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Response

of the Bulgarian Government to the report of the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) on its visit to Bulgaria

from 10 to 21 August 2020

The Bulgarian Government has requested the publication of this response. The CPT's report on the August 2020 visit to Bulgaria is set out in document CPT/Inf (2020) 39.

Strasbourg, 15 March 2021

**RESPONSE OF THE BULGARIAN AUTHORITIES
TO THE REPORT TO THE BULGARIAN GOVERNMENT ON THE AD HOC VISIT
TO BULGARIA CARRIED OUT BY THE EUROPEAN COMMITTEE FOR THE
PREVENTION OF TORTURE AND INHUMAN OR DEGRADING TREATMENT
OR PUNISHMENT FROM 10-21 AUGUST 2020**

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I. INFORMATION PROVIDED FROM THE MINISTRY OF LABOUR AND SOCIAL POLICY

Information on the measures taken to implement the recommendations reflected in the report of the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (“CPT”), as a result of its ad hoc visit to Bulgaria, carried out in the period 10 - 21 August 2020

In December 2020, detailed information was provided on the actions taken under § 79 (on the situation in specialized institutions for persons with disabilities) of the Report of the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) as a result of ad hoc visit to Bulgaria, carried out in the period 10 - 21 August 2020. This information contained a general comment on the direction of the reform for deinstitutionalization of care for adults with disabilities and the elderly, the new legislation in the field of social services, and specifically actions taken in relation to § 79 of the Report. The information presented below builds on that already provided and addresses all the recommendations made in the Report for improving the care of people with disabilities living in the three specialized institutions for persons with mental disorders and mental retardation visited by a Committee delegation.

As has been repeatedly noted, the state has a clear and unequivocal commitment to close all specialized institutions for adults with disabilities, as the institutional model of care has proven ineffective over the years. This commitment is enshrined not only in the current strategic documents at the national level, but is also legally guaranteed by the Social Services Act (SSA). It sets out the basic principles of deinstitutionalization reform, one of which is the prevention of institutionalization. The measures taken at the national level for the implementation of the process, the role and the responsibilities of the parties involved in it are also legally secured through the SSA. It is envisaged that the existing specialized institutions for people with disabilities will be closed by 1 January 2035, and the existing homes for the elderly will be reformed by 1 January 2025 in order to meet the quality standards. These deadlines are the time frame for the implementation of the overall process of deinstitutionalization, which is implemented in stages, in accordance with the measures provided for in the strategic documents and in accordance with legal provisions.

The deinstitutionalization of care for people with disabilities and the elderly is one of the main goals of the National Strategy for Long-Term Care and its action plan. However, the measures taken at national level also require time for their implementation, as the process of reforming a rather outdated and inefficient care system is complex and requires careful planning, implementation and evaluation. The process is implemented in stages and consistently, and should be well provided with the necessary human and material resources. Detailed information on the SSA and the Action Plan for the period 2018-2021 for the implementation of the National Strategy for Long-Term Care has already been presented to the CPT. As noted in the information from December 2020, the next action plan for the implementation of the process of deinstitutionalization of care for the elderly and people with disabilities for the period up to 2027 is under development. It will implement the second the most important stage of the process, with approximately 60% (41 of the 70 homes that will remain after the completion of the current Plan) of the existing specialized institutions for people with disabilities to be closed by the end of 2027. The envisaged measures are aimed at providing quality and affordable social support services in the home environment and in the community, as well as development of integrated health and social services, provision of day care for people with disabilities and their families, provision of substitute care, providing assistant support in the home environment, providing individual support in the home environment, training of social service employees, etc. It will prioritize measures to provide quality social services for residential care for people with disabilities, currently accommodated in specialized institutions for people with disabilities with the worst living conditions, which are not closed after the implementation of the first Action Plan for the period 2018-2021.

Some of the findings made in the CPT Report, such as lack of individualized care for users, lack of social work with users, lack of accompanying community support services, low motivation and lack of individual approach to employee care, lack of good living conditions and environment are also confirmed by the inspections carried out by the Agency for the Quality of Social Services (AQSS) in both homes. As noted in the previous information, practices cited in the CPT Report related to inhuman and degrading treatment of persons with disabilities are absolutely unacceptable and in complete violation of the legislation and principles of work in the field of social services. It was reported that the identified problems could not be solved within the existing homes and the model of care in them. Therefore, in parallel with the overall long-term process of reforming the system, urgent measures have been taken by the competent

authorities to eliminate the irregularities in the institutions, which also take into account the results of the subsequent inspections in them. They are also related to the necessary actions to ensure better and quality care for people with disabilities in order to guarantee their rights and prevent abuse in providing support for them. These measures are coordinated at both national and local level to ensure an individualized evaluation of the needs and the right of each user to a dignified life. Therefore, although the CPT Report does not contain a definite recommendation to close the homes visited, a decision was made at the national level to close the Home for Adults with Mental Disorders (HAMD), the village of Govezhda and the Home for Adults with Mental Retardation (HAMR), the village of Kudelin as a matter of urgency and directing the persons from both homes to use appropriate existing and newly established social services for residential care. In this way, the specific recommendation in the report is addressed for immediate action aimed at preserving the human dignity of the people living in the homes.

In support of the above, we present the following detailed information on the measures and actions taken to guarantee the rights of users of these homes, which addresses the recommendations made in the Report:

1. Information provided by AQSS in connection with its functions for monitoring and control of the social services system:

By order of the Supreme Administrative Prosecutor's Office, in the period 26.10.2020 - 20.11.2020 AQSS carried out inspections in 22 specialized institutions for persons with mental disorders and mental retardation, activities delegated by the state. No inspections were carried out in eight of the functioning specialized institutions due to infected users and employees with COVID-19. During the inspections in HAMR, the village of Kudelin (in the period 26.10 - 28.10.2020), HAMD, the village of Govezhda (in the period 02.11.2020 - 04.11.2020) and HAMR, the village of Samuil - 11.11.2020) violations of the legislation and the rights of the accommodated persons have been established. The results of the inspections are summarized in a report with specific proposals and measures, which was submitted to the Supreme Administrative Prosecutor's Office on 30.11.2020. On the part of AQSS, in accordance with its legal commitments, it is proposed to close as soon as possible HAMR, the village of Kudelin , Bregovo municipality and HAMD, the village of Govezhda, Georgi Damyanovo municipality, and to close HAMR within one year, the village of Samuil, Samuil municipality. For this purpose, indicative plans have been prepared for the closure of the HAMR, the village of Kudelin and the HAMD, the village of Govezhda, information on which is provided below.

In the period from 03.02.2021 to 04.02.2021, employees of AQSS have monitored the activities for implementation of the indicative plans. According to the data of AQSS, as of 03.02.2021 in HAMR in the village of Kudelin the number of places for accommodation is 110, and the actually occupied places are 93. 92 users are actually present. One user was hospitalized. In the HAMD in the village of Govezhda the number of accommodated users is 65. The competent authorities have taken action to terminate the contracts of the users, declared for national search.

According to the information of AQSS, on 21.12.2020 an inspection was carried out in HAMD, the village of Govezhda from Georgi Damyanovo municipality and a Protocol was drawn up regarding conversations with the users; inspection of the material base; review of financial statements for accounting, spending and reporting of users' personal funds; instructions were given to the director of the home to open individual bank accounts of the users in the institution. By Order № 358/31.12.2020 of the Mayor of Georgi Damyanovo municipality a representative of the municipality was appointed to be responsible for the overall control, coordination and participation in a specially created multidisciplinary team for processing the documents on the removal of users from HAMD, the village of Govezhda. On 18.01.2021, instructions were received from the Social Assistance Agency (SAA) regarding the removal of users, as well as a Methodology for evaluation of persons with mental disorders and mental retardation, developed under the project "New long-term care for the elderly and people with disabilities" within the Human Resources Development Operational Program 2014-2020, which will serve in the preparation of persons from both homes in the process of removing and directing them to the use of appropriate social services. By Order № 9/21.01.2021 of the Director of the institution, a multidisciplinary team of specialists was formed to prepare the necessary documentation for the directing and removing of persons from the institution.

For his part, the Mayor of Bregovo municipality has issued Order № 212/16.12.2020 to take urgent action in connection with the suspension of the functioning of the HAMR in the village of Kudelin. With his Order № 07/19.01.2021 a team was formed to prepare the users for removing them of the home and directing them to use social services for residential care. The above instructions and methodological support from the SSA were provided to the Mayor of Bregovo municipality and the Head of the home.

As regards the request in the Report for information on the monitoring activities planned for 2021 by AQSS, the provisions of § 34 of the Social Services Act should be taken into account, according to which the Agency carries out periodic inspections of the quality of the services provided in the homes. Among the main functions of the Agency, which it already

performs after its actual structuring from the end of September 2020, are to carry out inspections for compliance with the requirements of the law and regulations adopted in implementation of the SSA, the activities of suppliers of social services, municipalities, territorial structures of the SAA and other bodies responsible for their implementation; to check the observance of the rights of the users of social services; to carry out monitoring, on the basis of which it prepares an annual analysis on the condition and efficiency of social services, which it presents to the Minister of Labor and Social Policy; to give obligatory prescriptions for elimination of admitted violations and determine an appropriate term for their implementation according to the gravity and degree of the committed violation; to control newly established social services, etc. According to these functions, its monitoring and control activity in the field of social services is planned and carried out for the respective year.

AQSS will monitor the home for adults with mental disorders in the village of Govejda, Georgi Damyanovo municipality and the home for adults with mental retardation in the village of Kudelin, Bregovo municipality in the period until the final closure of both institutions, and if necessary additional monitoring will be carried out.

AQSS plans to carry out monitoring in 2021 in the home for adults with mental retardation in the village of Samuil, Samuil municipality, which should be closed by the end of this year. AQSS will initiate the preparation and signing of a Plan for closing the institution in the Samuil municipality.

2. Information on prepared operational documents for implementation and coordination of the activities for providing support to the persons from the homes and to the parties involved in the process of directing them to the use of social services for residential care and for the closure of both homes:

As a result of the proposals made by AQSS, indicative plans have been developed for the closure of the HAMR, the village of Kudelin and the HAMD, the village of Govezhda. The indicative plans have been signed by the mayors of Georgi Damyanovo and Bregovo municipalities. The plans aim to ensure effective coordination and interaction in the implementation of activities to provide the necessary support for persons in the process of assessing their needs, directing them to use appropriate social services for residential care, according to their requests and closing homes . The plans indicate the bodies involved in the process at national and local level, namely AQSS, Social Assistance Agency (SAA) and its subordinate structures, incl. The Regional Directorates for Social Assistance (RDSA) - Montana and Vidin, the Social Assistance Directorates (SAD) - Chiprovtsi and Bregovo, the

mayors of the municipalities, the heads of the specialized institutions, their employees. They contain mainly information about the activities that will be undertaken and the indicative deadlines for their implementation. According to AQSS and SAA, in the period January - February 2021 the teams at national and local level regularly hold meetings for exchange of information in connection with all activities related to the process of evaluating the needs of persons from both specialized institutions, directing them to use other social services and closing down the institutions, where the following is being discussed:

- the organizational activities related to the closure of the HAMR, the village of Kudelin and the HAMD, the village of Govezhda;
- actions to remove the users and prepare a portfolio of social services for residential care to which they are directed;
- activities to support Bregovo and Georgi Damyanovo municipalities in connection with the process.

The Social Assistance Agency has prepared a Plan of the Agency for implementation and coordination of the activities for closure of HAMD, the village of Govezhda and HAMR, the village of Kudelin. It aims to provide support to the persons living in both homes, the representatives of the specialized institutions, the municipalities on which territory they are located, as well as coordination and interaction between its structures involved in the process, including the territorial divisions of the Agency and the regional coordination units under the project "Increasing the capacity of employees in the field of child protection, social services and social assistance", implemented under the Human Resources Development Operational Program 2014-2020 by the SSA. The activities under the cited plan include mainly the commitments related to the evaluation of the needs of the persons from both homes, preparation of the plans for removal of each of the users from both homes, holding working meetings between all involved participants for coordination of efforts, preparation of portfolio of the services to which the persons from the homes could be directed to use at their request. Other parties involved in the process at local level are also involved in the implementation of the activities. The plan also contains information on the distribution of activities by teams, their responsibilities and deadlines.

3. Information on specific actions taken to remove persons from both homes and direct them to use appropriate existing and newly established social services, according to their requests:

The process of removing persons with mental disorders and mental retardation from both homes is in accordance with the requirements of the legislation and respecting their interest. It is fully compliant with the principle regulated in the SSA for respecting the rights of persons using social services and ensuring their active participation in decision-making. The procedure for directing persons to use appropriate social services, as well as the role and responsibilities of the parties involved in the process, are regulated in the SSA and the Regulations for its implementation. Within their legal powers, as well as in accordance with the above-mentioned documents, the ASA, its subordinate structures, representatives of the municipality and other stakeholders have established an organization of the entire process of removing users, according to their mental and emotional state - from preparation for removal from home to their placement in the new services and the subsequent provision of organizational support for these services. For this purpose, team meetings of the bodies involved at the local level are held regularly.

For realizing the SAA Plan for implementation and coordination of activities for closure of HAMD, the village of Govezhda and HAMR, the village of Kudelin, the Agency receives weekly information from RDSA - Vidin and Montana on the actions taken to close the two institutions, the process of evaluation of the needs of persons and their subsequent redirecting to the use of social services. The Agency also provides methodological support to the teams involved in the process at the local level, and for this purpose working meetings were organized and held in Bregovo and Georgi Damyanovo municipalities. At the same time, a number of team meetings are held at the local level between the parties involved and representatives of social services for residential care, where people from both homes could use social services. As of 12.02.2021 in SAA - Bregovo written requests for use of social services for residential care have been declared by 51 users of HAMR, the village of Kudelin.. At the same time in the SAA - Chiprovtsi were expressed written requests for the use of social services for residential care by 11 users of HAMD, the village of Govezhda.

The entire process of removing the persons and directing them to social services for the resident care is tailored to the individual needs of each user of the home, incl. preparation of preliminary needs evaluations by the SAD according to the SSA, on the basis of which the referral will be performed and subsequent preparation of individual needs evaluations and individual support plans within the new services that will be used by the persons. In evaluating

the needs of persons are examined and taken into account their health status, the ability to maintain contact with their relatives and receive support from them, to study the attitudes and requests of users. Based on this information, the plan for removing is prepared for each person. An example is a specific case of a user of HAMR, the village of Kudelin, who after consultation and assistance, has expressed a request to use social services in HAMR, Oborishte station, Valchi Dol municipality, district Varna, where his father, with whom the person has contacts, is accommodated. This was possible as a result of good communication between the local teams involved in the process. In this way, it is possible to maintain the relationship between father and son, according to their interest.

The referral of the persons from the homes to appropriate existing and newly created social services is carried out both to the currently functioning ones, in which there are vacancies, and to the newly created social services. Persons are informed and consulted about the existing social services that they could use, the conditions and terms for their use, the conditions for payment and full and partial exemption from payment of a fee for the use of social services. The information is provided in an accessible format, according to the condition and health status of the person. In this regard, the SAA continuously monitors the capacity of the 45 existing residential care services for people with mental disorders and the 56 existing residential care services for people with mental retardation, in view of this in the presence of vacancies and their request that the persons from the two specialized institutions be directed in time to one of these services. As mentioned, an electronic portfolio has been prepared for each of these services, which could be used by the users brought out by the HAMRS in the village of Kudelin and the HAMD in the village of Govezhda. It supports the teams that are involved in the preparation for their release and facilitates communication with them so that users can be maximally informed and provide opportunities to establish their desires and personal choices. The electronic portfolio contains an administrative-information part intended for specialists, as well as information aimed specifically at users, presented in an accessible, structured and easy to read and understand format, containing photos and brief information about what the material base looks like, where the service is being provided, information about employees, daily events, information about other users, etc. A technical organization has been set up to ensure the processes of collecting and accessing the files containing the specified information by all stakeholders. The organization of transportation and relocation of each person is tailored to the specific features, given his health status. For the persons placed under guardianship, who have expressed a desire to use a social service, their guardians or trustees have submitted opinions in accordance with the provisions of the SSA and the Regulations for its implementation. Also,

the RDSA - Vidin and Montana held discussions with the Regional Health Inspectorates in both areas for assistance in order to conduct free tests of users for COVID-19 up to 48 hours before their placement in the new services.

In addition, concrete actions have been taken at national level to create new social services for residential care. By Decree of the Council of Ministers № 413 of 30.12.2020, additional transfers from the central budget for 2020 were approved in the amount of BGN 1 387 657 to the budgets of the municipalities of Stara Zagora and Simitli for repair, furnishing and equipment of four centers for family-type accommodation for people with disabilities with a total capacity of 50 places for accommodation. By Decree of the Council of Ministers № 42 of 04.02.2021, additional transfers for 2021 were approved from the budgets of the municipalities of Stara Zagora, Gotse Delchev, Alfatar and Simitli as a general subsidy for the activities delegated by the state for advance financing of the activities of six centers for family-type accommodation for people with disabilities with a total capacity of 80 places for accommodation. The funds are provided at the expense of the planned expenditures of the central budget for 2021. In addition, the SAA has already issued two orders for preliminary approval for the establishment of two centers in Alfatar and Gotse Delchev municipalities, based on applications received from both municipalities of their creation. The services are expected to start operating in March 2021. The provision of residential care for the persons from both homes in these centers will allow to personalize the care for them given the significantly smaller capacity of the centers and better living conditions in them. The referral of persons to use social services for residential care in these centers also addresses the recommendation in the Report related to taking measures to protect persons from both homes from violence against them by other users, as the capacity of these centers provides opportunity for individualized care, as well as better monitoring of users' behavior for the prevention of conflicts or violence between them.

In view of the process of removing persons from both homes and taking into account the specifics of their health, the Ministry of Labor and Social Policy has prepared a letter to the Ministry of Health (MoH) with a request for assistance regarding the opportunities to engage doctors and psychiatrists in case of established need for such assistance or need for accommodation of a person in a medical institution or provision of specialized transport. The Ministry of Health (by letter with Outgoing Reference № 04-21-9 of 27.01.2021 to the Deputy Minister of Health) expressed readiness for full assistance and involvement in the organization and coordination of the process by the regional structures of the Ministry.

It is important to note that the directing to appropriate social services of the persons from the two specialized institutions is done taking into account their requests and personal choice. The measures and actions taken in connection with the implementation of the commitments and responsibilities of all stakeholders in the process and ensuring continuous communication between them, as well as the active participation of users in decision-making is a key prerequisite for finding the best solution for each of them. The above information should be taken into account with regard to the recommendation to ensure the voluntary use by persons with disabilities of social services for residential care, and in particular those placed under guardianship.

4. With regard to the recommendations related to the provision of training, supervision and support to the employees of the specialized institutions, as well as strict selection procedures:

Many of the challenges outlined in the Report in this area are addressed through the reform of the social services sector and the adopted SSA. As stated in the CPT Report, the difficult working conditions in the homes and the specifics of working with people with intellectual disabilities and mental disorders significantly contribute to difficulties in providing good and professional care for the people living in the homes, as well as a sufficient number of employees. This specificity of the work also contributes to the so-called "Burnout" of employees, as well as to identify unacceptable practices in the process of providing services in homes. Better planning, development and support of human resources in the social sphere and providing the system with qualified and trained specialists are among the main highlights of SSA. In order to achieve the quality and efficiency of the services, the law places a special focus both on the requirements for the employees performing activities for the provision of social services as well as with regard to the financing of services. The Act regulates the right of employees engaged in the provision of social services, introductory and upgrading training, as well as supervision. It is envisaged that the social service provider will develop a program for introductory and upgrading training. Mandatory mentoring of employees who for the first time carry out activities for the provision of social services has been introduced.

The SSA stipulates that the remuneration of employees performing activities for the provision of social services, which are financed from the state budget, be carried out according to certain standards. This was done in order to provide better conditions for payment of those working in the social services sector, to overcome the shortage of specialists in this field and to achieve the necessary quality of services. Decent remuneration of specialists is one of the

factors that contribute to their motivation and satisfaction with the care provided to users from the most vulnerable social groups, as well as to their retention in the system of social services. In this regard, by Decree of the Council of Ministers № 343 of 07.12.2020, an Ordinance on the standards for remuneration of employees performing activities for the provision of social services, which are financed from the state budget, was adopted and will enter into force at the beginning of 2022. With its adoption, better conditions were created for the remuneration of employees providing social services, which is a prerequisite for increasing their quality and efficiency. By providing better conditions for remuneration of employees providing social services, as well as differentiation according to their qualification, an opportunity is provided to attract specialists to work in the social sphere, including those in health care, which is one from the recommendations in the CPT Report.

In addition, by Order RD-02-20 of 29.01.2021 of the Minister of Labor and Social Policy an interdepartmental working group was formed to develop a Code of Ethics for employees performing activities for the provision of social services and standards under Art. 123 of the Social Services Act regarding the approval of standards for workload of the employees of the provider, carrying out activity on provision of social services and for the employees, carrying out activity on referral for use of social services.

An Ordinance on the quality of social services is also being developed, which will determine the standards for organization and management of the service, qualification and professional development of the employees who carry out the activity of providing the service, and on the efficiency of the service in view of the achieved results for those who use it in response to their needs. The Ordinance on the quality of social services will determine the minimum requirements for the number and qualification of the necessary employees who perform the activity of providing various types of social services, the requirements to the activity performed by the employees on the provision of various services and the obligations of the providers and career development of their employees.

It is necessary to take into account the fact that the financing of social services, delegated by the state activities, is carried out through the municipalities in accordance with the Law on the State Budget of the Republic of Bulgaria for the respective year. In 2021, the funds for salaries of employees in social services, delegated by the state activities, are calculated within the financial standards set by the Decision of the Council of Ministers for adoption of standards for delegated by the state activities with natural and value indicators in the respective year. The tendency is for annual increase of the standards for financing of social services, activities delegated by the state, respectively for increase of the remuneration of the specialists in the

system of social services. With the Law on the State Budget of the Republic of Bulgaria (LSBRB) for 2021, the funds for social services delegated by the state activities have been increased and amount to BGN 421.9 million or 45% more than the LSBRB for 2020 in accordance with Decision № 790 of 30.10.2020 on the adoption of standards for the activities delegated by the state with natural and value indicators in 2021. Taking into account the specifics of work in different types of services, as well as the need to increase funding for specialists, every year the standards for financing of social services are differentiated, especially those where there is the greatest need to achieve effective and quality 24-hour care for users.

According to information from the mayor of Bregovo municipality, in HAMR, the village of Kudelin as of December 2020, three social workers, eight medical specialists, two occupational therapists and 24 paramedics have been appointed. The employees are qualified, there is not much turnover and most of them are long-term employees of the home. Actions have been taken to increase the remuneration of employees. Free transport to the workplace is provided. An opportunity to increase the number of the multidisciplinary team of specialists has been identified and actions have been taken to find and appoint additional occupational therapists and a psychologist. The need to improve the human resources management system in the home, including training and supervision of employees, has also been identified. Appropriate trainings are planned for them.

According to information from the mayor of the municipality Georgi Damyanovo, the head of the HAMD, the village of Govezhda is negotiating with a medical institute in Vratsa regarding the possibilities for selection and hiring of young specialists in the home. The senior nurse and a social worker from the home have been trained in the field of social services. The staff training schedule is in line with the dynamics of the epidemic situation in connection with the spread of COVID-19 and the measures introduced. In this context, the senior nurse regularly conducts supervision and training meetings with staff in order to properly and safely wear masks and protective clothing. In December 2020, employee training was also conducted.

In the context of the above and in the spirit of the recommendations in the Report, targeted efforts and concrete measures will be continued to increase the qualification, motivation and capacity of employees to work with specific vulnerable groups of persons, such as persons with disabilities. It should be noted that among the responsibilities of mayors, as providers of social services, is to provide training to employees providing services under a developed program for introductory and upgrading training, as well as regular supervision in the work process in order to minimize the risk of "burnout".

With regard to all the recommendations in the Report concerning the material base and living conditions in the homes in the villages of Kudelin and Govezhda, given the measures taken to close the homes, these recommendations are irrelevant in the long run. At the same time, a number of immediate actions have been taken to improve their living conditions in the period leading up to their closure:

According to information from the mayor of Bregovo municipality, in HAMR, the village of Kudelin, the bedrooms on the first and second floors were renovated, including plastering and latex painting; the occupation rooms were renovated, including plastering and latex painting; the gym was repaired, consisting of leak removal and latex painting. For the disabled users on the first floor of the residential building, actions have been taken to provide the necessary personal space.

In September 2020, additional 50 new single beds, 50 mattresses and 50 waterproof leather covers were purchased. In October 2020, the renovation of the bathrooms on the first floor of the three-storey residential building started. Activities are planned for the construction of additional toilets and bathrooms on the second and third floors of the home. Specific activities have been undertaken to equip the bedrooms of the users, consisting in the purchase of suitable furniture for personal use. The external toilet is closed and users' access to it is suspended.

According to information from the mayor of Georgi Damyanovo municipality, in HAMD, the village of Govezhda the window-frames and windows of 10 bungalows were replaced, the front doors were replaced, a new professional stove for the kitchen unit was purchased, the electrical installation of the kitchen unit and the administration was replaced, outdoor lighting in front of all bungalows was replaced. Following the CPT delegation's visit, the grille in bungalow № 12 on the left was removed, repaired and new doors were installed at the entrance and the room on the left. The plumbing installation of the kitchen unit has been replaced, all radiators in the users' rooms have been replaced, new chairs for the kitchen unit, new mattresses, as well as new beds complete with mattresses have been purchased. In 2020, 70 new pillows, new bedroom sets for all users, as well as duvets were purchased twice. As of the date of submission of the information (December 2020), a renovation of bungalow № 12 has been undertaken, which will be separated for a room for users activities and group work with them.

5. *Detailed information about the actions taken to improve the living conditions of the persons accommodated in the Home for Adults with Mental Retardation (HAMR), The village of Samuil, Samuil municipality (provided by letters from the mayor of Samuil municipality in December 2020 and February 2021):*

- Measures and actions taken to develop and implement social rehabilitation programs and to encourage user participation in organized activities and activities:

In order to improve the quality of life of users, measures and actions for social rehabilitation are implemented, which are set out in a program. Programs for social activities, occupational therapy activities and kinesitherapy are planned and implemented on a monthly basis. A summary annual plan has been developed, which includes activities for educational and literacy programs for users. Depending on the condition reflected in the individual support plan, the users are divided and included in five groups in a weekly and monthly work plan. The activities are in the following areas: cooking, hygiene and socially useful work, floriculture, household work, constructive activity, reading, writing and leisure activities. An individual approach is followed by the work with users according to their interests, with emphasis on building knowledge and acquiring habits for leading an independent lifestyle. Measures are taken towards maintaining contacts with relatives of users, in order to stimulate an emotional connection between them and encourage the process of reintegration into the home environment for those of them for whom this is possible.

- Measures taken to recruit qualified staff and to develop clear and traceable procedures for the selection of staff, to provide initial and ongoing training, and to increase staff control to prevent violence between users:

The appointment of the employees in the home is in accordance with the requirements of the Methodology for determining the number of staff in the specialized institutions and social services in the community, according to which 51 people are employed. The home is managed by a director with higher education in the specialty "Social pedagogy", bachelor's degree and "Organization and control of socio-pedagogical activities", master's degree, with 30 years of professional experience in the field of social services. The specialists employed at the home are: three social workers with higher education, "Social pedagogy" specialties and "Pedagogy", kinesitherapist with higher education, "Kinesitherapy" specialty, speech therapist with higher education, "Special pedagogy" specialty. Medical care is provided by 8 nurses and 1 paramedic with about 20 years of experience in caring for people with intellectual disabilities.

Occupational therapy is performed by occupational therapists. The non-specialized staff consists of nurses and hygienists. The administration of the service includes specialists cashier, host and others. All employees have many years of experience in working with people with intellectual disabilities.

The team of the home, according to a contract between the Center for Social Rehabilitation and Integration and HAMR, the village of Samuil, enjoys specialized support from the specialists of the Center. The aim is to prevent the accumulation of tension and overcome difficulties in working with aggressive users. The support is expressed in counseling in difficult and specific situations, mediation in resolving conflicts. To build objective and emotionally sustainable professional behavior, employees conduct team, group and individual supervision. The Rules for the internal working order of the institution determine the manner of selection and the conditions for appointment of employees. The newly appointed employees go through introductory and current training, according to an approved program for internal training. There is a constant control by the director and the employees for the prevention of violence between the users.

Periodic and special briefings are given to the employees, during which they are explained that it is necessary to prevent the occurrence of violence between users. Regularly, in case of aggression, the situation is discussed in reports with employees, which thoroughly examine the psycho-emotional state of users and the reasons that led to this state. Measures are planned to stop the aggressive manifestations. The institution carries out continuous video surveillance, covering the perimeter of the home.

- Measures taken to prevent physical violence, mechanical or chemical detention, restriction and illegal immobilization of persons, as well as restrictive measures and means to control the behavior of users accommodated in the home, development and implementation of a procedure in crisis situations and intervention (information on this issue was provided in December 2020 in connection with § 79 of the Report):

According to information from the mayor of the municipality, the institution does not use physical violence, mechanical detention, restraint and illegal immobilization of users. Any form of domestic violence is absolutely forbidden. In connection with a visit by the CPT's delegation to the home and the information provided on such cases in other institutions, a special briefing of the staff was conducted. Each employee is explained the personal responsibility - administrative and criminal, in case of admission of events described above.

Additional measures are envisaged for: identification of the factors provoking stressful conditions of the employees; determination of the individual psycho-emotional characteristics of each employee and measures for overcoming the affective states in the predisposed; creating opportunities for full use of rest time; when overstrain is identified in the employees, measures will be taken to change the schedule for working hours.

Regular (at least once a month) group meetings are held with employees in order to identify new and/or renewed aggressive behavior by users and take measures to limit them. Measures are implemented by a team consisting of a qualified psychologist and social workers. There is no chemical restriction in the institution through the use of psychotropic drugs. No restrictive measures and means of controlling user behavior are applied. The institution provides the necessary medical care through a contract with a psychiatrist and active cooperation with the personal physician of the users. Each applied treatment is consistent only with the prescribed therapy.

Rules and procedures for responding to crisis situations and for the need to implement specific interventions, which are part of the Rules of Procedure of the institution, have been developed and approved. In the event of high-risk events for the safety and life of users, immediate action is taken to cease them. The director of the institution shall be notified, after which a team discussion of the reasons and the necessary measures for overcoming them shall be held immediately. Actions have been taken to provide psychological support to employees and to identify psycho-emotional changes in the condition of users that would cause high-risk events by providing a psychologist from the Center for Public Support in the village of Samuil. Every day, each report with the on-duty employees of the institution is reminded of the inadmissibility of any form of violence against the accommodated persons. It is explicitly ordered that if cases of violence are found, the competent authorities will be contacted and measures will be taken to impose an administrative penalty.

- Measures and actions taken to provide information to the person wishing to use the social service, orally and in writing in a format accessible to them and through means and technologies that facilitate its understanding:

Information has been developed for a detailed description of the social services provided, the experience of the provider and the qualifications of the employees carrying out the activity in the institution. Users and their relatives are presented with the Rules of Internal Order in the HAMR, the village of Samuil. The draft contract for the use of services sets out all the rights and responsibilities of the parties - user and supplier. These documents, as well as

any other information relevant to persons, shall be explained in detail in writing and orally in an accessible format to facilitate their understanding.

- Measures and actions taken to provide the necessary safeguards aimed at preventing the risk of the spread of COVID-19 for the safety of users and employees:

Measures and actions have been taken to provide the necessary precautions aimed at preventing the risk of spreading COVID-19 by approving a protocol for cleaning and disinfection. The anti-epidemic measures are also described in other documents - in the Action Plan in the conditions in COVID-19 in HAMR - the village of Samuil, approved by the mayor of the municipality and Rules for internal working order in the institution. Officials responsible for controlling the entrance of the home in terms of the number of entrants have been appointed in order to prevent crowds and ensure distance and to control the cleaning and disinfection activities. Critical points are subject to mandatory disinfection (flooring, official vehicles of the institution, various surfaces, desks, door handles, windows, lighting switches, elevator buttons, railings, fixed telephones, toilet bowls, sinks, boards of beds, cranes and other surfaces depending on the specifics of the workplace). Critical points are subject to repeated daily disinfection. Personal protective equipment is provided - masks, helmets, protective clothing and gloves. Sufficient disinfectants are available for use. Information boards have been placed in the sanitary and hygienic units in the institution, indicating observance of physical distance, hand hygiene, etiquette of sneezing and coughing and wearing protective masks.

- Measures and actions taken to improve the material base:

The building stock consists of several buildings, the main one consisting of three floors. Major repairs have been made to renovate and replace the windows. The buildings are adapted for users with disabilities and for this purpose a ramp and an elevator have been built to facilitate the access of people with reduced mobility. The institution is heated by local heating, which was completely replaced in 2019. Disabled and elderly users are accommodated on the first floor in order to facilitate their movement with wheelchairs and walkers and the care of employees. Rooms are equipped with beds, individual lockers, wardrobes and a TV. Each room has a bathroom. The furnishing of the rooms is in accordance with the individual needs and the personal desire of the users, a cozy living environment is created. In the basement of the main building there is a kitchen with dining area. In separate auxiliary buildings there is a boiler and a laundry room. The health care facilities are located on the first floor. These are a well-

equipped manipulation room, a doctor's office, a senior nurse's room and a relaxation room. There are separate rooms for user activities, as in the main building of the institution on each floor there are two living rooms, equipped with TV, tables and sofas and a machine for hot and cold water, provides an opportunity for social and occupational therapy activities with users. A solitude room and a relaxation room are used. Opportunities have been created for full organization of free time, in compliance with the anti-epidemic measures, through activities of interest and hobbies, various sports activities and games, physical therapy classes. HAMR- the village of Samuil is located in the park area of the village of Samuil, located among twelve acres of perennial oak trees, which provide a pleasant coolness, healthy climate and an environment conducive to rest and tranquility. The home is situated within the municipal center and has a bus connection with the regional town of Razgrad. There are opportunities for contacts with people from the community, which is necessary for the social adaptation of the person and their identification and self-determination.

- Measures taken for subsequent support of the persons from the home in the process of their removing and directing to the use of appropriate social services for residential care:

It is planned to gradually reduce the capacity of the home, which is currently 86 seats, by stopping the admission of new users and by creating opportunities for referral to residential care services if they express a desire. For this purpose, Samuil municipality has applied with a project proposal for the reconstruction of an existing building in a sheltered housing for people with mental retardation in Samuil municipality under the project "Beautiful Bulgaria", measure M02-01 "Improvement of social services of resident type". The SAA expressed support for the project proposal, with which the municipality of Samuil applied for the project, provided that users from the home will be directed to the newly created Sheltered Housing in order to reduce its capacity until its final closure. It is also planned to establish a Center for family-type accommodation for adults with mental retardation in the village of Golyama Voda with 15 places for accommodation, as well as to increase the capacity of a Center for family-type accommodation for adults with mental retardation, the village of Samuil.

In connection with all the abovementioned, we are confident that the CPT will take into account the efforts made in recent months at both national and local level to guarantee the rights of persons with disabilities living in the three institutions visited. Due to the specifics of the state of users, this process should be very well planned, which implies the appropriate time for

the implementation and finalization of all these measures. Nevertheless, there are already concrete results from the actions taken and the parties involved in the process will continue to work towards the full and effective support of persons so as to guarantee their rights.

II. INFORMATION PROVIDED FROM THE MINISTRY OF HEALTH

Results of inspections on the findings and criticisms highlighted in the Report of the Extraordinary Visit to the Republic of Bulgaria of the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (“CPT”), conducted in the period 10-21 August 2020

In connection with the findings and criticisms in the report, as well as the CPT's allegations of physical violence against patients in State Psychiatric Hospitals - SPD (paragraphs 43 and 56 thereof), it was requested by the competent institutions - Regional Health Inspectorates (RHI), urgently to carry out a thorough inspection, in the psychiatric hospitals mentioned in the report, for the observance of the international guidelines on the use of psychiatric immobilization measures, as well as to indicate the measures taken to eliminate omissions and shortcomings in the three state psychiatric hospitals (SPH-St. Ivan Rilski, SPH-Tsarev Brod and SPH-Ruse).

In the course of the inspections, the RHI inspection teams visited each of the above-mentioned medical institutions in order to establish on the spot the reliability of the CPT's findings, as well as to check the compliance of the treatment and the measures taken with the patients, Bulgarian legislation regulating public relations in the field of mental health. Each inspection ended with recommendations to the targeted psychiatric hospitals.

After the expiration of the indicated deadlines for implementation of the recommendations made by the inspection commissions by RHI, a subsequent comprehensive inspection was ordered and performed by the competent authority - the Medical Supervision Executive Agency - of the three psychiatric hospitals with a view to ascertaining the implementation of the recommendations, as well as verification of all remarks reflected in the Report of the European Committee for the Prevention of Torture, Inhuman or Degrading Treatment or Punishment (CPT).

In this regard, we provide information on the results of the inspection carried out in the three psychiatric hospitals regarding the remarks made in the report as follows:

State Psychiatric Hospital "St. Ivan Rilski" in the town of Novi Iskar

State Psychiatric Hospital "St. Ivan Rilski", is a medical institution for inpatient psychiatric care, registered according to the respective order, the activity of which is carried out in accordance with the approved Regulations for the structure, the activity and the internal order.

State Psychiatric Hospital "St. Ivan Rilski" provides the following medical activities:

1. diagnostic and treatment activities for the mentally ill;
2. psychosocial rehabilitation activity of the mentally ill;
3. psychoprophylactic activity;
4. care for the mentally ill.

The medical institution also provides social services under the Social Assistance Act.

These activities are provided through a consultative-diagnostic unit consisting of reception-consultative offices; day hospital (ward without beds) - 30 places; social activities strand - social workers, inpatient unit, consisting of General psychiatry ward, closed type, for adults - men - 30 beds; General psychiatry ward, closed type, for adults - women - 30 beds; General psychiatry ward semi-closed type for adults - men - 35 beds; General psychiatry ward, semi-closed, type for adults - women - 35 beds, as well as a day care unit with rooms for psychosocial rehabilitation.

Currently, the staff is 128 people with an approved staff description of 141, and the medical institution uses 15 doctors, 11 of whom have acquired the specialty "Psychiatry". All doctors are members of the Bulgarian Medical Association.

The admission and treatment of patients in the medical institution is carried out on a voluntary basis, mandatory accommodation and treatment under Art. 155 of the Health Act, compulsory treatment under Art. 89 and Art. 90-92 of the Penal Code, accommodation for forensic psychiatric examination by court order, accommodation of incapacitated patients with the consent of their legal representatives (guardians), emergency accommodation by medical authorities and police with immediate notification of the court.

The medical documentation is prepared according to the requirements of the standardized documentation and contains all the necessary details: method of admission, mental status, neurological status, physical status, psychiatric syndrome, diagnosis according to

ICD-10, diagnostic and treatment plan, supervision, regimen. In the Histories of the disease are attached, according to Ordinance № 24 of July 7, 2004 for approval of the medical standard "Psychiatry": Declaration of informed consent for inpatient treatment, signed by the patient; Medical evaluation at hospitalization - examination of somatic, neurological, mental status, suicide and aggression; Epicrisis.

The observation and follow-up of the patients is reflected in the HD, as well as the prescribed drug therapy. The courses are informative about the mental state, intake of food, fluids, medications, vital signs and consultations with specialists. The condition of the patients was monitored with a minimum of two courses per week, according to the approved medical standard.

During the inspection it was established that the requirements of Ordinance № 1 of June 28, 2005 on the procedure for application of measures for temporary physical restraint in patients with established mental disorders, issued by the Minister of Health and the Minister of Justice, prom. SG. No. 56 of July 8, 2005. The type of measures taken for physical restraint, the reasons for this, the term for their application, the name of the doctor who ordered them; manner of application of the measure and the applied medical treatment are entered in a special book, according to the ordinance. The duration of the physical restraint measures taken does not exceed two hours, as required by law.

A commission has been set up to supervise the implementation of the temporary physical restraint measures. The commission consists of five members - a representative of the Sofia Regional Health Inspectorate, a person with legal education, a member of the hospital board and two representatives of the hospital. With regard to the control over the activities for the implementation of the measures, the Supervisory Commission carries out periodic inspections, once a quarter, and for the results of the inspections protocols have been prepared, which show that for 2020 no omissions or violations have been identified.

The RHI inspection team has performed a random documentary check of the medical records of patients in which no violations of the requirements of Ordinance № 1 of 28 June 2005 on the procedure for applying measures for temporary physical restraint in patients with established mental disorders were found.

The RHI inspection team performed a random documentary check of the medical records of patients in which no violations of the requirements of Ordinance № 1 of 28 June

2005 on the procedure for applying measures for temporary physical restraint in patients with established mental disorders were found.

The management of the State Psychiatric Hospital "St. Ivan Rilski" has taken measures to investigate the problems identified by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) and have prepared an action plan with specific measures to improve the activity in the medical institution:

1. Introduction of continuing education of the entire staff of the hospital and acquaintance with the algorithms for dealing with a crisis situation of seriously mentally ill and for respectful and ethical treatment of patients, as well as periodic instruction on the principles of good clinical practice.

2. Adequate publicity and stimulation to use the hospital's existing reporting and complaints system. This system should be used to report cases of staff violence against patients. The staff is informed by the senior nurses and the heads of the ward about the subsequent sanctions in such established cases.

3. Re-acquainting all staff with the regulations for registration of accidents at work in order to avoid as much as possible the possibility of self-mutilation in patients with aggressive disease behavior, which is therapeutically possible to inflict bodily harm on their caregivers (nurses, nurses, etc.). Periodicity of this measure is envisaged.

4. Introduction of a system for temporary storage of the recordings from the video surveillance cameras in the acute wards, in order to validate the possible violence by the staff towards the patients and to ensure adequate security and protection of the staff and the patients. Only the Director of the hospital and the members of the inspection commissions (appointed by the Director) will have access to these records in the respective cases.

5. Purchase of specially designed safety equipment that does not cause pain or injury. Training of staff on its use. Ensuring the possibility for the immobilization slips to be printed directly from the electronic system (HD), so that they cannot be manipulated.

6. The rules for the internal order of the First Women's Ward prescribe the regulated access to a telephone every day for each patient in the ward. This organizational model is already defined in the regulations of all wards in the hospital.

7. To reaffirm the practice of admitting a new patient, to acquaint him with the rules of internal order of the hospital, including his rights and responsibilities, and patients sign that they are familiar with him.

8. The rules of procedure of each ward are placed in a prominent place and patients have access to it.

9. Separation of places for outdoor exercises, according to the type of fitness grounds in the parks in Sofia.

10. Purchase of personal, lockable lockers.

11. Providing a sufficient amount of bed linen. Additional staff responsible for hygiene in the ward has been appointed.

12. The patient in room №3 (described during the examination) was not with "acute mental disorder", but with mental retardation. At the moment he is discharged (accommodated in SCH). The room has been renovated.

13. Clarification and activation regarding the procedure for involuntary hospitalization according to the HA. In the journal of the admitted patients to reflect on what principle he was admitted and which doctor took the informed consent (informed the patient about his rights respectively).

The following actions have been taken at the State Psychiatric Hospital "St. Ivan Rilski", Novi Iskar:

- The nurse who showed violence was identified in the summer of 2020 and she was subjected to internal procedures in the ward by the senior nurse and the deputy head of the ward at that time.

- Transformation of 2 full-time positions has been carried out, as 2 positions for nurses have been transformed into hygienists who have already been appointed.

- New kits for immobilization and fixation on the principle of magnetic limiters have been purchased.

- Room № 3 has been renovated after the patient's discharge

State Psychiatric Hospital - Tsarev Brod village (SPB - Tsarev Brod village)

State Psychiatric Hospital - Tsarev Brod is a medical institution for inpatient psychiatric care in which treatment is provided under the Health Act and the Penal Code - Art. 89, 66., .a "and" b ", which represent about 25% of the treated patients.

The activity is carried out in accordance with the approved Regulations for the structure, the activity and the internal order by providing the following medical activities:

1. Diagnosis and treatment of the mentally ill.
2. Psychosocial rehabilitation of the mentally ill.
3. Psychoprophylaxis and promotion of mental health.
4. Care for the mentally ill.

State Psychiatric Hospital - Tsarev Brod has 180 beds and serves Shumen, Targovishte and Varna regions.

In the State Psychiatric Hospital - Tsarev Brod there are three functionally separate structural units: Consultative-diagnostic, Inpatient and Administrative-economic. The following wards function in the medical institution:

First ward for active treatment - men - 7 hospital rooms with 30 beds. Sector for patients with a high degree of dependence on care with 8 beds; sector for patients with a medium degree of dependence on care with 16 beds, sector for increased security with two isolation rooms and one hospital room, a total of 6 beds.

Second ward for active treatment - men - 6 hospital rooms with 30 beds. Sector for patients with a high degree of dependence on 4-bed care; sector for patients with a medium degree of dependence on care with 20 beds, sector for patients with a low degree of dependence on care with 6 beds.

Women's ward - 7 hospital rooms with 30 beds. Sector for patients with a high degree of dependence on care with 8 beds; sector for patients with a medium degree of dependence on care with 14 beds; increased security sector with one isolation room and one hospital room, a total of 4 beds; sector for patients with low dependence on 4-bed care.

Ward of addictions, limit and gerontopsychiatric states - 7 hospital rooms with 30 beds. Dependence sector 17 beds: for a high degree of dependence on care 6 beds; for an average degree of dependence on care 8 beds; for low care dependence 3 beds. Sector limit states 15 beds: for high degree of dependence on care 3 beds; for an average degree of dependence on

care 9 beds; for low care dependence 3 beds. Gerontopsychiatric sector 15 beds for a high degree of dependence on care. Day care unit with a day center with 15 seats.

Consultative - diagnostic ward with inpatient and day hospital with 22 beds, 24 hours a day hospital and 21 beds day hospital, based in Shumen. The isolation rooms are equipped with installed video surveillance systems and have an adjoining bathroom. They are located in the first ward for active treatment of men, women's ward and the "Addictions" section of the ward for addictions, limit and gerontopsychiatric conditions. The rooms have two beds, which are fixed to the floor according to regulatory requirements.

The isolation rooms are located in the first ward for active treatment of men, women's ward and the "Addictions" section of the ward for addictions, borderline and gerontopsychiatric conditions. They are equipped with video surveillance systems and have an adjoining bathroom.

The medical institution in the village of Tsarev Brod has halls for cultural therapy, art therapy, culinary club and occupational therapy.

The medical institution provides services in the following diagnostic areas: Schizophrenia and schizoaffective disorders; Other acute or chronic psychotic disorders; Affective disorders; Organic mental disorders; Epileptic psychoses and severe epileptic personality change; Mental and behavioral disorders due to the use of psychoactive substances; Severe neurotic conditions; Anorexia and bulimia nervosa; Personality disorders; Mental retardation.

The medical documentation is prepared according to the requirements of the standardized documentation and contains: mode of admission, mental status, neurological status, physical status, psychiatric syndrome, diagnosis according to ICD-10, diagnostic and treatment plan, supervision, regime according to the approved medical standard "Psychiatry".

In the Histories of the disease, according to Ordinance № 24 of July 7, 2004 for approval of the medical standard "Psychiatry" are attached: Declaration of informed consent for inpatient treatment, signed by the patient; Medical evaluation at hospitalization; Nursing assessment at admission; Initial assessment of suicide risk and aggression; Medical and nursing assessment at discharge, Protocol with criteria for discharge; Epicrisis.

The observation and follow-up of the patients is reflected in the HD, as well as the prescribed drug therapy. The courses are informative about the mental state, intake of food, fluids, medications, vital signs and consultations with specialists. The condition of the patients was monitored with a minimum of two courses per week, according to the approved medical standard.

The SPH - Tsarev Brod has a commission for supervision over the implementation of the measures for temporary physical restraint, consisting of five members - a representative of RHI - Shumen, a person with legal education, a clinical psychologist and two representatives of the SPH - Tsarev Brod, which performs periodic checks on the implementation of the measures.

A book is kept in the medical institution according to Ordinance № 1 of June 28, 2005 on the procedure for application of measures for temporary physical restraint in patients with established mental disorders and in the Sheet for application of measures for temporary physical restraint.

When applying temporary physical restraint to patients, the duration does not exceed two hours in accordance with the requirements of the ordinance.

At the time of the inspection, the medical institution has two types of fixation belts: leather and with a magnetic locking mechanism, which are stored in the manipulation. The nurses and orderlies are regularly trained in the application of measures for temporary physical restraint according to an approved program. An attendance report is prepared after each training.

The total number of staff in SPH - Tsarev Brod according to the staff schedule is 181 people. As of 30.11.2020, the actual positions are 174, including 14 doctors (with a staff schedule of 17), 64 nurses, with a staff schedule of 70. Currently, the SPH has 4 psychologists, two of whom specialize in "Clinical Psychology", two social workers, 1 rehabilitator.

The medical institution employs 14 doctors, of which 9 are specialists in psychiatry, a specialist in child psychiatry, 2 doctors who have completed their specialization in psychiatry, 1 with another medical specialty. One of the doctors works part-time and one works 0.25. There are 6 vacancies for nurses, two of which are in the First Active Treatment ward - men. All doctors are current members of the Bulgarian Medical Association.

State Psychiatric Hospital - Tsarev Brod has 180 beds and serves Shumen, Targovishte and Varna regions. The medical institution accepts for treatment properly directed patients from other areas - Burgas, Dobrich, Razgrad.

The RHI inspection team performed a random documentary check of the medical records of patients in which no violations of the requirements of Ordinance № 1 of 28 June 2005 on the procedure for applying measures for temporary physical restraint in patients with established mental disorders were found.

The following actions have been taken at the State Psychiatric Hospital - Tsarev Brod in connection with the findings of the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment:

1. The 8 chains available in the First Department for Active Treatment - Men were seized. In the other wards - Second ward for active treatment - men, Women's ward and Ward of addictions, limit and gerontopsychiatric states, the presence of similar means for immobilization has not been established. The permitted means of immobilization (leather and tarpaulin belts and straps) are stored in the manipulation areas at the designated places.

2. New kits for immobilization and fixation on the principle of magnetic restraints have been purchased.

3. The director and the head nurse carry out monthly inspections regarding the keeping of the documentation, the correspondence between the entries in the HD and the book of restrictive measures, as the omissions are discussed with the heads of wards and recommendations for their elimination are given.

4. According to the adopted program, the participating teams in the implementation of means of restraint continue to be trained every six months and the possibility for better 24-hour distribution of the staff and provision of night shifts with nurses and orderlies is discussed.

5. After mastering the agitation and acute psychotic states, patients are again given the opportunity to get acquainted with the conditions of hospitalization, their rights and obligations, as well as the order and regime in the ward in which they are accommodated.

6. The hospital has been renovated in one of the sectors with the establishment of a separate reception room for patients with suspected Covid 19 and the equipment of the sector for accommodation of patients with coronavirus infection has been completed.

7. The following are provided: personal protective equipment for staff and patients, disinfectants in all structures of the medical institution, disinfection plans are strictly implemented, visits are prohibited, according to an order of the Minister of Health, an algorithm for behavior when receiving a patient with suspicion for Covid 19, thermometers for remote temperature measurement were purchased, rapid antigen tests were purchased.

8. The available mechanisms for filing a complaint by patients in the hospital are the following: Submitting complaints and grievances to the director of the hospital, to the attending physician or on duty, filing a complaint in the office, to the complaint and grievance box.

9. Access to telephone is provided to patients at certain intervals, and complaints can be filed and are filed during a telephone conversation with relatives, by e-mail to the SPH RHI, MH, Ombudsman and other institutions.

State Psychiatric Hospital, Byala, Rouse District

State Psychiatric Hospital (SPH), Byala, Rouse district is a medical institution for inpatient psychiatric care, which provides treatment under the Health Act and the Penal Code - Art. 89, 66., "a" and "b".

The activity of the medical institution is carried out in accordance with the approved Regulations for the structure, the activity and the internal order.

The medical institution performs the following activities:

1. diagnosis and treatment of the mentally ill;
2. psychosocial rehabilitation of the mentally ill;
3. psychoprophylaxis and promotion of mental health;
4. care for the mentally ill.

The inpatient unit of the medical institution includes six clinical wards with 270 beds.

First men's ward - works on programs and care for treatment and rehabilitation of patients with acute psychosis and schizophrenic exacerbations, severe depressive episode, in need of short and medium stay - 40 beds.

Second men's ward - works on programs and care for treatment and rehabilitation of patients with alcohol and drug addiction, abstinence and personality disorders with emotional and behavioral disorders leading to severe psychosocial breakdown, requiring short and medium stay - 20 beds.

Third Men's Ward - works on programs and care for treatment and rehabilitation of patients with psychosis in involution and chronic organic brain syndrome - dementia with emotional and cognitive disorders requiring short and medium stay - 35 beds.

Fourth Men's Ward - works on programs and care for treatment and rehabilitation of patients with chronic psychosis, leading to psychosocial breakdown, chronic organic brain

syndrome - epilepsy and mental retardation with emotional and cognitive disorders, psychotic breakdown in need of short- and medium-term stay 70 beds.

First Women's Ward - works on programs and care for treatment and rehabilitation of patients with acute psychosis and schizophrenic exacerbations, severe depressive episode in need of short and medium stay - 30 beds.

Second Women's Ward - works on programs and care for treatment and rehabilitation of patients with chronic psychosis, leading to psychosocial breakdown, psychosis in involution and chronic organic brain syndrome - dementia with emotional and cognitive disorders, epilepsy and mental retardation with emotional behavioral disorders in need from medium-term and long-term stay distributed by nosology in two units - 75 beds.

Rooms are created in the wards according to the needs of the patients and their degree of dependence on care. The medical institution has four isolators located in the First, Second and Fourth men's wards and in the First women's ward. Video surveillance is provided in two of the isolators, and the monitor for surveillance is located in the nurse's room. Each ward has established rules, procedures and instructions for action in case of urgent patient restraint.

The State Psychiatric Hospital - Byala serves with inpatient psychiatric care the districts: Ruse, Silistra and Razgrad. In addition, due to the overcrowding of psychiatric hospitals in the neighboring Targovishte and Veliko Tarnovo districts, a large percentage of patients from these regions are admitted to the hospital. It is the only psychiatric hospital in which patients can be accommodated under Art. 155 of the PA and Art. 89 of the Penal Code from the above-mentioned regions. In 2020, the number of these patients in the State Psychiatric Hospital - Byala is 130.

The staff engaged in treatment and patient care includes 10 doctors, 33 health care specialists, 89 other staff, 51 of whom are nurses. Five of the doctors have a recognized specialty in psychiatry, and two of them have a second employment contract. The other five doctors specialize in neurology, surgery and general medicine. All doctors are current members of the Bulgarian Medical Association.

The medical documentation is formed according to the requirements of the standardized documentation and contains: manner of admission, mental status, neurological status, physical status, psychiatric syndrome, diagnosis according to ICD-10, diagnostic and treatment plan, supervision, regimen. In the Histories of the disease are attached, according to Ordinance № 24 of July 7, 2004 for approval of the medical standard "Psychiatry" are attached: Declaration of informed consent for inpatient treatment, signed by the patient; Medical evaluation at hospitalization; Nursing assessment at admission; Initial assessment of suicide risk and

aggression. The observation and follow-up of the patients is reflected in the IC, as well as the prescribed drug therapy. The courses are informative about the mental state, intake of food, fluids, medications, vital signs and consultations with specialists. The condition of the patients was monitored with at least two courses per week.

A commission for supervision over the implementation of the temporary physical restraint measures has been established at the SPH - Byala, consisting of five members, one of whom is a representative of the Regional Health Inspectorate - Ruse, a person with legal education, a church trustee and representatives of the medical institution which carries out periodic inspections on the implementation of the measures. There are no omissions and violations in the temporary physical restraint of patients.

A book is kept in the medical institution according to Ordinance № 1 of June 28, 2005 on the procedure for application of measures for temporary physical restraint in patients with established mental disorders and in the Sheet for application of measures for temporary physical restraint. The ordinance is observed in the application of temporary physical restraint of patients, the duration does not exceed two hours. At the time of the inspection, the medical institution had belts with a magnetic locking mechanism.

In connection with the established epidemiological situation in the country since March 2020, the medical institution has taken measures to prevent and protect in the event of cases of COVID-19. Due to the presence of sick patients with COVID-19, the second male ward was transformed into a ward for treatment and monitoring of patients with COVID-19, and uninfected patients from the ward were redirected to the other three wards.

The following actions were taken at the State Psychiatric Hospital - Byala in connection with the findings of the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment:

1. Following an examination of a finding by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) for beatings by restraint, using a black plastic tube as the item described above was found by the delegation in the room close to the staff room was inspected and it was found that “the cleaning appliances are two-piece, detachable, consisting of a basic cleaning element + a handle. The handles used are of different lengths and a nozzle with the same profile compatible for different cleaning appliances. They are made of brittle, fragile material, which becomes unusable with minimal pressure. No other devices, uncharacteristic and without direct reassignment, were found, and

the above-mentioned devices were not used to mistreat patients and are now stored in a warehouse outside the wards.

2. New kits for immobilization and fixation on the principle of magnetic restraints were purchased.

3. In order to improve the living conditions in the clinical wards, the following have been partially renovated: third men's ward, fourth men's ward, second men's ward. 20 beds have been purchased, and by the end of 2021 additional beds, bedside tables and wardrobes will be purchased in stages in exchange for the depreciated ones available.

4. A second male ward was transformed into a ward for the treatment and monitoring of patients with COVID-19, as the uninfected patients from the ward being reassigned to the other three wards. The last patients in contact with persons with proven COVID-19 passed through the second men's ward in December 2020.

5. From January 4, 2021 the rhythm of work is restored, there are no patients with confirmed case and / or case of contact patients of persons with proven COVID-19 on the territory of SPH - Byala. Some of the patients were reassigned from the three men's wards to the second men's ward and the necessary spatial provision of the patients in SPH - Byala of 6.5 sq.m per bed was restored.

6. The medical establishment is equipped with the necessary protective equipment and disinfectants. Staff work with masks, safety helmets and gloves. There are no hand sanitizers for patients in the corridors of the wards due to the patient's attempt to use them for drinking purposes. Hand disinfectants are provided by the on-duty staff in the ward.

It is clear from the above that decisive measures have been taken to improve the situation in these SPHs in the context of the CPT's recommendations.