the context of treatment and re-socialization, priority is given to this type of care of persons with mental health problems.

**Paragraph 131**

a) As a result of the recommendations given to the staff, and their being informed about the obligations stemming from the Law on Mental Health and other regulations, there has been a decrease in the number of complaints concerning ill-treatment of patients and their families. Furthermore, the expert managerial staff of the hospital adopted a decision to institute disciplinary proceedings against any hospital employee suspected of patient ill-treatment. It is planned to conduct training in 2007 on the application of the Law on Mental Health.

b) Efforts are made to increase the number of qualified staff, with due regard to the professional criteria. This will provide complete and adequate patient care. However, the number of staff is still insufficient. It is hoped that this situation will be improved in the near future by recruiting new staff.

Certain measures have been undertaken to organize training of the staff, as well as for increasing the knowledge on mental health, especially in context of the Law on Mental Health. In the forthcoming period, these activities will be further intensified by educating the staff in other Mental Health Hospitals and community Centers.

c) It is expected that the more intensive engagement by the Deputy Ombudsman and the start of work of the Mental Health Commissions in the local government would provide independent monitoring system of psychiatric hospitals. A procedure has been initiated to adopt a Law on the protection of rights of patients. Such a Law will improve the system of protection of rights of patients, including mentally disturbed patients. The Law is expected to be adopted in 2007.

## **PATIENTS' LIVING CONDITIONS**

**Paragraph 138** With regard to the recommendations that appropriate measures be taken to improve the very poor material living conditions at Demir Hisar Psychiatric Hospital, the Ministry of Health, on the basis of the opinion provided by experts inspecting the hospital, adopted a decision that Ward VI be closed. This ward is no longer used for accommodation of patients.

At its 15<sup>th</sup> session held on 14 November 2006, the Government of the Republic of Macedonia adopted a Decree to provide support to this Hospital. Upon preparation of the project documentation, funds will be approved for the Hospital to improve the patients' living conditions.

At the last control inspection, it was concluded that the general sanitary-hygienic conditions in the Hospital have been improved to a certain degree. However, it was also concluded that there were still sanitary-technical problems and that it was necessary to significantly improve the state of the sanitary facilities, of the dining room in Ward VI, repair of furniture and inventory, repair of décor in rooms, providing adequate bad linen, special mattresses, improving the state of yards and of clothing for patients.

Personal, lockable space for patients is not provided yet due to financial constraints.

After the closure of Ward VI, some patients have been moved to Ward V (30 patients), Ward III (3 patients), and Ward IV (5 patients). Some patients in the aforementioned wards (III, IV, and V) with established improved state of health were released, while about 10 patients from Ward V were moved to Ward III.

## **TREATMENT AND CARE**

**Paragraph 139** Concerning the CPT recommendation that a more multidisciplinary treatment approach be adopted, as well making individual treatment plans for every patient, and having progress regularly reviewed for patients, the situation is as follows:

- The hospital faces problems in providing individual day clothing and individual, lockable space as part of the multidisciplinary approach aimed at increasing the sense of individual independence with patients. Patients at the Hospital are very often socially deprived persons who do not have sufficient financial means to provide for their own individual day clothing. On the other hand, the Hospital's financial situation does not allow the hospital to provide individual day clothing for patients and individual, lockable space.

- According to statement by the Hospital Director, patients, eligible to receive pension or social assistance, receive such benefits. Information on personal income and on persons allowed to dispose with income of patients is entered in the following forms: Social information list, and Questionnaire establishing remaining capacities and potentials for reintegration in the community.

Furthermore, patients, who have shown special efforts in activities within the Rehabilitation Ward, upon recommendation of the head of the said ward, are granted symbolical pecuniary prize by the Hospital. Patients receive this prize in person. /Attachment: list of patients, who have received pecuniary prize for December 2006 and January 2007/,

- The new Hospital Director has started introducing a multidisciplinary treatment for patients. This treatment starts with a program plan in written form prepared upon admission of the patient to the Hospital.

The forms which are kept in files (filled out) for each individual patient have been presented by the medical staff of the Hospital for inspection:

- working plan of the expert team/for all individual patients
- social-informative list
- questionnaire to determine the remaining capacities and potentials for reintegration in the community
- health care plan, with recommendations how it should be prepared
- mentoring list.

**Paragraph 140** In regard to the recommendation of the CPT for utilization of the capacities and opportunities at the dental offices staffed by a full-time dentist and a full-time assistant, and preparation of a preventive dental treatment plan, the Ministry of Health is in the process of finding solutions to fund the resolution of this issue.

### **Staffing issues**

**Paragraph 141** In regard to the recommendations to increase the number of qualified staff, then in respect of the implementation of recruitment policies to ensure that recruitment is transparent and based on professional criteria, introduction of continuous in-service training opportunities for staff, development of primary nursing and mentoring programs, as well as bolster efforts to guarantee staff professionalism and discipline, it is informed about the following:

The Director of the Hospital was dismissed due to malfeasance, and a new Director has been appointed. /the decision is enclosed/

Following the establishment of the Board of Directors of the Hospital, an amendment to the Book or Rules will be adopted for the organization and systematization of jobs with the purpose of completing the staffing.

In regard to the working discipline, measures and activities have been taken to introduce stricter criteria.

The Disciplinary Commission of the Hospital has considered a complaint against misconduct by a doctor and a cleaner who were under the influence of alcohol. The Commission concluded that there was a violation of the working discipline and the proposal to undertake relevant discipline measure was forwarded to the Director of the Hospital. Such a discipline measure is expected to be pronounced at the first meeting of the Board of Directors of the Hospital which was established on 6 February 2007 under a Decree of the Government of the Republic of Macedonia.

At the same time, the Ministry of Health has commenced implementing the Management and Leadership Training Program in the Health Sector. By this Program the process of managing health institutions is expected to be improved from the expert and medical aspect, then from the administrative aspect, financial aspect, from the aspect of ethic work and from other aspects that are relevant for successful management. Persons who will finish this training are considered to be able to respond to all requirements necessary for professional management of the Hospital.

**(See answer to paragraph 131 b)**

At the Demir Hisar Psychiatric Hospital an obligation was introduced to establish mentoring programs for the treatment of patients (enclosure – mentoring list and the Instructions given by the new Director – item No. 6 – mentoring system with appropriate documentation is obliged to be used at the hospital wards)

### **Means of restraint (control)**

**Paragraph 146** In regard to the recommendation of the CPT for the implementation of appropriately designed restrained equipment by appropriately trained staff, monitoring and recording, and for the implementation of restraint in such a way as to maintain the dignity and safety of the patient, as well as their request for confirmation that at Demir Hisar Psychiatric Hospital, as well as at all other similar institutions, chains used for immobilizing patients have been removed; that appropriate restrained equipment is available in each ward; and that procedures for its use are applied, including through adequate staff training, it is informed that in the course of January 2007 all psychiatric institutions were under inspection. In compliance with the findings of the Health Inspectors chains for immobilizing patients were not found and were not used in any of them. Leather belts for immobilization were purchased at the Demir Hisar Hospital. The receipt for purchase of seven leather immobilizing belts has been submitted.

For the patients that are immobilized a procedure is used which implies monitoring of the patient and recording his/her condition at 30 minute intervals – on the so called urgent list for an agitated patient, and a list for monitoring of the patient.

### **Safeguards and complaints**

**Paragraph 148** In regard to the recommendations of the CPT in the context of a decision on involuntary hospitalization, it was concluded that in the interest of observing the procedure for involuntary hospitalization, the Hospital usually sends a “request for involuntarily hospitalization” to the First Instance Court of Bitola by which it informs the Court that the patient had been examined by a commission and that there have been psychiatric indications for involuntary hospitalization because of which he/she has been retained for treatment.

In regard to the recommendation for establishing procedures to entrench the principle of consent to treatment for all patients, including those admitted on involuntary basis, the patients at the Psychiatric Hospital in Demir Hisar sign the form “Consent for a voluntary medical treatment”.

**Paragraph 150** An introductory / informative brochure setting out the house rules of the Hospital and the patients’ rights has not been prepared thus far.

**Paragraph 151** In regard to the requested information about eventual extension of the competencies of the new community Commissions for Mental Health and the protection and assistance to patients hospitalized in mental health institutions, it should be noted that there are no relevant data since those commissions have not been established thus far.

**Paragraph 152** In regard to the request for information about establishing a system of inspections by an independent authority, it should be noted that Commissions at the municipalities, which are to function as independent bodies, may conduct frequent and unannounced visits to psychiatric hospitals with a view to making recommendations, if necessary, on how patients' care should be improved. They will be authorized to speak privately with patients.

**Paragraph 154** The recommendation to provide opportunities for taking steps to guarantee the effective enjoyment of the rights of patients or their guardians to prompt, at reasonable intervals, judicial review of their involuntary hospitalization that should be also available to persons who were initially admitted on voluntary basis and whose hospitalization has become involuntary, the Ministry of Health will provide such opportunities in cooperation with the competent courts. To this aim, special meetings are planned of the Ministry of Health with competent courts so that this CPT recommendation is communicated to the courts and is adequately applied.

### **The Ministry of Labor and Social Policy**

**Paragraph 158** Based on the previous total number of 14 employees working in three shifts in the C Ward of the Demir Kapija Psychiatric Hospital, i.e. 7 employees at the C1 Ward and 7 employees at the C2 Ward, both wards accommodating 40 patients, it was clear that 1 employee - nurse was in charge of 20 patients. This situation has been alleviated by transferring 10 employees working in other wards of the Hospital which accommodate less aggressive patients to the C Ward, strengthening thus the human resources in this Ward and consequently reducing the risk of violence.

Furthermore, continuous attention is paid to the recruitment, training and supervision of the auxiliary staff, which is confirmed by the opening of a new facility within the Hospital, having capacities to accommodate 72 patients, part of whom are patients transferred from the Health Care Ward in order to reduce the burden of this Ward, while part of the patients are those with lesser degree of impediments transferred from the annex building in order that the inmates could assist each other. There have been 26 additional professional and auxiliary staff engaged in this newly opened facility, who underwent specific training for work with patients accommodated in this new facility.

**Paragraph 159** In the case of I.I., the Autopsy Report has been forwarded to the CTP Delegation members upon their request. The Autopsy Report contains clear indications that in this case it is not a matter of violent death. This is supported by the fact that the Kavadarci Public Prosecutor's Office, under the jurisdiction of which is the Municipality of Demir Kapija, where the Hospital is located, has not instituted investigative proceedings, since based of the Report it has been concluded that there are no elements of violence and thus no elements based on which proceedings would be instituted. This means that the investigation of this case has been concluded, while the written communication from the Kavadarci First Instance Court has been submitted to the CPT as evidence in this respect.

**Paragraph 160** The administration of the Hospital undertakes continuous measures to overcome and prevent eventual cases of ill treatment of patients by the staff. These measures include reporting and informative communications, i.e. instructions that the treatment of the patients needs to be significantly improved, in which the administration of the Hospital also underlines that if instructions in this regard are not followed there would be sanctions for the perpetrators.

In pursuance with Article 53, paragraph 1 of the Law on Social Protection and Article 22 of the Statute of the Demir Kapija Psychiatric Hospital, the Administration of the Hospital has issued INSTRUCTIONS for performance of certain activities regarding the care for patients, which are herein enclosed, and which are aimed at concrete measures to be undertaken by the staff of the Hospital to prevent eventual ill-treatment of patients.

Republic of Macedonia  
Psychiatric Hospital  
No. 02-10  
10 October 2006  
DEMIR KAPIJA

In pursuance with Article 53, paragraph 1 of the Law on Social Protection and Article 22 of the Statute of the Demir Kapija Psychiatric Hospital, the acting Director has issued the following

INSTRUCTIONS  
for performance of certain patient care activities

1. It is hereby ordered that Heads of Wards and all employees of the Demir Kapija Hospital pay special attention to the care (nursing, hygiene, health care) and alimentation of the patients.
2. It is furthermore ordered to timely report any change in the health status of patients and that all necessary measures are undertaken, which in the context of the health status of patients also includes, where necessary referring patients to other health care institutions.

These Instructions shall enter into force on the day of their publication, and shall be applied as of 10 October 2006.

Prepared by  
Atanas Todorov, lawyer

Acting Director  
Nikolov Petre

Regarding the latest information of the CPT about certain events related to the death of several patients of the Demir Kapija Psychiatric Hospital, the Ministry of Labor and Social Policy has consulted the Administration of this Hospital and accordingly submits a Review of death cases of patients of this Hospital for the 1979-2006 period, as well as a List of patients (Annexed) who died in the Hospital in January and February 2007, then Medical Reports on the causes of death of the referred to 7 patients and a Report on the psychophysical status of all 330 patients at this Hospital.

**Paragraph 163** The recommendation contained in the Report regarding the renovation of the C Ward and undertaking internal measures for appropriate accommodation and care of patients by the Hospital, has been fully taken into consideration and implemented by the line Ministry. Thus, the Ministry of Labor and Social Policy has allocated funds under its budget of 3.200.000, 00 MKD ( or 50.000,00 EURO) for the completion of the reconstruction and adaptation of this facility which has ensured better quality conditions for accommodation and care of patients in this ward.

**Paragraph 167** The commenced processes of deinstitutionalization and decentralization supported by the Ministry of Labor and Social Policy focused on encouraging non-institutionalized forms of care of persons with severe and profound development impediments in their local communities, such as the opening of day care centers for children with development impediments, and adult disabled persons, then foster care, as well as small group home units for independent life with capacity of 12 patients at the most, provides for strong basis to expect that there would be continuous decrease in the number of patients accommodated in public institutes and to hope that in the foreseeable future this Hospital would be able to attain the European standards governing the work of this type of institutions.

As regards the recommendations for a better quality treatment and care of children accommodated at this Hospital, it is underlined that the Project for deinstitutionalization of patients accommodated at public social protection institutions, funded also by the UNICEF Office in Skopje, realized with the support of the Ministry of Labor and Social Policy, continues this year too with the same dynamics.

**Paragraph 168** Treatment and care of patients: Aiming at improving the treatment and care of patients there has been a new modern and adequately constructed facility opened which has simplified the organization of work with these persons.

This facility can accommodate 72 patients. It currently accommodates 62 persons – 50 of whom have been transferred from the Health Care Ward and the other 12 have been transferred from the annex building.

The idea to open such a facility is based on the lack of premises adequate both in terms of the number and gender of patients and in terms of the possibility to organize education - upbringing activities, social and vocational training, all for the purpose of creating conditions for humanization of the premises in the interest of patients.

This facility has commonly used rooms, such as physical therapy room, education - social activities room, multi-purpose room for gatherings and cultural entertainment activities, then workshops for wood processing, for paper and cardboard works and a pottery workshop.

The ground floor has an equipped medical office with a room for medical interventions and dental care office.

In addition to ensuring adequate, comfortable and humane premises for well organized family life of 72 patients, this facility alleviates to a great extent the life and working conditions in the other wards of the Hospital.

### **Staff related issues**

The organization of the life and work of patients in this facility is done by newly employed staff that has undergone specific theoretical education of medical, defectology, social and rehabilitation character, as well as practical training for work with such patients. The newly employed staff has been recruited from the ranks of defectologists and medical nurses that help patients in establishing and developing elementary hygiene skills, self service skills, socialization and communication within and outside the group - in the wider community. At the same time, patients receive specific vocational training that greatly contributes to their future life outside the Hospital.

The fact that this facility accommodates not only mentally, but also physically disabled persons required the engagement of physiotherapists.

The Italian non-governmental organization EduCaid, in cooperation with the relevant structures under the social protection and health care system in the Republic of Macedonia have done a full medical and social assessment of the patients accommodated in the Psychiatric Hospital, completing a medical and social file for each individual patient.

**Paragraph 169** As regards the practice of quick feeding of bed bound patients the experts still claim that from the medical aspect some of these patients can consume food only in such a position, since they could not be placed in semi-sedentary position. As regards the other small part of bed bound patients the staff has been instructed that the feeding should be done following a normal procedure, the same as for the other patients that are not bed bound. The staff follows this instruction. The distribution of food for bed bound patients in the B Ward has been revised and now patients are raised in a sedentary position and are fed in manner that enables normal food consumption. The patients of the B 3 Ward are seated by a table in this Ward, while part of the patients take food at the common dining room, together with the other patients from other Wards.

**Paragraph 170** As regards patient suffering from tuberculosis and the importance that staff in charge of those patients be informed about the risk from contracting this illness and the necessary preventive measures to be undertaken in this respect, the administration of the Hospital organizes occasional educational activities for the staff carried out by doctors - epidemiologists and doctors from other medical branches to inform the staff about the etiology of several illnesses, and not only about tuberculosis.

**Paragraph 171** The recommendation that the administered medications be recorded in the medical files is carried out by doctors and the medical staff.

**Paragraph 172** The weight of bed bound patients is measured once a week by nurses, and a plan is prepared on a monthly basis for the diet of every bed bound patient. The monthly dietary plan includes food supplements for each individual patient.

**Paragraph 173** In the new facility, a dentist's office offering dental services has been opened and equipped, and these services are provided by a dentist from the Negotino Health Center, who comes on call or as necessary.

**Paragraph 174** Regarding the number of defectologists, psychotherapists, nurses and paramedics in the health unit, which according to the recommendations should be increased, especially in the afternoon and night shifts, the Ministry of Labor and Social Policy is making efforts to gradually increase their number in compliance with the available funds from the Budget of the Republic of Macedonia, which on the other hand should be more restrictive in respect of salaries for the employees in the public sector, according to the recommendations from the International Monetary Fund and the World Bank.

**Paragraph 175** The psychiatric care of patients is carried out by a specialist doctor-neuropsychiatrist who is permanently employed at the Hospital and, if necessary other colleagues may be called in from the Negotino Health Center, which is the closest to the Hospital.

**Paragraph 178** The Ministry of Labor and Social Policy, together with the Sector for European Integration at the Government of the Republic of Macedonia, has been working in continuity on the approximation of the legislation in the area of social policy and social protection to the European legislation.

**Paragraph 179** Whenever they request to visit the Hospital and inspect the quality of its work, citizens' associations and organizations from the country and abroad that work in the area of protection of persons with impeded development are always received by the administration of the Hospital, upon prior approval by the Ministry of Labor and Social Policy; their views, recommendations and suggestions aiming at improving the care of patients are always welcomed.

**Paragraph 180** A brochure about the rights of patients at the Hospital has not been prepared yet, but the Ministry of Labor and Social Policy has assumed the obligation to prepare such a brochure modeled based on brochures used in EU member states.

## Annex

### LIST of patients at the Demir Kapija Psychiatric Hospital who died in the January-February 2007 period

1. M.Z. – born in 1967.

She died on 1 January 2007 at the Toxicology Clinic at the Skopje Clinical Center.

The health care treatment started on 31 December 2006 based on the diagnosis *Contusio capitis, Hypotensia arterialis et oedema pulmonum* (head injury, low blood pressure and lung edema).

She was referred to the Kavadarci Medical Center and from there to the Neurology Clinic –Skopje, and after the analyses made she was referred to the Toxicology Clinic where she died.

2. D.P. – born in 1950.

She died on 9 January 2007. She was diagnosed with *Apoplehio cerebri* (brain hemorrhage).

The patient had suffered for years of high blood pressure and was under therapy. However, owing to the age and weight there was a brain stroke and she died.

3. A.L. – born in 1982.

She died on 12 January 2007 diagnosed with *Astenia corporis condenita* (congenital weakness of the organism) and *Congenital cardiomyopathia* (congenital heart deficiency).

She was on intensive therapy for several days, however she died.

4. G.P. – born in 1949.

He died on 14 January 2007 diagnosed with *Infarctus Myokard* (clotted blood vessel in the heart muscle).

The patient died suddenly from a heart stroke, while previously he was of good health status.

5. K.K. – born in 1963.

She died on 29 January 2007 at the Veles Medical Center - at the Internal Medicine Ward, diagnosed with *Bronchopneumonia basillaris billateralis*.

Her treatment started on 13 January 2007 at the Hospital and she was referred for treatment at the Internal Medicine Ward in the Veles Medical Center, where she died after several days.

6. I.D. – born in 1974.

He died on 6 February 2007 diagnosed with *Cardiorepsiratorus insufitientio* (collapse of vital heart and respiratory functions).

The therapy stated on 29 January 2007 based on the diagnosis *Viral infectia* of the respiratory system; he was on ampule therapy and died of cardio-respiratory infection owing to immune deficiency.

7. I.M. – born in 1941.

He died on 6 February 2007 diagnosed with *Cardiomyopathia asthenia corporis*.

The patient was bed bound, he could move only using his upper extremities and dragging his feet.

The contributing causes were his age and weakness of the entire organism.

Currently there are another 2 death risk cases – one patient, V.N., suffers from malignant abdomen tumor and another patient D.Z. suffers from *decubitus* and *Asthenia corporis* - complete muscle deficiency and is of older age – he was born in 1945 (62 years old).

6 March 2007 Head of the Health Care Ward  
Demir Kapija Dr. Jordan Necev

Acting Director  
Petre Nikolov

**Responses of the Macedonian Authorities to the report  
of the European Committee for the Prevention of Torture  
and Inhuman or Degrading Treatment or Punishment  
on its visit to the Republic of Macedonia  
from 15 to 26 May 2006**

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**In reference to the observations and the recommendations made by the Delegation of the CPT at the occasion of their visit to the Republic of Macedonia in May 2006, as stated in the letter of Ms Silvia Casale, former President of the CPT, sent on 24 November 2006, and also in the letter of 7 May 2007 of Mr. Mauro Palma, current President of the CPT, the competent authorities of the Government of the Republic of Macedonia are submitting their final responses:**

**The Ministry of Interior**

As regards the CPT recommendation to conduct an independent investigation to examine the allegations of detention at secret locations, the Ministry of the Interior would like to underline that the conduct of an independent investigation regarding any complaint against unlawful or unprofessional conduct or violations of rules and regulations by officers of the Ministry of the Interior, of the Security and Counter Intelligence Department, is within the competencies of the Sector for Internal Control and Professional Standards.

Pursuing its competences and following the procedure envisaged in the Ministry's bylaws, the Sector for Internal Control processed the complaints by the persons F.H. and F.R. submitted through the National Ombudsman of the Republic of Macedonia against the official activities undertaken by authorized officers of the Ministry in apprehending and keeping the above mentioned persons in police custody.

After the conduct of the relevant procedure and after undertaking all measures and activities to establish the facts of the case, the Sector for Internal Control and Professional Standards concluded that in undertaking the official activities in respect of the persons F.H. and F.R. the authorized officers **did not overstep their authorities, nor acted in contravention to the legal regulations, i.e. that the allegations contained in the application regarding this case, submitted to the National Ombudsman by the parents of the said persons are without any grounds.**

This means that the investigation regarding this case has been indeed conducted by the relevant body of the Ministry of the Interior following the prescribed procedure.

The Security and Counter Intelligence Department once again categorically rejects any allegations of use of any secret locations for conduct of official activities. All facilities in which the officers of the Security and Counter Intelligence Department work are property of the Ministry of the Interior.

The Security and Counter Intelligence Department is prepared to cooperate at all levels with the CPT representatives and appreciates their contribution to overcoming the deficiencies and shortcomings that could occur in the performance of duties of this Department. The Ministry of the Interior considers that the CPT recommendations significantly contribute to establishing the Department as highly professional and modern service that respects the rights and freedoms of citizens of the Republic of Macedonia.

Regarding the remarks contained in paragraph 20, the Ministry of the Interior has already undertaken a series of measures for purposes of establishing relevant guarantees for the exercise of rights of persons held in police custody. Aiming at protecting the guaranteed rights of persons held in police custody- the right of the person to be informed about the reasons for his/her apprehension; the right to be informed in the language he/she understands about the rights in the course of police custody; the right to silence; the right to defense at any stage of the police procedure; the right to health care and medical assistance; the right to human treatment and non-discriminatory procedure; as well as the right that the family or another person are informed about the police custody of the concerned person- the Ministry of the Interior has undertaken the following measures and activities in the last period:

- In 2004 and in 2005, in cooperation with the OSCE and the Helsinki Committee, the Ministry of the Interior organized training for 5.500 police officers on the subject "The Police and Human Rights and Freedoms". This training covered issues related to human rights and freedoms, and issues related to the most often violations of human rights and freedoms by the police, also covering issues related to the necessity of direct, partnership cooperation of the police with the citizens;
- The Ministry has prepared and implemented annual program of training of police officers that covers issues in the area of human rights and freedoms;
- Posters in the Macedonian, Albanian, Turkish, Roma, Serbian and in the English languages have been posted at visible places at all police stations, describing the rights of the persons held in police custody;
- A form on the right to defense lawyer has been designed, which has been distributed to all police stations and which is obligatory given to the person in police custody. After the completion of the police procedure the person held in police custody signs the form stating whether he/she has asked for a defense lawyer during the police procedure;
- All police stations are obliged to have a list of defense lawyers that can be called and their presence can be ensured ex officio of course in case the person in police custody does not call for a lawyer of his/her own choosing;
- Obligatory instructions have been submitted to all police stations regarding the treatment of persons held in police custody, which explicitly forbid application of any means of coercion against persons in police custody, or any other measures of inhuman, discriminatory or degrading treatment of the person in police custody;
- There has been a obligatory procedure defined regarding the establishment of eventual injuries of the person and a procedure in case of a need for medical intervention;
- There has been a uniformed format and records designed kept for each person held in police custody, which each police station is obliged to fill in , i.e. to keep;
- The Law on the Police limits the right to place people in police custody only to 38 police stations of general competence, which will greatly contribute to the improvement of the conditions of the facilities where persons are kept in police custody;
- There is a project prepared for standardization of all facilities where persons in police custody are kept, that are in line with the European police standards;
- There is enhanced supervision and control of the work of the police by the Sector for Internal Control and Professional Standards, especially in cases in which there are information or reports about violations of any of the human rights and freedoms during the police procedure;
- As of 17 April 2007, the project for strengthening the capacities of the Sector for Internal Control and Professional Standards started, funded by the EAR.

As regards the treatment of minors, disabled persons and persons with mental disabilities obligatory instructions of the Public Security Bureau, have been distributed to all police stations, which specifically list the vulnerable categories with whom there should be special care applied in the treatment, in accordance with the legal provisions, stating further that no person may be examined, i.e. interviewed without the presence of a parent, guardian or another adult person that can protect the concerned person's interest in the course of the police procedure.

In connection with the remarks presented in paragraph 36 related to the measures and activities of the Ministry of the Interior for designing a proper mechanism for control and monitoring of the work of the police and attaining sustainable level of effective work of the control facilities, the situation has significant changed as compared to the period of the last CPT report.

Namely, the Law on the Police, being the legal framework for implementation of the Strategy for Police Reforms, provides basis for the complete transformation of the Sector for Internal Control and Professional Standards.

The Law on the Police makes a difference between the Ministry as the classical state administration body obliged to apply the Government policy in the area of home affairs and police as a professional service in charge of conduct of police affairs.

In this respect, the mechanisms for control of the work of the police are positioned at two levels.

The basic level is the control implemented along the vertical hierarchical line, and refers to the respect for the working discipline and the respect for the prescribed standard procedures of police work.

The second level of control and supervision of the work of the police is conducted by the Ministry of the Interior, through the Sector for Internal Control and Professional Standards, and this is regulated by the Law on the Police.

According to Article 4, subparagraph 8 of the Law on the Police aiming at creating conditions for the work of the police, the Ministry shall organize and conduct review, internal control and audit.

This provision defines the competences of the Ministry in terms of conducting internal control and application of professional standards in the work of the police.

Article 8 of the Law on the Police sets forth that "In case a person against whom police competences have been applied in pursuance with this Law, considers that the police officer has violated his/her rights, the person has the right to submit an application to the police.

The Police are obliged to examine the allegations contained in the application referred to in paragraph 1 of this Article and inform in writing the applicant within 30 days of the day of receipt of the application about the activities that have been undertaken."

This provision of the Law on the Police does not exclude the possibility for the police to undertake procedures to establish the legality of the activities of the police officers.

These defined legal basis, have facilitated amendments to the Rulebook on the Work of the Sector for Internal Control and Professional Standards and to overcome all established deficiencies.

The new Rulebook first defines the activities of the Department for Internal Control, and the activities of the Department for Professional Standards, aimed at more precise definition of tasks, accompanied by definitions of most commonly used terms in the Rulebook.

The Rulebook sets forth the obligation for cooperation with the Sector by all employees at the Ministry and at the Police; then it is also envisaged that any rejection of cooperation will be treated as a violation of the working discipline; the heads of working units are obliged to undertake activities to sanction any forms of violations of the working discipline, as well as all forms of violations of human rights and freedoms by police officers, of which they knew or were obliged to know, and each non undertaking actions brings in question their liability too; the Rulebook prescribes the obligation for each organizational unit of the Ministry or of the police to inform the Sector of Internal Control immediately and within 24 hours at the latest about any application, where the competence to process the application is determined; the Rulebook furthermore sets forth the obligations of the heads of the working units to obligatorily abide by the measure proposed by the Sector; then there is the obligation to reply to any application by a citizen of any other entity within the legally prescribed periods (30 days to citizens or a legal persons, 8 days to the National Ombudsman); the Rulebook in addition sets forth the manner of treatment, the manners of including special investigative techniques and methods in the work of the Sector; there are also obligations set forth that in all cases in which upon application of police competences there is serious bodily injury caused or death, the Public Prosecutor is informed; the Rulebook finally sets forth the records to be kept at the Sector; the conditions are defined as well under which the control of the quality of police work may be conducted.

Upon entry into force of the new Rulebook, there has been formal declassification of the annual report and of the Program of Work of the Sector, while the Program for Training of operative staff at the Sector for Internal Control and Professional standards has been adopted. In accordance with the dynamics of activities, as of 15 June 2007 all referred to documents will be published at the web page of the Ministry in the Macedonian, Albanian and in the English languages.

It should be underlined that there have been amendments made to the systematization of jobs, by which the number of operative staff was raised to 43; then there have been amendments to the description of jobs, and tasks of the operative staff at the Sector. Hence, there has been a clear distinction made between the tasks of the operative staff at the Department for Internal Control and the operative staff at the Department for Professional Standards. A novelty introduced in terms of the competences of the Sector is that now the Sector is competent to adopt the Anti-Corruption Program for the Ministry of the Interior and is also in charge of following up on activities for the implementation of the Program. The Anti-Corruption Program of the Ministry has been published at the web site of the Ministry.

Considering the reforms underway in the justice system of the Republic of Macedonia, it should be noted that there is a proposal to insert in the Law on Public Prosecutor's Office a provision according to which the Sector for Internal Control and Professional Standards ex officio submits to the Public Prosecutor's Office all reports and makes all evidence available that the Sector has gathered related to a case the outcome of which a grievous bodily injury or death as a result of application of means of coercion by police officers.

Upon the undertaken measures, and especially upon declassification of key documents of the Sector for Internal Control and Professional Standards, the situation in respect of the communication with the Office of the National Ombudsman has been significantly improved.

Furthermore, there has been proper communication established with non-governmental organizations and with print and electronic media.

The results of the progress made in this area can evidently be seen from the statistical data related to the work of the Sector in the last four months of this year.

There is training underway for police officers on the Code of Police Ethics. Thus far, more than 50% of the police officers have attended this training, while it is planned that the training is completed by the end of October this year.

Enclosed samples of the forms for:

1. Minutes of the police custody
2. Minutes on the advice given and about the exercise of the right to defense lawyer and other rights of summoned, apprehended, and persons deprived of freedom and those held in police custody.

## **Ministry of Justice**

Acting upon CPT's Report, the Administration for Execution of Sanctions, within the Ministry of Justice informs that upon receiving CPT's considerations, comments and conclusions, it makes efforts to undertake further activities to overcome the established deficiencies.

**In respect of paragraphs 44, 45 and 46 of the Report**, about inappropriate treatment by prison staff, in addition to the written communication of 15 June 2006, about the treatment of convicted, minors and detained persons during their stay at penitentiaries and the need to undertake certain activities to overcome certain situations, the Director of the Administration for Execution of Sanctions and the Minister of Justice have held several meetings with the Wardens of the penitentiary-correctional facilities, at which it has been stressed that it is necessary to take due account of the humane and professional treatment by the prison staff, respecting human rights of convicted and detained persons and the necessity to eliminate eventual deficiencies in their work. It has been underlined that rigorous measures would be undertaken against those violating the rules, with a focus on the security service staff.

In the last months of 2007, there have been professional reviews and monitoring conducted at all penitentiaries and at the correctional facility Tetovo by Inspectors of the Administration for Execution of Sanctions. Upon the reviews and monitoring visits there have been minutes prepared containing proposals for measures to be undertaken in order to overcome certain deficiencies in the work and to improve the situation at the penitentiaries and correctional facilities.

The Administration for Execution of Sanctions has not received applications from convicted or detained persons or from their close relatives or legal representatives, nor does it have information about ill treatment by the security service staff at prisons in the period following the last visit by the CPT.

In our previous reply to the CPT Report, it has been underlined that the Warden of the Idrizovo prison had been instructed to examine and detect cases of ill treatment of convicted persons by the security service staff. However, owing to the large number of convicted person at this facility (for a longer period the number of prisoners ranges at about 1,300 persons) as well as taking into consideration the fact that the CPT has not indicated the period and names of convicted persons who complained of ill treatment, nor names of the security staff members, the efforts to examine the situation have not produced results and a specific investigation could not be conducted. However, in order to eliminate the eventual illegal conduct by officers and in line with the CPT comments, at a meeting with the Wardens of the penitentiaries and correctional facilities, the Minister of Justice has once again categorically stressed that all employees at the institutions must take due account of the use of coercion means and reduce their use to the minimum and only in cases envisaged by law, i.e. only in cases when use of means of coercion would be the only and last resort in overcoming the resistance of the person (**paragraph 51**).

In addition, it has been emphasized that **it is necessary to improve the quality of medical examinations and the thoroughness in documenting the information**. It was again stressed that in keeping the medical records of the newly arrived prisoners, to be filled in by the prison doctors, after the medical examination, the medical file for each prisoner is to contain the following:

- documented statements of the person relevant for the medical examinations (as well as the description of the health status of the prisoner and any eventual allegations of ill treatment);
- documented objective medical findings based on thorough examinations;
- Conclusions of the doctor that would point to the eventual correspondence of any allegations by the prisoners with the objective medical findings;

The findings of each examination, including the said statement and conclusions of the doctor are to be accessible to the prisoner and his/her lawyer.

In case upon reception of the prisoner at the institution there are indications or information about prior ill-treatment by officers and their inflicting visible injuries, it is necessary to note this and report it to the competent Public Prosecutor in order to institute procedure for finding and establishing the responsibility of the officer that has inflicted the established injuries (**paragraph 46**).

**As regards paragraph 50**, all convicted personas (especially those who are serving long term sentences) upon their reception at the penitentiary spend certain period ( about 30 days) at the reception unit, where an expert team examines the personality, characteristics and attitude towards the committed crime and the sentence. Persons who have serious psychological problems are subject to additional psychiatric observation by specialists -psychiatrists, who give their medical panel opinion about the health status, based on which the persons may be referred to stay, treatment and therapy at a specialized health institution.

The Government of the Republic of Macedonia has adopted a step by step approach to deal with priority issues which primary refer to increasing the capacities and improvement of the conditions for stay of convicts, minors and detained persons at penitentiaries and correctional facilities. The intention is to create conditions for better quality resettlement, health care and ensuring the prison population with fully equipped prison services. The activities are based on the Analysis on the situation in the penitentiary correctional facilities adopted by the Government on 6 March 2007 (this information is contained in our interim responses).

## **Ministry of Labour and Social Policy**

**Paragraph 158.** The total number of employees in Ward C (as informed in our interim responses), divided into three shifts, is 12, of whom 7 in Ward C1 and 5 in Ward C2 (the list is hereby attached), whereas the number of patients admitted to the two wards is 40.

A further 10 employees have been redeployed to Ward C on a half-time working basis from other wards at this institution to which less aggressive patients are admitted, which is within the number of personnel available at this institution. A program for reduction of risk of violence among patients has been started in this ward.

The Plan of Work for Ward C and the shift pattern of the nursing personnel in this ward, valid as of 3 February 2007, are hereby attached.

**Paragraph 159** Considering the case of Imran Ibrahimovski, the autopsy report has been handed over to the members of the Delegation upon their request and it clearly demonstrates that there are no indications of violence that would be the cause of death of this person. This has been supported by the fact that the Kavadarci Public Prosecutor's Office, which is competent for the municipality of Demir Kapija, where the institution is located, has not initiated any investigative procedure because the Report shows that there are no elements of violence, and therefore there are no elements for initiation of further procedures. This means that the investigation in this case is closed, and the appropriate written notification from the Kavadarci First Instance Court has been delivered to the Committee in proof.

As the Committee insists on initiating a renewed investigative procedure, the Ministry of Labour and Social Policy will send an appropriate letter to the Public Prosecutor's Office of the Republic of Macedonia and will hold consultations whereby it will be informed about the CPT's request, in order to examine the possibilities envisaged by the regulations to initiate a renewed investigative procedure. The Committee will be duly informed about any further developments in this regard.

**Paragraph 160** Pursuant to Article 53 paragraph 1 of the Law on Social Protection and Article 22 of the Statute of the Demir Kapija Special Institute, the management of the institution has adopted a DECREE for conducting certain activities in the area of patient care, which has been distributed to you for consideration and which envisages undertaking concrete measures by the personnel directly involved in the care for patients aiming at prevention of potential ill-treatment of patients by the personnel.

Acting by the guidelines included in the CPT comments of 7 May 2007, the Ministry of Labour and Social Policy has conducted a working meeting with the management of the institution and requested that the Decree be supplemented with provisions for undertaking concrete measures by the personnel aiming at prevention of violence and conflicts among patients and between patients and personnel, instructing that a working meeting with the personnel be held to inform them about the content of these requests.

Regarding the latest information of the CPT for certain events related to the demise of certain patients at the Demir Kapija Special Institute, the Ministry of Labour and Social Policy has carried out consultations with the management of this institution and pursuant to those consultations hereby attaches Files with the complete documentation for the patients who deceased in the period between 1 January 2007 and 25 May 2007.

With reference to the request for forensic autopsy, the Ministry of Labour and Social Policy will send a letter to the Public Prosecutor's Office of the Republic of Macedonia and will hold consultations in order to inform them about CPT's request, on which the Committee will be duly informed.

**Paragraph 169** The Ministry of Labour and Social Policy and the State Sanitary Inspectorate have reviewed the distribution of food for bed bound patients in Ward B of the Demir Kapija Special Institution. In this context, the Ministry would like to point out that it would appreciate if the CPT could assist us in finding a proper solution to this problem, in terms of helping us identify possible donors of special equipment for feeding this category of patients and of personnel training in handling such equipment.