



REPUBLIC OF POLAND  
MINISTRY OF FOREIGN AFFAIRS  
REPRESENTATIVE OF POLAND  
TO 1078 (DH) MEETING  
OF MINISTERS' DEPUTIES  
BPOM 243/1078/03/2010



Warsaw, 26 February 2010

**Ms. Genevieve Mayer**  
Head of the Department  
for Execution of Judgments of  
the European Court of Human Rights  
Council of Europe  
Strasbourg

**Wenerski v. Poland (Application no. 44369/02);**  
**Musiał v. Poland (Application no. 28300/06);**  
**Kaprykowski v. Poland (Application no. 23052/05)**

The Government would like to submit the following Action Plan and Action Report in connection with the cases of *Wenerski*, *Musiał*, *Kaprykowski v. Poland* as well as information concerning individual situation of Mr Wenerski. The Government would like to reserve the right to make changes in Action Plan during its implementation.

Enc.

*Yours faithfully,*

Jakub Wołosiewicz  
Government Agent

## **ACTION REPORT**

### **Individual measures**

According to the information provided by the Łódź Remand Centre, where currently is incarcerated Mr. Wenerski, it unequivocally appears that the state of his right eye socket is stable and does not required further ophthalmologic care.

In fact the applicant the applicant insists on a surgery which is not of therapeutic nature and would merely serve for aesthetic purposes (plastic surgery). In any event there are no contraindications of medical nature to keep Mr. Wenerski in a prison. Moreover, the authorities of the Remand Centre are undertaking actions allowing him to perform the requested surgery in a specialized medical institution. Within the short time an ophthalmology consultation is to be set for Mr. Wenerski in the plastic surgery clinic of the Łódź Medical University Hospital in order to assess the prospect of this surgery and, if possible, to determine its date and possibility to conduct it under escort.

In case there will be no possibility to conduct the operation under escort, the applicant has a possibility, under the Polish law, to request a short break in the enforcement of his sentence on reason of his state of health.

### **General measures**

1. The penitentiary system permanently conducts activities regarding realization of educational and medical programs of the National Health Program, i.e. programs concerning limitation of consequences of smoking in Poland, prevention and resolving of alcohol problems, counteraction of drug addiction, prevention of HIV infection and care of people with AIDS, health policy of the Ministry of Health "Antiretroviral therapy of people living with HIV in Poland". Realization of these programs allows to secure the health needs of prisoners on the same level to all citizens of the State
2. The Penitentiary Healthcare is also a participant of the Northern Dimension Partnership in Public Health and Social Well-being (NDPHS), which treats in a particular way the healthcare of the prisoners in light of public healthcare problems, especially concerning infectious diseases.

3. Until 2009 there were conducted 5 programs of methadone treatment in 13 penitentiary units. In 2009 the above program was introduced in two more units. On 15 February 2010 such program was launched in 5 units in the Bydgoszcz region. At present the program is implemented in the units of Gdańsk and Szczecin regions. In the coming years it is planned to introduce substitution therapy for further 30 penitentiary units. The above activities conducted within the penitentiary system result with limitation of negative health and social consequences connected with taking drugs in accordance with the law of 29 July 2005 and regulation of the Minister of Justice of 21 December 2006 on detailed conditions and forms of procedures in healthcare, rehabilitation and reintegration with reference to addicted people placed in units of Penitentiary Service. In the penitentiary system there are 16 therapeutic wards for addicts of narcotics and psychotropic drugs.
4. The program concerning limitation of consequences of smoking in Poland in the penitentiary system is conducted permanently. Within the framework of the above program there are conducted educational programs for the staff and prisoners. In 2009 the number of persons detained in penitentiary units covered by this educational program amounted to 83 834.
5. The Program on Prevention of HIV Infections and Care of Persons Living with HIV and with AIDS as well as the Health policy of the Ministry of Health "Antiretroviral therapy of people living with HIV in Poland" are connected with monitoring of HIV infections and incidence of AIDS disease among prisoners in penitentiary and remand centers. Moreover the above program include uniform procedures of introduction and continuation of antiretroviral therapy in the penitentiary system. In 2009 178 persons were covered by the antiretroviral therapy.
6. The Program for Prevention and Resolving of Alcohol Problems is conducted within the penitentiary system on a continuous basis. Since 2002 the capacity of therapeutic system for alcoholics has increased by 100%. In 2008 4 new therapeutic wards for alcoholics were created. At present the penitentiary service have therapeutic wards in 28 penitentiary units with 938 places for patients – prisoners.
7. In recent years the quality of the healthcare in prisons and remand centers increased significantly. According to the annual reports of penitentiary healthcare services, there is a growing trend of medical tests and medical procedures performed on prisoners. Simultaneously, the average time of expectation for specialist diagnostic test and specialized consultation in penitentiary centers is much shorter than for ordinary patients. Polish citizens examined within the system of the National Health Fund



(Narodowy Fundusz Zdrowia), very often waits for specialized consultation several months (while prisoners several weeks). Therefore, the Ministry of Justice often have to bear higher costs in respect of the healthcare of prisoners.

### **ACTION PLAN**

1. A reform of the penitentiary healthcare is planned for coming years. This should improve the quality of penitentiary healthcare and provide the prisoners with a better health care. The Healthcare Office of Central Board of Prison Service, after a detailed analysis of the penitentiary healthcare, pointed out the most important direction of the reform. A group of specialists has been appointed in order to develop uniform principles and types of medical services and a list of medicaments. The purpose of the above is to provide the same standard of medical treatment for all prisoners.
2. Concrete steps have been taken in order to unify premises and equipment of the health care facilities and modernization of prison hospitals. In particular, there are plans to extend the psychiatric base in the Remand Center in Szczecin and orthopedic base in Remand Center Warszawa – Mokotów. In the Prison no. 2 in Łódź shall be created a cardiology ward and the psychiatric, surgical, tuberculosis and lungs treatment base shall be extended; moreover, the whole rehabilitation ward shall be modernized.
3. In the framework of the reform of the penitentiary system in 2010 - 2013 it is also planned to build a central penitentiary hospital.
4. It is foreseen to determine, until 31 December 2010 the principles for cooperation between penitentiary healthcare units.,
5. By July 2010, an amendment of the Minister of Justice Ordinance of 31 October 2003 on the detailed rules, scope and procedure relating to the provision of medical services to persons deprived of their liberty by health-care establishments for persons deprived of their liberty (Rozporządzenie Ministra Sprawiedliwości w sprawie szczegółowych zasad, zakresu i trybu udzielania świadczeń zdrowotnych osobom pozbawionym wolności przez zakłady opieki zdrowotnej dla osób pozbawionych wolności ) should be prepared. The purpose of this amendment is to make it possible to decide about the psychiatric hospitalization of detainees not only by psychiatric specialists but also by other physicians. This amendment will ensure compatibility with the principles of directing to a psychiatric hospital by physicians other than psychiatric specialists enclosed in the Law of Protection of mental health (ustawa o ochronie zdrowia psychicznego).