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**Preliminary observations made by the delegation
of the European Committee for the Prevention
of Torture and Inhuman or Degrading Treatment
or Punishment (CPT) which visited Montenegro**

from 19 to 27 November 2025

and

Response of the authorities of Montenegro

The authorities of Montenegro have authorised the publication of these preliminary observations and of their response.

Strasbourg, 25 February 2026

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Preliminary Observations

22 December 2025

The aim of this periodic visit was to examine the treatment and conditions of detention of persons deprived of their liberty by a public authority in Montenegro. To this end, the CPT's delegation visited several prisons, juvenile detention and educational-correctional establishments, psychiatric facilities and social welfare establishments, as well as two police stations. The visit was also an opportunity to review the measures taken by the Montenegrin authorities to implement the Committee's recommendations made after its previous visits in 2017 and 2022. See Appendix for the list of establishments visited.

Co-operation with the Montenegrin authorities was excellent, both prior to and during the visit. The delegation enjoyed rapid access to all the places it wished to visit, was provided with the information necessary for carrying out its task and was able to speak in private with persons deprived of their liberty. The delegation would like to express its appreciation for the assistance provided by the CPT's liaison officer, Ms Dragana Kandić.

Co-operation, however, also extends to implementation of the Committee's recommendations, as well as the political will to provide investment for genuine change. The delegation has noted some good initiatives underway including the near completion of the new Prison Hospital (for forensic patients), the recent refurbishments and new construction work at the Spuž prison complex. Nevertheless, there remain various problems that continue to hamper the prison system. The delegation considers that too many of the Committee's previous recommendations still remain valid in 2025. Indeed, the treatment and conditions for prisoners and patients have not substantially changed since 2017 and, in some respects, have even deteriorated. This is notably the case for Bijelo Polje Prison, Podgorica Remand Prison, and the social welfare institutions and psychiatric facilities visited (in particular, Dobrota Special Psychiatric Hospital and Ljubović Children's Centre).

Prison establishments

(i) Preliminary remarks

The remand system in Montenegro has been the subject of longstanding concern to the Committee, and the CPT held high-level discussions on this subject in February 2024 with the Deputy Prime Minister. It identified the specific changes that were required for implementation. In its 2025 visit to Montenegro, the delegation found the treatment of remand prisoners and their conditions of detention have, in many respects, deteriorated since the CPT's 2022 ad hoc visit.

The situation has been exacerbated by the sheer number of remand prisoners, which has approximately doubled since the Committee's last visit and now represents 56% of the entire Montenegrin prison population. These numbers are putting pressure on the entire prison system.

Overcrowding is at a record high in Montenegro's two remand prisons. More spaces for remand prisoners have been found in the *Spuž Prison for Short-Sentences*, and more beds have been added in the Remand Prison, piling new beds on top of existing bunk beds, even to the extent of creating dangerous three-, and occasionally four-, storey bunks, with no ladders or sides. In several cells, there was a mere 2.5 m² of living space per prisoner.

The situation is exacerbated by the lengthy durations of time that persons spend in remand detention in Montenegro. The delegation met persons held on remand for several years and some as long as six years and a few for even longer. Indeed, some of the same people with whom the CPT spoke in 2022 were still in remand more than three years later.

In practice, despite the national law regulating the maximum timeframes, multiple extensions and delays until the final court decision mean that hundreds of people are held on remand in prison for lengthy periods. Too few persons are on alternatives to detention; judicial use of remand appeared to be the norm.

The situation is further compounded by the appalling conditions of detention in the remand prisons and the non-existent regime of activities, education and sport for persons held in remand and the fact that remand prisoners are not provided with the core elements for a dignified existence without having to purchase them (see below).

The delegation also notes the recent collective hunger strike involving over 100 remand prisoners in the Remand Prison, due in part, to excessive lengths of remand detention and the restriction of rights and some other connected reasons.

To redress this state of affairs, requires co-ordinated efforts with multiple stakeholders, and in particular, the judiciary. The current initiatives of finding or building extra prison space may provide temporary relief, but it is not a sustainable long-term solution. Wholesale change of the remand system, in all its aspects, is needed to create decent conditions and treatment for persons held on remand and this includes increased and regular dialogue with the judiciary; concrete legislative reform; and greater financial investment is required to be put into improving the treatment of, and conditions for, remand prisoners.

(ii) Findings

The vast majority of persons interviewed by the delegation, in the four prisons visited, said that they had been treated correctly by prison staff. Nevertheless, the delegation did still receive some allegations of physical ill-treatment by prison staff. Most of these were in the *Remand Prison of Spuž* and in *Bijelo Polje Prison*, but also from the *Spuž Long-Term Prison*. These allegations involved beatings by prison staff in areas not covered by CCTV, such as isolation cells. A couple of allegations have been corroborated by consistent injuries in medical records examined or in the other records.

One allegation, which involved two *Bijelo Polje Prison* staff members' beating a prisoner, was undergoing investigation at the time of the visit and had been sent to prosecutors; however, the staff involved have not been formally suspended pending the outcome of the investigation. While it is clear that the majority of staff do not mistreat prisoners, there are several staff that are doing so, and more vigilance is needed on this by prison management.

Inter-prisoner violence does happen fairly regularly but is less frequent than seen by the Committee in 2022 and it appeared to be generally managed adequately at all four prisons visited. This is positive. Equally, the recorded use of means of force or coercion has decreased at all four prisons since the last CPT visits, as has the use of fixation. This is another positive development.

As regards material living conditions, at *Spuž Long-Sentences Prison* some steps have been undertaken to improve the conditions and all the blocks have been refurbished recently and new CCTV installed – but there remains an issue with limited access to natural light and plastic window coverings.

However, many of the detention areas, especially in *Bijelo Polje Prison* (closed and remand sections) still remain sub-standard: there is poor hygiene, deficient sanitation, mouldy and humid cells, flooring falling apart and walls crumbling, open light fixtures and severely overcrowded cells (see above).

The *Spuž Remand Prison* has slightly better conditions, but overall, they were still poor – especially in the Juvenile Unit, where 16 and 17 years olds live for 23 hours per day in cells with torn mattresses dangerous ligature points and in inappropriate, squalid and unacceptable conditions (see below). Equally, throughout the four prisons visited, smokers have to share accommodation with non-smokers (including a five-month pregnant non-smoking woman in Spuž Prison).

Some work is on offer for **sentenced prisoners** at the *Spuž Long-Sentences Prison* and the *Semi-Open Unit at Bijelo Polje Prison*. Again, this is positive. However, only a small portion of the prisoners have access to (vocational) work (some 20-30 a day) - others including those held in the specific sections, such as in high security, juvenile or women's units are not involved. **Remand prisoners** held in *Podgorica* and *Bijelo Polje*, had no access to any structured activities, education or work.

They remained locked in their cells for between 22 and 23 hours a day. The situation was particularly dire for those persons held in remand for several years. The delegation underlined that this is unacceptable and needs to be changed.

Equally, persons in remand detention are still not systematically provided with the basics to keep themselves clean, a fundamental requirement for a dignified existence. Further, the general lack of work and activities means that indigent prisoners (notably foreign nationals) had to borrow and beg other prisoners for clothes, pillows, toothbrushes and even for toilet paper.

Further, contact with the outside world remains problematic, especially for those persons in remand in *Podgorica Remand and Bijelo Polje Prisons*. Contact remains entirely dependent on the courts' authorisation, rather than existing as a right for such detainees: this is a relic of the past. Indeed, the delegation met several foreign nationals who had not had *any* contact with their families since arriving at the prison several months before – and one of these was a boy of 17 years old. The delegation stresses that contact with the outside world should not be denied unless there are individualised reasons for the purposes of investigation, and even then, some contact should be allowed.

As for the children sentenced to juvenile imprisonment or held on educational-correctional measures at *Spuz Remand Prison* and *Long-Sentences Prison*, the delegation found that there was no tailored treatment, activities nor specialised education provided for them; children were locked up for 23 hours per day. Moreover, the material conditions in the juvenile remand unit were the worst in the entire Spuz prison complex, located far from the main staff hub, with clear ligatures points in the cells without call bells (which consequently required them to bang loudly on their locked cell doors to attract the attention of prison staff). Overall, the delegation considered that such a prison environment is totally inappropriate for children, especially those supposedly serving correctional-educational measures.

Overall, the living conditions at *Bijelo Polje* and *Spuz Remand Prisons* remain so poor that the delegation can only consider that exposure to these, in combination with the lengths of time (often years), the 23 hours lock-ups and the poor regime, may well amount to inhuman and degrading treatment.

In view of the very poor conditions in which persons on remand are being held, as outlined above, the delegation invokes **Article 8, paragraph 5, of the CPT's Convention and requests that immediate action be taken to ensure that:**

- **immediate safety measures be taken to ensure that any person who is required to sleep on the third level of the bunk bed is provided with sufficient safety measures from falling (i.e. a barrier or similar);**
- **the quadruple bunks (fourth level) be removed permanently;**
- **the pregnant non-smoking woman in Spuz Prison is not placed in a room with prisoners who smoke;**
- **all persons on remand are systematically provided with basic hygiene kits (including sanitary pads) on arrival and, where necessary for indigent or foreign national persons, regularly thereafter; and**
- **the dangerous and poor material conditions for juveniles held in Podgorica Remand Prison be improved and that all juveniles are given immediate and regular contact with their families.**

In general, there was reasonable access to medical care for prisoners, including emergency care at the nearby hospitals when needed. The vast majority of newly arrived prisoners are seen by a doctor within 24 hours although the screening performed is still too cursory. As concerns healthcare staffing, while access to nurses was adequate, there was a lack of doctors and no dentist at *Bijelo Polje*

Prison. At *Spuž Prison* complex, the healthcare situation was better, and there is now a modern healthcare clinic building and good medical equipment, whereas some deficiencies remained regarding medical equipment at *Bijelo Polje Prison*. Equally, the delegation found that there was still no routine screening for blood-borne viruses or tuberculosis at the prisons visited, although a start was made at *Spuž Prison* where a recent project offered screening for Hepatitis C to the long-term sentenced prisoners

The documentation of injuries in all the prisons visited had somewhat improved, with generally sufficient descriptions and a positive practice of photographing every injury, with the photos saved in the person's medical file. The delegation found that medical confidentiality was often not respected, with prison staff present in the clinic room or able to hear medical consultations with prisoners. Moreover, the delegation was concerned by the high rate of prescribing of benzodiazepine medication in both prisons, which is problematic given its dependency-forming nature.

Establishments under the Ministry of Social Welfare, Family Care and Demography

a. Ljubović Centre – Court and Social welfare children

There were four categories of children held at *Ljubović Centre for Children and Juveniles* at the time of the delegation's visit: children held on remand, correctional-educational measures, for social welfare purposes and on protection (child victims of trafficking and exploitation). Staff appeared caring, respectful and skilled in de-escalation methods, with generally positive relationships with the children. No allegations of physical ill-treatment were received by the delegation.

Another positive aspect of the *Ljubović Centre* was the systematic development of individual plans jointly with the child and their family, which are reviewed every three months and amended as needed. Psychological and professional support was provided to the children. Nevertheless, only four (of the ten) juveniles held there were attending school regularly and more regular structured activities and organised sport were needed.

Material conditions varied. Some parts of the building were gloomy and outdated, with, damaged doors, exposed light fixtures and broken sockets and were sparsely decorated, including the bedrooms. Other parts were in better condition and were well decorated and cosy.

Further, the security measure of "time-out" for children who present a risk of harm to themselves or others was deficient in a number of aspects. First, as regards the material conditions, the isolation cell used was a small, tiled, unheated, windowless room, with nothing in it except a CCTV camera. It had hard, unsafe surfaces, which, at the time of the delegation's visit, had a smattering of blood and graffiti. The time-out procedure was meant to be used as a last resort measure and for a maximum of ten to fifteen minutes. Recording procedures (CCTV footage kept and times and reasons documented) were adequate, however, these showed that, in practice, some children had been regularly locked in the time-out cell for longer than the maximum times permitted by law, and instead for up to two hours (and occasionally several times a day). Moreover, injured children had been locked inside for several hours and there had been recorded incidents of self-harm that had taken place, going unnoticed by staff and with inadequate monitoring. **In this regard, the delegation invokes Article 8, paragraph 5, of the CPT's Convention and requests that immediate action be taken to ensure that the "time-out room" at Ljubović is taken out of service permanently.** Equally, the delegation had concerns with the disciplinary procedures, where the children were locked in their rooms for several days at a time; this issue will be addressed in more detail in the report.

b. Komanski Most Institution for persons with disabilities

At the *Komanski Most Institution*, the delegation found the atmosphere relaxed and staff displayed a caring attitude towards residents. Living conditions have improved since the last visit of the Committee in 2017 in terms of level hygiene, state of repair of rooms and communal facilities.

The level of rehabilitative and therapeutic activities offered to residents appeared to be adequate but could benefit from additional occupational therapy. That said, the delegation retains concerns in relation to the understaffing notably of carers (18 for 115 residents) especially given that five of them are going to retire soon. There is also a need for more structured system of training of staff (notably carers) on issues such as manual control of agitated residents and de-escalation techniques which appeared to be lacking as well as a strategy to prevent staff burnout. The delegation also reiterates that measures, including incentive-based initiatives need to be taken to successfully attract and recruit a full-time general practitioner as well as a psychiatrist. Several competitions have gone unattended.

The management of agitated residents was also a focus of the delegation and in this respect, in addition to the need to develop a protocol on the use of the so-called “relax padded room”, the delegation is particularly concerned by the case of Y, a young adult resident suffering from a severe form of autism spectrum disorder whose level of aggressiveness and self-harming behaviour poses a serious challenge for staff. The recent provision of a padded room for his solitary accommodation is not a sustainable solution. The delegation is of the opinion that his transfer to a specialised facility for the treatment of autistic patients would be the most appropriate course of action, as the staff at Komanski Most Institution are not adequately trained or equipped to deal with cases of this nature. **In this regard, the delegation, invokes Article 8, paragraph 5 of its Convention, and requests that the case of Y be subject to an independent judicial review in view of his possible transfer to a specialised facility.**

The report will also address the need to strengthen legal safeguards for residents in such institutions and the periodic review of their legal capacity. Finally, the delegation also notes that the development of community-based group houses or de-institutionalisation has not yet commenced.

c. Children’s Home Mladost in Bijela

At the *Dom Mladost in Bijela*, the delegation also observed a positive attitude on the part of the staff towards children, and the living conditions in the apartments of the relevant educational group were of a good standard in terms of family-oriented design, decoration, equipment and personalisation of spaces. The level of activities and care on offer was adequate for the target population. The delegation is of the opinion that the staff component, notably educators, need to be reinforced. A structured training programme, induction and continuous professional development should be offered to them, notably in dealing with the most challenging children, such as those belonging to the V Educational Group who are suffering from autism and intellectual disabilities and are treated with antipsychotic medication. The delegation is particularly concerned by use of a padded time-out room without a specific protocol and recording of the same.

Establishments under the Ministry of Health

In the course of the visit the delegation visited *Dobrota Special Psychiatric Hospital* and the *psychiatric ward of Nikšić Hospital*.

At the *Dobrota Special Psychiatric Hospital*, the delegation observed in principle calm and respectful relations between patients and staff. A couple of allegations of excessive use of force were received, notably in relation to the application of mechanical fixation and can be attributed to poor training of staff in manual control techniques of agitated patients.

Despite some renovations, living conditions in the wards were poor and austere, particularly in the male acute and chronic wards. The problem of water infiltrating the roof of the main building was evident during the visit and is a major concern. The treatment and care of patients has improved since 2017, with additional occupational therapy being provided following the recruitment of additional staff. However, the delegation also observed numerous cases of patients for whom there was an overreliance on pharmacotherapy, particularly benzodiazepines and antipsychotic polypharmacy.

It is evident that there are multiple systemic issues at *Dobrota Special Psychiatric Hospital* that necessitate a thorough and coordinated approach at the ministerial level. The issue of overcrowding has been a persistent concern for the CPT since 2017 in view of its detrimental effect on all aspects of life at the establishment.

- Firstly, there is clear evidence of patients regularly having to sleep on mattresses on the floor, as there are insufficient beds for everyone.
- Secondly, in an attempt to address the issue of limited space, medical practitioners are discharging forensic patients on 'extended weekends', who may have not yet fully recovered.
- Thirdly, the management has been obliged to distribute a significant proportion of the 110 forensic patients across multiple wards, as there are only 21 designated beds available. This signifies that the regimes of patients belonging to different categories are being amalgamated, with voluntary and social care patients being accommodated alongside forensic patients for extended periods.

Furthermore, the number of medical technicians on duty in each ward is limited to one or two (for up to 47 patients), which raises concerns about the safety of all patients. Finally, it is a matter of concern for the delegation that Dobrota Special Psychiatric Hospital still receives juveniles despite the opening of a children psychiatric ward of the Clinical Centre of Montenegro in Podgorica.

Other issues of major concern for the delegation which require immediate action refer to the following:

- The lack of in cell sanitation and the presence of ligature points (such as horizontal metal bars on the window) in the isolation room on the Acute Male Ward 7 in which a patient recently committed suicide.
- The inappropriate placement of a person with moderate intellectual disability and epilepsy on the Chronic Male Ward No. 2 who in light of his aggressive behaviour and frequent assaults on other patients is frequently subject to mechanical and chemical restraint by prescription of the ward-based psychiatrist.
- The indefinite prolonged seclusion and “slopping out” in respect of a female patient with intellectual disability in an isolation room without a sanitary facility of the Chronic Female Ward.
- The inappropriate placement and lack of availability of oxygen in respect of a physically unwell male patient with pneumonia on the Addiction Ward, who has since been transferred to a general hospital based on our immediate observation.

The delegation will develop more concrete points in the report but issues of note concern the practice of mechanical restraint of patients in front of other patients, the lack of physical, procedural and relational security compatible with safe forensic care, the absence of standardised risk assessment processes (e.g. Structured Professional Judgement) in forensic care and the use of restrictive practices applied in respect of voluntary patients – isolation, fixation and chemical restraint.

* * *

This concludes the delegation's preliminary observations, which, as always, are made in a constructive spirit. The visit report, which will most likely be transmitted towards the end of July 2026, will enter into greater detail and also cover certain issues not addressed in this text. Any information and comments provided by the Montenegrin authorities in response to these preliminary observations will be taken into account when the visit report is drawn up. As regards the **three** immediate observations set out in the text above, the delegation would like to receive confirmation within a period of one month that they have been implemented.

Appendix: Establishments visited

Prison establishments

Podgorica Remand Prison in Spuž

Prison for Long Sentences in Spuž

Prison for Short Sentences in Spuž

Bjelo Polje Prison (remand, closed and semi-open units)

Police establishments

Podgorica headquarters Police Station

Kotor Police Station

Psychiatric establishments

Nikšić General Hospital, Psychiatric Ward

Dobrota Special Psychiatric Hospital

Social welfare establishments

Children's Home Mladost in Bjela

Ljubović Centre

Komanski Most Institution for persons with disabilities

Responses/comments by Montenegro on

Preliminary observations

With reference to the letter CPT/HC/2025/133 dated December 22, 2025, we use this opportunity to provide the responses/comments of the competent authorities of Montenegro to the urgent recommendations and some of the Committee's preliminary observations related to the Article 8, paragraph 5 of the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment.

Please find below the overview of the responses of the Ministry of Social Welfare, Family Care and Demography and the Administration for the Execution of Criminal Sanctions:

- **Prison Establishments –**

Urgent safety measures to ensure that every person sleeping on the third-level bed is secured with additional measures to prevent falling (protective rails or similar):

The placement of detainees on the third-level bed is applied exclusively as a necessary measure, and only in situations where there are no other available alternatives in terms of accommodation capacity. To improve the safety of persons temporarily placed on the third-level bed, measures are being implemented, including the installation of protective rails on the beds, as well as the installation of auxiliary rungs and ladders (staircases) that facilitate safer and easier climbing and descending. Currently, 28 (out of a possible 68) protective rails have been installed on the third-level beds, and since activities are being actively undertaken to ensure the installation of additional protective rails and ladders, the full implementation of this measure is expected soon. These measures aim to reduce the risk of potential falls and injuries, ensuring a safer stay for detainees.

Immediate removal of beds that are on four levels: Beds on the fourth level have been completely removed, and their use is explicitly prohibited. The relevant services conduct daily room inspections to check the arrangement and organization of accommodation. If any irregularities are observed, including the potential unauthorized rearrangement of beds by detainees (whether pre-trial detainees or convicts), such beds are immediately removed. Reports from internal controls in the Administration for the Execution of Criminal Sanctions confirm that there are no beds on the fourth level at the Podgorica Detention Center, and this type of supervision will continue to be implemented regularly.

Ensuring that a pregnant detainee, who is a non-smoker, in the Spuž Prison is not placed in a room with smokers:

The detainee X, who does not consume tobacco products and was previously housed in room number 6 in the female section of the Podgorica Detention Center, together with detainees who smoke, has been transferred to room number 3. In this room, she resides with two other detainees, one of whom is also a non-smoker, while the other only uses tobacco products during outdoor time in the designated walking area. Cigarettes are provided to this detainee only during the designated walking time, thus completely avoiding exposure of the non-smoker/pregnant detainee to tobacco smoke.

Providing hygiene packages upon arrival for all persons in the Podgorica Detention Center and, when necessary, for foreign nationals who are materially deprived, and regularly during their stay:

All detainees are provided with basic personal hygiene products (soap, toothbrush and toothpaste, toilet paper, and for women, sanitary products) upon their admission to the detention center, unless detainees request to purchase these items from the prison store, which offers a broader range of products. Hygiene packages are also provided during the detainee's stay, based on applicable regulations and in accordance with the individual needs of the detainees. For detainees who lack financial means, whether domestic or foreign nationals, and who do not have personal hygiene items, the following is provided: soap, toothbrush and toothpaste, toilet paper, plastic cup, shampoo, comb, nail clippers, razor, and shaving foam, and for female detainees, sanitary products and feminine hygiene preparations. These items are provided to this category of detainees on a monthly basis, with some items being provided more frequently due to higher consumption. Records are kept of all hygiene package distributions to detainees.

Improving the modest and potentially dangerous conditions for minors in the Podgorica Detention Center and ensuring all minors have immediate and regular contact with their families:

Regarding the improvement of material conditions for minors, all worn-out mattresses have been replaced with new ones in the room where they are housed. Efforts are underway to implement measures to address the issue of minors, including the installation of a sound signal in their room to alert staff in case of need. Minor detainees in the Podgorica Detention Center are provided with regular contact with their families, subject to prior consent and approval from the competent court. Additionally, these minors have access to psychological counseling, both within the Administration for the Execution of Criminal Sanctions and through referral to public health institutions for psychological support, with other preventive and protective measures being taken during their detention. Regarding the rooms designated for the accommodation of minors, which were assessed as inadequate and potentially dangerous to security, their reconstruction is planned for this year. The reconstruction will fully improve the conditions of stay, tailored to the specific needs of this category of detainees, while also ensuring an appropriate level of security.

- **Establishments under the Ministry of Social Welfare, Family Care and Demography**

Public Institution Institute „Komanski most” regarding possible transfer of the beneficiary Y to a specialized institution:

In accordance with the Law on Social and Child Protection, which prescribes the residential care service, this service is used on the basis of a decision of the competent Centre for Social Work, and the said law does not provide for the possibility of judicial review. In addition, it is important to emphasize that there is no specialized institution for the beneficiary Y, either in the country or in the region. The Public Institution Institute „Komanski most” Podgorica is currently the only licensed institution in Montenegro for providing residential care services to adults with disabilities and autism spectrum disorders, such as those of the beneficiary Y.

With regard to the observations and recommendations of the Committee, we note that the beneficiary Y was not placed in the institution on the basis of a court decision, nor on the basis of a deprivation of liberty measure, as this would not be in accordance with the applicable legislation, but rather on the basis of a decision of the Centre for Social Work, adopted in accordance with the Law on Social and Child Protection, and upon the request of the legal representative – the parent whose parental rights were extended on the basis of a court decision.

In accordance with the applicable legal framework, a placement decision cannot be terminated by a court decision. Pursuant to Article 70 of the Law on Social and Child Protection, placement in an institution may not end before the Centre for Social Work secures conditions for placement in another institution, family-based care, or another form of social and child protection.

Y was born in 2001 in Nikšić and has been diagnosed with autism. By the decision of the Centre for Social Work for the municipalities of Nikšić, Plužine, and Šavnik dated 23 May 2019, the beneficiary was placed in the social and child protection institution Public Institution Institute „Komanski most” Podgorica, which provides residential care services to adults with disabilities and autism spectrum disorders. The placement was carried out, in accordance with the applicable legislation, at the request and with the consent of the parents, in a situation where it was not possible to ensure adequate protection for the beneficiary through remaining in the family or through community-based support services, and it was therefore assessed as the most appropriate solution and in his best interest.

The beneficiary Y engaged in self-injurious behaviour on several occasions during the years spent at the Institute, and the Institute, in cooperation with the Centre for Social Work Nikšić and the Ministry of Social Welfare, Family Care and Demography implemented a series of activities aimed at improving the conditions of accommodation and work with the beneficiary. In order to ensure the beneficiary's safety, the walls of the room were padded with protective mats in June 2025, and the conditions have been improved.

With the aim of strengthening the competencies of professional staff, expert associates, and collaborators, and of acquiring contemporary practices in working with persons with autism and intellectual disabilities that lead to significant and positive behavioural changes, in October 2025 the Ministry of Social Welfare, Family Care and Demography in cooperation with UNDP, implemented a training entitled „*Applied Behaviour Analysis (ABA) as Support for Persons with Autism and Intellectual Disabilities*”, within a project financed through the Global Disability Fund. The training was delivered by an expert from Denmark with global experience and the highest level of certification for the application, training, and supervision of ABA. The expert also held discussions with professional staff and parents, provided recommendations for working with the beneficiary, and proposed amendments to the Individual Care Plan. Activities under the new Individual Care Plan will be implemented with her mentoring support.

During January 2026, the Centre for Social Work Nikšić initiated and conducted a reassessment of the case of beneficiary Y as part of the regular monitoring of the implementation of the Individual Service Plan and the evaluation of achieved goals.

As part of the reassessment, an evaluation of the implementation of the existing Individual Service Plan was carried out, including support, protection, and safety measures, as well as an assessment of the effects of previously undertaken measures. Based on the evaluation, the need for continued improvement and further adaptation of the residential care service to the specific needs of the beneficiary was identified, and guidelines for amendments and supplements to the Individual Service Plan were defined. The Individual Service Plan was updated in line with the established findings, with the participation of all relevant stakeholders, in particular the beneficiary's legal representative and representatives of the institution in which the beneficiary is placed. On the basis of this Individual Service Plan, an Individual Work Plan for the following period was developed, outlining further activities aimed at improving the beneficiary's stay.

The conducted reassessment confirms that the placement and protection of beneficiary Y are subject to regular, structured, and legally prescribed professional review, and that the applied measures are continuously assessed against the criteria of necessity, proportionality, and the best interests of the beneficiary, in accordance with the applicable national legislation.

The parents emphasized that the beneficiary has responded well to the changes that occurred in the previous period, and that padding of the room has significantly reduced the risk of injuries. It has also been ensured that the beneficiary, under supervision, may leave the room in accordance with physiological needs. We particularly emphasize that since the beginning of the

placement, the parents have visited the beneficiary three times per week, and that the brother and sister occasionally spend time with him outside the institution, including stays at the family home in Nikšić. In this way, a strong emotional bond and a sense of belonging to the family have been preserved, which is of exceptional importance for the beneficiary.

We note that the parents of Y submitted a statement to the Centre for Social Work Nikšić on 14 January 2026, in which they state that their addressing of the European Committee for the Prevention of Torture (CPT), the Ombudsman, and the Ministry of Social Welfare, Family Care and Demography at the beginning of April 2025 was motivated exclusively by concern for the safety, health, and well-being of their child, particularly bearing in mind his non-verbal status, diagnosis from the autism spectrum, and complete dependence on his environment and routine, with the aim of improving conditions, and not with the aim of transfer to another institution. They further state that certain measures undertaken by the institution, including padding of the room walls and changes in daily functioning, have led to an improvement in Y's quality of life.

The parents emphasize that it is in Y's best interest to remain in the current institution and that transfer to a specialized institution would not be in his best interest, particularly given that there is no specialized institution for persons with autism in Montenegro, as well as the fact that such a transfer would disrupt his stable routine and regular contact with his parents and brother and sister, which are crucial for his well-being.

Considering all of the above, we consider that numerous and continuous activities have been undertaken with the aim of creating a safer and more secure environment for the beneficiary, as well as preserving and improving his health condition.

We believe that, at present, the best option for beneficiary Y is placement in the Institute „Komanski most,” and that efforts should continue to improve the conditions of stay and treatment through stability, predictability, and the joint work of all involved stakeholders, with the support of experts in working with persons with autism.

Observations of the CPT concerning the Institute “Komanski most”

In December 2025, a new Rulebook on Internal Organization and Systematization of Job Positions of the Public Institution Institute „Komanski most” was adopted, increasing the number of staff positions by 13. The number of nurses and caregivers was increased by four, the number of professional staff by one, and the number of occupational therapists by two. Within the Health Care Service, the position of neuropsychiatrist/psychiatrist was added, due to the needs of the institution, as well as the recommendations of all relevant institutions.

In 2025, one training for employees on the application of de-escalation techniques was conducted, and a larger number of trainings is planned for 2026 with the aim of improving staff competencies. The Ministry of Social Welfare, Family Care and Demography (MSSD) will organize training for employees of the Institute „Komanski most” on manual control of agitated residents and de-escalation techniques.

In 2026, trainings on the prevention of staff burnout will also be implemented, and through the Work Plan for the following year, a strategy for this area will be defined.

In 2026, the Institute „Komanski most” will actively work on the recruitment of a general practitioner, whom it was unable to employ in 2025, as well as a neuropsychiatrist planned under the Rulebook on Systematization.

Efforts will also be made to improve the Protocol on the use of the „relax padded room”. In 2026, activities will also be undertaken to initiate procedures for the review of legal capacity.

We note that in December 2025, the Institute „Komanski most” adopted a new Institutional Transformation Plan for the period 2026–2029, which envisages the provision of community-based services such as supported housing, day care, home assistance, counselling, and respite care. It is planned that in 2026 the institution will obtain a license to provide the supported housing service.

Center „Ljubović” - permanent exclusion of the existence of a room for temporary isolation (“time out”) for children who pose a risk of injuring themselves or others

Based on the preliminary observations of The European Committee for the Prevention of Torture (CPT) presented by the Committee’s representatives to the authorities of Montenegro at a high-level closing meeting held in Podgorica on 27 November 2025, with regard to the Ljubović Centre for Children and Juveniles, particular attention was drawn to the use of the “time-out” room.

According to the CPT report, the security measure involving the use of the “time-out” room had several shortcomings. In terms of material conditions, the isolation room was small, tiled, without heating or windows, and contained only a CCTV camera. It had hard and unsafe surfaces which, at the time of the delegation’s visit, were partially covered with traces of blood and graffiti. Although the use of the “time-out” room was meant as a measure of last resort, limited to a maximum duration of ten to fifteen minutes, in practice children were sometimes locked in the room for longer than the prescribed duration, and several incidents of self-harm were recorded. This led to an urgent request for immediate measures to be taken to ensure that the “time-out” room at the Ljubović Centre was permanently withdrawn from use.

Following the request for the urgent implementation of measures to ensure the permanent discontinuation of the use of a temporary isolation (“time-out”) room for children who present a risk of harming themselves or others, the “time-out” room at the Ljubović Centre was immediately taken out of use until further notice.

Provided that conditions are met in the future for its reconstruction, the use of “time-out” room could be reconsidered in the future, on condition that it meets the required material and technical standards and is used for short periods only.

Children's Home „Mladost“ in Bijela

The lack of human resources, especially among employees working directly with children (educators, professional staff, and medical personnel), is a problem we have been facing for an extended period, and in cooperation with the relevant ministry, we continuously take measures to mitigate it.

Activities are also being undertaken to professionally strengthen employed educators, professional staff, assistants, and care workers, and in the time ahead, we plan to intensify these activities in cooperation with the Institute for Social and Child Protection.

We would like to inform you that adaptation work is currently underway in the sensory room, during which video surveillance will be installed, and simultaneously, a protocol for its use is being developed.

With the implementation of these activities, the recommendations of the EC delegation will be fully carried out.