



CPT/Inf (2004) 21

**Report to the Bulgarian Government
on the visit to Bulgaria
carried out by the European Committee
for the Prevention of Torture and Inhuman
or Degrading Treatment or Punishment (CPT)**

from 17 to 26 April 2002

The Bulgarian Government has requested the publication of this report and of its response. The Government's response is set out in document CPT/Inf (2004) 22.

Strasbourg, 24 June 2004

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Copy of the letter transmitting the CPT's report

Strasbourg, 6 December 2002

Dear Mrs Vassileva,

In pursuance of Article 10, paragraph 1, of the European Convention for the prevention of torture and inhuman or degrading treatment or punishment, I enclose herewith the report to the Bulgarian Government drawn up by the European Committee for the prevention of torture and inhuman or degrading treatment or punishment (CPT) after its visit to Bulgaria from 17 to 26 April 2002. The report was adopted by the CPT at its 49th meeting, held from 5 to 8 November 2002.

I would draw your attention to paragraph 231 of the report, in which the CPT requests the Bulgarian authorities to provide **within six months** a response setting out the action taken upon its visit report. As regards the State Psychiatric Hospital in Karlukovo, the Committee has requested confirmation **within one month** that patients are provided with food of sufficient quantity and quality.

The CPT would be grateful if it were possible, in the event of the response due within six months being in Bulgarian, for it to be accompanied by an English or French translation. It would also be most helpful if the Bulgarian authorities could provide a copy of the responses in a computer-readable form.

I am at your entire disposal if you have any questions concerning either the CPT's visit report or the future procedure.

Yours sincerely,

Silvia CASALE
President of the European Committee for
the prevention of torture and inhuman
or degrading treatment or punishment

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I. INTRODUCTION

A. Dates of the visit and composition of the delegation

1. In accordance with Article 7 of the European Convention for the prevention of torture and inhuman or degrading treatment or punishment (hereinafter referred to as "the Convention"), a delegation of the CPT visited Bulgaria from 17 to 26 April 2002. The visit was organised within the framework of the CPT's programme of periodic visits for 2002 and was the Committee's third visit to Bulgaria.¹

¹ The reports on the two previous visits, in 1995 and 1999, as well as the Bulgarian Government's responses to those reports, have been made public (cf. documents CPT/Inf (97) 1, CPT/Inf (2002) 1 and CPT/Inf (2002) 2).

and accompanied by the following members of the CPT's Secretariat:

- Wolfgang RAU
- Petya NESTOROVA.

B. Establishments visited

3. The delegation visited the following places of detention:

Establishments under the Ministry of Internal Affairs

- District Police Directorate, Botevgrad
- 1st District Police Directorate, Burgas
- 3rd District Police Directorate, Burgas
- District Police Directorate, Byala Slatina
- District Police Directorate, Kazanluk
- Police Station at Sofia Railway Station, Sofia
- District Police Directorate, Vratsa
- Detention facilities of the National Border Police Service at the Regional border sector in Petrich

Establishments under the Ministry of Justice

- Investigation detention facilities at:
 - Botevgrad, Burgas, Byala Slatina, Gabrovo, Kazanluk, Petrich, Plovdiv, Vratsa
 - “Major Vekilski” 2, Sofia
 - “Maria Louisa” 110 A, Sofia
- Burgas Prison
- Pleven Prison
- Reception/transit cells at Sofia Prison

Establishments under the Ministry of Health

- Karlukovo State Psychiatric Hospital

Establishments under the Ministry of Labour and Social Policy

- Home for adults with mental disorders in the village of Razdol, Strumyani municipality (Blagoevgrad Region)

Establishments under the Ministry of Education

- Correctional boarding school in the village of Yagoda, Muglizh municipality (Stara Zagora Region)

Establishments under the Ministry of Defence

- Temporary detention facility of the Regional Army Security Service, Sofia
- Detention facility of the 9th Armoured Tank Brigade, Gorna Banya
- Central Training Centre for junior officers and new recruits, Unit No 14460, Plevan.

C. Consultations held by the delegation and co-operation encountered

4. At the outset of the visit, the CPT's delegation held fruitful discussions with senior officials of the Ministries of Defence, Education, Public Health, Internal Affairs, Justice, and Labour and Social Policy. The CPT is particularly grateful for the time devoted to its delegation by the Minister for Justice, Mr Anton STANKOV and the Deputy Minister for Education, Mr Yulian NAKOV. A constructive meeting was also held with senior officials of the Supreme Cassation Prosecutor's Office.

The delegation would like to put on record the valuable assistance provided to it before, during and after the visit by the liaison officer designated by the national authorities, Mrs Galina VASSILEVA, Expert at the Ministry of Justice.

The delegation also had talks with representatives of several non-governmental organisations active in areas of concern to the CPT. A list of the national authorities and organisations consulted during the visit is set out in Appendix II to this report.

5. The co-operation provided to the CPT's delegation was of a very high standard. Staff at the establishments visited were aware of the fact that a visit by the Committee was underway in Bulgaria and were familiar with the CPT's mandate. This facilitated the delegation's work and, in particular, enabled it to have ready access to the places of deprivation of liberty visited, to move inside them without restriction and to speak in private with persons deprived of their liberty.

Further, the relevant extracts of the CPT's 1999 visit report had been circulated to the establishments concerned and there was evidence of recent efforts to implement the recommendations made in that report.

D. Immediate observations under Article 8, paragraph 5, of the Convention

6. At the end of its visit, the CPT's delegation had a final meeting with representatives of the Bulgarian authorities in Sofia, in order to acquaint them with the main facts found during the visit. On this occasion, the delegation made immediate observations, in pursuance of Article 8, paragraph 5, of the Convention, on three particularly urgent matters.

7. The first immediate observation concerned the 3rd District Police Directorate in Sofia, in respect of which the delegation received an alarming number of allegations of the recent resort to severe ill-treatment during the interrogation of suspects. The delegation requested that an independent inquiry be carried out into the methods used by police officers working at the 3rd District Police Directorate in Sofia during the interrogation of suspects, and that information on the results of that inquiry be provided to the Committee.

8. The second immediate observation related to the basement-level reception/transit unit in Sofia Prison, where the delegation saw three cells of varying sizes, all in an advanced state of dilapidation. The cells were overcrowded, access to natural light and ventilation were extremely poor, and the premises as a whole were dirty and infested with insects; further, prisoners had no access to toilet facilities and had to comply with the needs of nature in a bucket. Up to 15 days could be spent by inmates under such appalling conditions. The delegation requested the Bulgarian authorities to take the basement-level reception/transit cells in Sofia Prison out of service and to provide more suitable alternative accommodation.

9. The third immediate observation was made in respect of the State Psychiatric Hospital in Karlukovo. The delegation's major concern was the grossly insufficient provision of food; this combined with unacceptable material conditions, including unhygienic sanitary facilities and the pitiful state of the bedding and patients' clothes, could be considered as amounting to inhuman and degrading treatment. The delegation called upon the Bulgarian authorities to immediately provide the resources required for meeting the basic needs of the patients in terms of sufficient food and adequate bedding and clothing, and to closely monitor the use of these resources.

10. The above-mentioned immediate observations were subsequently confirmed in a letter of 14 May 2002 from the President of the CPT. The Committee requested the Bulgarian authorities to submit, within three months, a report on the action taken in response to those observations.

By letter of 26 July 2002, the Bulgarian authorities informed the CPT of the measures taken in response to the delegation's immediate observations as well as in respect of other remarks contained in the end-of-visit statement. The Committee is grateful for the timely and constructive response provided by the Bulgarian authorities, and will consider the information contained in it later in the report.

II. FACTS FOUND DURING THE VISIT AND ACTION PROPOSED

A. Establishments under the authority of the Ministry of Internal Affairs

1. Preliminary remarks

11. The basic rules governing detention by the police were summarised in the report on the CPT's visit to Bulgaria in 1999 (cf. CPT/Inf (2002) 1, paragraph 10). It should be recalled in particular that police custody cannot exceed 24 hours.² Following amendments to the Code of Criminal Procedure (CCP), in effect since 1 January 2000, the power to place a person on remand has been vested in the competent court rather than, as before, a prosecutor.³ However, pursuant to Article 152a, paragraph 3, of the amended CCP, prior to being brought before a court, a person may be detained for 72 hours by a prosecutor's order, or up to 24 hours by order of the investigating body. During that time, criminal suspects are in principle accommodated in investigation detention facilities run by the Ministry of Justice. **The CPT would like to receive clarification of the maximum length of time during which a criminal suspect may be detained prior to being brought before a court.**

12. The above amendments to the CCP also conferred investigative duties upon the police by introducing the instrument of "police proceedings", which can be of two types: "summary police proceedings", performed by inspectors of the Internal Affairs, and "inquiry" ("*doznanie*"), carried out by inquiry officers of the Internal Affairs.⁴ Police proceedings are used in cases where preliminary proceedings (which are the prerogative of investigating magistrates who are part of the judiciary) are not mandatory. The relevant prosecutor is to be immediately informed of the initiation of police proceedings.

13. As had been the case in 1999, the delegation observed that the drawing up of an order of detention by the police could be preceded by a period of up to 3 hours, during which a person invited or taken to a police station had the status of a "brought-in" person, i.e. not formally detained. Police officers explained that this period was used to have an initial "talk" before deciding whether there were sufficient grounds to warrant the detention of the person concerned. **The CPT reiterates its request for clarification as regards the legal basis of the above-mentioned practice and the rights of "brought-in" persons during the 3 hours in question.**

14. In the report on its 1999 visit, the CPT expressed concern about the observance of the time limits provided for in law as regards detention by the police. The information gathered in the course of the 2002 visit suggests that the relevant provisions may at times be violated. A few criminal suspects interviewed by the delegation alleged that they had been kept in one or a series of police directorates for several successive 24-hour periods (up to 4 days). **The CPT urges the Bulgarian authorities to take appropriate steps to ensure that the detention of criminal suspects is carried out in strict conformity with the legislative provisions.**

² Cf. Article 71 of the Law on the Ministry of Internal Affairs of 1999.

³ Cf. Article 152a of the CCP.

⁴ Cf. Articles 408a to 414 of CCP.

2. Torture and other forms of ill-treatment

15. A considerable number of persons interviewed by the delegation alleged that they had been ill-treated by the police. These allegations came from persons who had recently been in police custody and who were met at the investigation detention facilities and prisons visited. In fact, the delegation met very few persons who were in police custody at the time of the visit.

Most of the alleged ill-treatment related to the time of initial questioning by operational police officers and inquiry officers, and was reportedly aimed at the obtaining of confessions and/or information. Some allegations were also heard of the disproportionate use of force at the time of apprehension.

The forms of physical ill-treatment alleged mainly concerned slaps, punches, kicks and blows struck with truncheons, wooden bats and other hard objects. Further, some persons alleged that they had spent prolonged periods of time handcuffed to rails, radiators or other fixed objects, and had been physically assaulted while restrained (cf. paragraph 39); one person alleged having been suspended from a rail by hand and foot. A few allegations were received of asphyxiation using a gas mask, the infliction of electric shocks and beating on the soles of the feet. The ill-treatment alleged was on occasion of such a severity that it could be considered as amounting to torture.

In addition, a number of persons gave accounts of threats by police officers to use physical force at the time of interviews.

16. The delegation was particularly concerned by the striking number of allegations of the recent resort to severe ill-treatment at the **3rd District Police Directorate in Sofia**, involving combinations of the methods referred to in paragraph 15, during the interrogation of criminal suspects. In two cases, medical evidence consistent with those allegations was gathered:

- a person interviewed by the delegation at an investigation detention facility in Sofia alleged that, three days previously, he had been taken to the 3rd District Police Directorate in Sofia and placed in a cell overnight. In the morning of the following day, he was interviewed by a police officer who allegedly hit him on the knees and the elbows with a wooden bat. When examined by a medical member of the delegation, the person concerned displayed: on the outside of the left elbow, a tender red-purplish haematoma of 7 cm diameter; on the right elbow, a similar haematoma of 5 cm diameter; on both knees, similar sized haematomas; restriction of movement in the joints. The person also alleged that he had received electric shocks from a small device with a handle and wires which were attached to his index fingers by means of metal rings;
- another person met by the delegation at an investigation detention facility in Sofia alleged that, three days previously, he had been apprehended and taken to the 3rd District Police Directorate in Sofia, where police officers hit him on the elbows, the knees, the ankles and the head with a wooden bat. When examined by a medical member of the delegation, the person concerned displayed: on the right elbow, a red-purplish bruise of 3 x 2 cm; on the left elbow, a similar bruise of 2 x 2 cm; on the outside of the right ankle, a bruise of 2 x 2 cm; on both sides of the left ankle, two bruises 1 x 2 cm. The person in question also alleged that a gas mask had been placed on his face and that the officers put on his little fingers rings connected with wires to a device with a handle, which they turned to administer electric shocks.

17. As already noted (cf. paragraph 7), the delegation made an immediate observation under Article 8, paragraph 5, of the Convention and requested that an independent inquiry be carried out into the methods used by police officers working at the 3rd District Police Directorate in Sofia during the interrogation of suspects.

By letter of 26 July 2002, the Bulgarian authorities provided detailed information on the results of the requested inquiry. It had been carried out under the direction of the Inspections Directorate of the Ministry of Internal Affairs and had involved experts from the National Police Service Directorate and representatives of two non-governmental organisations, the Bulgarian Helsinki Committee (BHC) and the Assistance Centre for Torture Survivors (ACET). The inquiry's methodology comprised: interviews with persons detained at the 3rd District Police Directorate; interviews with staff; study of documentation; examination of the work and documentation in relation to concrete cases; examination of complaints against the establishment's staff.

18. Prior to the inquiry, BHC representatives had interviewed eleven prisoners at Sofia Prison, previously detained at the 3rd District Police Directorate, who alleged having been subjected to ill-treatment at that establishment (beating with truncheons, blows, kicks, use of gas masks, etc.). However, according to the inquiry report, a subsequent verification of the information obtained in the course of the interviews brought to light discrepancies between the prisoners' allegations, and statements made by police officers and documentary evidence (e.g. dates and duration of detention, medical certificates, etc.). Further, the prisoners concerned were not able to support their allegations with medical certificates or other evidence. The medical records at the investigation detention facility at "Major Vekilski" Street to which the persons concerned had been transferred from the 3rd District Police Directorate indicated that they had been admitted in good health and had made no complaints of bodily harm as a result of their stay at the police establishment in question.

Interviews were also carried out with the three persons detained at the 3rd District Police Directorate at the time of the inquiry; they made no complaints of violence by police officers either at the time of arrest or in the course of detention. Further, seven persons selected at random from the register of persons previously detained at the facility were summoned for interviews; however, only one of them turned up. He stated that he had never been subject to police violence, although he had repeatedly been detained at the establishment concerned.

The inquiry also established that, in the period from 1 January to 30 May 2002, three complaints concerning unlawful use of arms, auxiliary means or physical force, as well as illegal detention, had been lodged against police officers of the 3rd District Police Directorate. According to the inquiry report, the investigation of these complaints had been biased as the responsible officers had questioned police staff but had not interviewed the complainants themselves.

19. The inquiry concluded that no unequivocal facts and evidence of ill-treatment during interrogations by operational staff at the 3rd District Police Directorate could be gathered. At the same time, it established that the regulations applicable to detention by the police and maintenance of documentation were not strictly observed (e.g. no detention orders had been drawn up in respect of the persons held at the establishment at the time of the inquiry; the custody registers were not properly kept, etc.). The inquiry also brought to light violations related to the storing of material evidence and the processing of proposals, complaints and requests by citizens, as well as deficiencies in staff training.

The inspecting commission recommended that the management of Sofia City Directorate of Internal Affairs take measures to eradicate the shortcomings observed. Similar checks should be carried out at the rest of the district police directorates, and a report on their outcome submitted to the Inspection Directorate by 30 August 2002. Further, it was recommended that detained persons be medically examined on entering and leaving police stations, e.g. by staff of the medical service of Sofia City Directorate, the hospital of the Ministry of Internal Affairs or other health institutions. More generally, the National Police Directorate was asked to elaborate a “methodology concerning the activities of on-duty units, operational officers and inquiry staff when detaining persons, and the effectiveness of the control exercised by senior staff over the legality of police activities”.

The CPT has examined with interest the information provided by the Bulgarian authorities in respect of the above-mentioned inquiry. The Committee is confident that the holding of the inquiry will have had a salutary effect as regards the situation at the 3rd District Police Directorate in Sofia.

20. The Bulgarian authorities have pointed out that the methods of the inquiry will be used for future inspections of other police establishments. In this connection, the CPT wishes to stress that to uncover evidence of ill-treatment, it is necessary to gain the confidence of the persons concerned. Those persons should be interviewed on an individual basis, under circumstances which ensure the privacy of the interview. They should be provided with guarantees that they will not further jeopardise their situation by disclosing what happened to them and be assured that any grievances which they might have will be properly investigated and, if appropriate, redressed. **The CPT recommends that the above remarks be taken into account when investigating allegations of ill-treatment.**

The Committee welcomes the decision to involve NGO representatives in the inquiry, in addition to police experts, **and trusts that this practice will continue in the future.**

As regards the recommendations made by the inspecting commission, **the CPT would like to receive in due course information on:**

- **the measures taken by the management of Sofia City Directorate of Internal Affairs to eradicate the shortcomings observed at the 3rd District Police Directorate;**
- **the outcome of the checks carried out at the other district police directorates, and measures subsequently taken;**
- **the new “methodology concerning the activities of on-duty units, operational officers and inquiry staff when detaining persons, and the effectiveness of the control exercised by senior staff over the legality of police activities”.**

21. The CPT has repeatedly stressed that the best possible guarantee against ill-treatment by the police is for its use to be unequivocally rejected by police officers themselves. This implies strict selection criteria at the time of recruitment of such staff and the provision of adequate professional training.

In their follow-up response to the report on the 1999 visit, the Bulgarian authorities highlight measures taken to address the problem of ill-treatment by the police. In August 2000, a specialised Human Rights Commission was set up within the National Police Service, with a network of regional co-ordinators. The Commission's functions include training of police staff in human rights and international standards related to the activities of law enforcement bodies. In this connection, the Commission is involved in a number of joint projects with the Council of Europe and other international organisations in the area of human rights training, and has developed contacts with Bulgarian NGOs which provide experts for the training of police staff. New training materials have been prepared and distributed to police units throughout the country. It would appear from the titles of these materials (e.g. "Human Rights and Police Practice: Manual for Training Police Sergeants"; "Human Rights and the Police: Manual for Practical Training") that they combine human rights issues with practical training.

The CPT welcomes the above-mentioned developments, which are in line with the recommendations made in its previous reports. The Committee would like to emphasise once again the importance of integrating human rights concepts into the general training curriculum, rather than treating them in isolation. **Human rights should be a common thread throughout all aspects of professional training (e.g. restraint techniques, the use of firearms and auxiliary means, interviewing techniques, etc.), both theoretical and practical, and for all ranks and categories of law enforcement staff.**

22. Pursuant to Article 152a of the amended CCP, persons in respect of whom the preventive measure of remand in custody is envisaged should be physically brought before the judge who must decide that issue. This is a welcome development, which will provide a timely opportunity for a person who has been ill-treated to lodge a complaint. It is axiomatic that the judge must take appropriate action when there are indications that ill-treatment by the police may have occurred.

In this regard, **the CPT recommends that whenever criminal suspects brought before a judge allege ill-treatment by the police, the judge record the allegations in writing, order immediately a forensic medical examination and take the necessary steps to ensure that the allegations are properly investigated. Such an approach should be followed whether or not the person concerned bears visible external injuries. Further, even in the absence of an express allegation of ill-treatment, the judge should request a forensic medical examination whenever there are other grounds to believe that a person brought before him could have been the victim of ill-treatment.**

It is also important that persons who are released from police custody without being brought before a judge have the right to directly request a medical examination/certificate from a recognised forensic doctor.

23. One of the findings of the previously mentioned inquiry was that the investigation of complaints against police officers had been biased (cf. paragraph 18). In this connection, the CPT wishes to stress that, in order for the investigation of complaints against the police to be fully effective, the procedures involved must be, and be seen to be, independent and impartial. Further, the system of accountability should be proactive, placing a legal obligation upon all officials who have knowledge of abuse of police powers to inform the authority competent to deal with complaints. **The CPT would like to receive detailed information on the rules and regulations governing the internal accountability procedures of the Ministry of the Interior.**

24. During the visit, the delegation was provided with several sets of statistics concerning the number of complaints, and of disciplinary and criminal sanctions imposed on police staff in the period 1999 to 2001. The National Police Service Directorate received a total of 197 complaints concerning unlawful actions by the police in 2001; of them, 19 were found to be admissible (2 concerning the use of physical force and 2 concerning the use of arms). Disciplinary sanctions were imposed on 9 staff members and 3 cases were referred to the military prosecutor's office. Similar statistics were made available for the years 1999 (105 complaints, 4 disciplinary sanctions, 1 case referred to the prosecutor's office) and 2000 (164 complaints, 21 disciplinary sanctions).

The statistical information compiled by the Directorate of Human Resources of the Ministry of Internal Affairs concerning unwarranted violence by Internal Affairs staff shows that: in 2001, there were 34 cases involving 42 officers, resulting in 8 dismissals and 2 referrals to the military prosecutor's office; in 2000, 28 cases involving 46 officers, resulting in 1 dismissal and 11 referrals to the prosecutor's office; and in 1999, 6 cases involving 9 officers, resulting in 4 dismissals.

According to information supplied by the military prosecutor's office, in 2001 there were 39 criminal proceedings and 31 sentences in respect of police officers; in 2000, 38 criminal proceedings and 53 sentences; and in 1999, 80 criminal proceedings and 34 sentences.

The variance in the above-quoted information makes it difficult to obtain a clear picture of the situation. The compilation of statistical information is not an end in itself; if properly collected and analysed, it can provide signals about trends and assist in the taking of policy decisions. Increased co-ordination between the Ministry of Internal Affairs and the Prosecutor's Office is clearly needed in this respect. **The CPT invites the Bulgarian authorities to introduce a uniform nationwide system for the compilation of statistical information on complaints, disciplinary sanctions, and criminal proceedings/sanctions against police officers. The Committee would also like to be provided with such information in respect of 2002.**

25. Systems for the independent inspection of detention facilities are capable of making an important contribution to the prevention of ill-treatment. In order for inspection visits to be effective, they should be unannounced and take place at random intervals. Further, those responsible for the inspections should be empowered to interview detained persons in private.

The CPT recommends that appropriate steps be taken to ensure the effectiveness of inspection visits by prosecutors and senior police officers to police establishments in Bulgaria, in the light of the above remarks. Further, the Committee recommends that specific registers for inspections be set up at all police establishments. The CPT also invites the Bulgarian authorities to further develop the system of visits to police establishments by independent outside bodies (NGOs).

3. Safeguards against the ill-treatment of persons deprived of their liberty

26. In previous visit reports, the CPT examined in detail the formal safeguards against ill-treatment which are offered to persons detained by the police in Bulgaria. The Committee has placed particular emphasis on three fundamental rights, namely the right of detained persons to inform a close relative or another third party of their situation, to have access to a lawyer, and to have access to a doctor. As the CPT has stressed repeatedly, these rights should be enjoyed by all categories of persons from the very outset of their deprivation of liberty (i.e. from the moment the persons concerned are obliged to remain with the police). It is equally fundamental that persons detained by the police be informed without delay of their rights, including those mentioned above, in a language they understand.

27. As regards the legal provisions pertaining to the above-mentioned rights, no changes have taken place since the 1999 visit. In particular, there are still no legal provisions explicitly guaranteeing the rights of notification of custody and access to a doctor to persons detained by the police (cf. CPT/Inf (2002) 1, paragraphs 29 and 38).

During the 2002 visit, the delegation was informed of recent measures taken by the Bulgarian authorities to make up for this legal void. A Ministry of Internal Affairs Order of 6 March 2002 introduced a form called “declaration of rights”, which should be completed and signed in two copies (one attached to the order of detention, the other given to the person concerned) immediately after detention. In that form, the person concerned declares: i) that he has been informed of the right to have access to a lawyer and whether he wants to have one; ii) any health problems which require medical examination; iii) whether he wishes to be examined by a doctor of his own choice and at his own expense; iv) whether he wants to have a close relative or another third party informed of the fact of detention; v) in the case of a foreign national, whether he wants to contact a consular office, and whether he has used the services of an interpreter to complete the declaration.

The CPT welcomes the introduction of the “declaration of rights”, which is a step in the direction of implementing some of the Committee’s previous recommendations. At the same time, the Bulgarian authorities acknowledged that certain problems remain as regards the possibility for persons detained by the police to benefit, free-of-charge, from interpretation, medical care, access to a lawyer, telephone, food, etc. It was stated that the solution of these problems depended on amendments to the legislative and regulatory framework applicable to police activities as well as the provision of sufficient budgetary and other financial means.

The delegation’s own observations during the visit suggest that much remains to be done to ensure that the above-mentioned safeguards operate effectively in practice.

28. As regards notification of custody, a number of persons (including juveniles) interviewed by the delegation alleged that the police had refused to allow them to inform a relative or friend of their situation, and had declined to do so themselves. Police officers informed the delegation that, because of a strict limit on outgoing telephone calls, detainees could in principle only make a call to a local number.

The CPT recommends that legal provisions be adopted to ensure that all persons detained by the police have a formally recognised right to inform a relative or another third party of their choice of their situation, from the outset of their detention. Any possibility exceptionally to delay the exercise of this right should be clearly circumscribed in law, made subject to appropriate safeguards (e.g. any delay to be recorded in writing with the reasons therefor, and to require the approval of a senior police officer unconnected with the case at hand or a prosecutor) and strictly limited in time.

As regards juveniles detained by the police, the CPT recommends that steps be taken to ensure that an adult responsible for the interests of the juvenile (e.g. a relative or guardian) is present when the juvenile concerned is interviewed.

29. In the report on the 1999 visit, the CPT stressed that the right of access to a lawyer should apply from the very outset of deprivation of liberty, and not only when an order of detention is issued. However, police officers met by the delegation during the 2002 visit stated that they would inform a detainee of this right only when there was enough evidence that he had committed a crime and a decision was taken to formally detain him.

Many persons interviewed by the delegation claimed that they had requested to contact a lawyer, but such access had been refused until they admitted the offence of which they were suspected. Further, a few allegations were heard to the effect that requests by detained persons to contact a lawyer had been met with violence or threats to use violence.

As in 1999, the police establishments visited did not possess facilities designated for the purpose of meetings between detainees and their lawyers. Further, the information gathered during the 2002 visit clearly suggests that persons in police custody cannot have confidential discussions with their lawyers.

Consequently, the CPT reiterates the recommendations made in the report on its 1999 visit, that the Bulgarian authorities take steps to ensure that:

- the right of access to a lawyer for persons in police custody applies as from the very outset of their deprivation of liberty (and not only when a formal order of detention is issued);
- the confidentiality of discussions between persons in police custody and lawyers is respected.

30. The CPT has repeatedly emphasised that, if the right of access to a lawyer during police custody is to be fully effective in practice, appropriate provisions should be made for those who are not in a position to pay for a lawyer. Many detainees interviewed during the 2002 visit affirmed that a lack of resources had prevented them from having access to a lawyer.

The CPT recommends that the Bulgarian authorities take steps to ensure the effectiveness of the system of legal assistance for detained persons, including at the initial stage of police custody.

31. As already noted (cf. paragraph 27), the subject of access to a doctor is addressed by the recently introduced “declaration of rights”. Reference should also be made to the new form of the order of detention by the police which stipulates that “a mandatory medical examination should be performed on persons who bear signs of violence or when it might be surmised that they have suffered bodily harm before detention; the medical certificate should be attached to the order of detention”.

Police officers stated that if a detained person had health problems, they would call in a police doctor or take the person concerned to a nearby polyclinic. Some detainees interviewed by the delegation confirmed that they had been examined by a doctor, usually towards the end of the 24-hour period of police custody, before being transferred to an investigation detention facility (though the medical examinations had apparently taken place in the presence of police officers). However, the delegation spoke to a number of persons who claimed that they had asked to see a doctor during the period of police custody but that their request had been ignored.

The CPT has repeatedly emphasised that a doctor should always be called without delay if a person in police custody requests a medical examination. Police officers should not seek to filter such requests. Consequently, **the CPT recommends that specific legal provisions and/or instructions be adopted, stipulating that a request by a detained person to see a doctor should be met promptly. It should also be stipulated that:**

- **with a view to protecting medical confidentiality, all medical examinations of persons in custody are to be conducted out of the hearing and - unless the doctor concerned expressly requests otherwise in a given case - out of the sight of police officers;**
- **the results of every examination, as well as any relevant statements by the person in custody and the doctor's conclusions, are to be recorded in writing by the doctor and made available to the detained person and his lawyer.**

32. The contents of the above-mentioned “declaration of rights” are in accordance with the recommendation previously made by the CPT concerning the provision of information on rights to persons detained by the police. However, the delegation observed that some of the police establishments visited (e.g. the District Police Directorate in Byala Slatina, the 1st and 3rd District Police Directorates in Burgas) did not have copies of the declaration. Further, some persons who had recently been in police custody stated that they had not been given the declaration, and were consequently not aware of their rights during police custody. It should also be noted that the declaration was available only in Bulgarian. Moreover, some of the detained persons met by the delegation were illiterate, and clearly could not have understood the declaration.

The CPT recommends that steps be taken to ensure that the “declaration of rights” is given systematically to all persons apprehended by the police, at the very outset of their custody and, if necessary, explained to them. The declaration should also be made available in a variety of languages.

33. In early March 2002, the National Police Service introduced uniform criteria for the keeping of police custody records. Two types of custody registers are to be kept at police establishments: i) or persons detained under Article 70 of the Law on the Ministry of Internal Affairs, and ii) for persons who have been “brought in”. The delegation noted that, in compliance with the CPT’s previous recommendation, the register of detained persons was an expanded version of the previous register model. It recorded the hour and date of apprehension; personal data about the detained person; apprehending police officer; grounds for detention; number and time of issuing of the order of detention; health status; doctor and results of the medical check; officer responsible for the case; hour and date of release; transfer to another detention facility.

The introduction of the new registers was at an early stage and not all police stations visited had started using them. Further, the examination of custody records revealed that the period of custody was sometimes poorly documented. In particular, the times of arrival and release or transfer were not always indicated. The inadequacy of the custody records kept at the detention facility of the National Border Police Service at the Regional border sector in Petrich raised questions about the actual length of stay of foreign nationals detained there (cf. paragraph 41).

The CPT welcomes the introduction of new custody registers and **recommends that appropriate steps be taken to ensure that they are filled out accurately and systematically.**

34. In the reports on its 1995 and 1999 visits, the CPT recommended that the Bulgarian authorities draw up a code of conduct for interrogations, supplementing the basic rules contained in the Code of Criminal Procedure (cf. CPT/Inf (2002) 1, paragraph 42 and CPT/Inf (97) 1, paragraph 94). This recommendation is yet to be implemented.

The information gathered during the 2002 visit clearly illustrated the need for such a code. **The CPT calls upon the Bulgarian authorities to implement the above-mentioned recommendation without further delay.**

35. Finally, the CPT wishes to stress that the recommendations made above with a view to strengthening the safeguards for persons in police custody should apply to all types of police services (National Police, Border Police, National Service on Organised Crime, Military Police, Gendarmerie, etc.).

4. Conditions of detention

a. police cells

36. Conditions of detention in the police stations visited remained on the whole inadequate. Most of the district police directorates possessed one cell. The cell at Vratsa was quite large (9.5 m^2) and had been recently painted. It had a screened window; however, the artificial lighting was not working. In Byala Slatina, there was one cage-like cell (5.3 m^2) located in the basement, which was cold, dirty and stank of urine. The cell had no access to natural light.

In some places, the location and configuration of the cells were such that persons detained in them were exposed to the gaze of visitors to the police station. For example, the cell at the 1st District Police Directorate in Burgas (4.5 m^2) was in fact a barred area at the end of the main corridor. In Kazanluk, the cell represented a barred area (6.5 m^2) under the central staircase. Staff indicated that it was about to be replaced by a new cell, which was away from public view and would be fitted with a bunk bed. At the 3rd District Police Directorate in Burgas, the cell was very small (barely 3.2 m^2) and had a barred door opening onto a kitchen area. At the Police Station at Sofia Railway Station, detainees were held in a small cage (3.7 m^2) which smelled of urine.

37. The only equipment in the above-described cells was a bench, usually too narrow for a person to lie down (30 - 40 cm wide). The examination of custody records showed that stays of 24 hours were quite common; however, persons held overnight were not provided with mattresses and blankets.

The delegation was shown toilet facilities which, according to staff, were used by both staff and detainees. However, in some places, the toilets concerned were situated quite a long way from the cell (e.g. on a different floor). In fact, a number of persons complained that they had not been allowed access to the toilet during police custody; the situation found in some of the cells lent credibility to those allegations.

As in 1999, the delegation heard numerous allegations that persons detained by the police had received nothing to eat or drink throughout their period of custody of up to 24 hours. The police stations still had no budget for supplying food to detainees.

38. **The CPT recommends that serious efforts be made to bring conditions of detention in police establishments in Bulgaria into line with the basic requirements set out in the reports on the CPT's previous visits** (cf., for example, CPT/Inf (2002) 1, paragraph 47). **In particular, steps should be taken to ensure that:**

- all cells are equipped with a means of rest suitable for overnight stays;**
- all persons detained overnight are provided with clean mattresses and blankets;**
- cell lighting and ventilation are adequate;**
- detained persons have ready access to a toilet facility;**

- police establishments are allocated a specific budget to cover the cost of providing food to detained persons;
- detained persons are guaranteed ready access to drinking water;
- detainees are not exposed to the view of persons visiting the police station.

Further, the limited size of the cells at the 1st and 3rd District Police Directorates in Burgas and at the Sofia Railway Station rendered them unsuitable for use as overnight accommodation.

39. At the time of the 1999 visit, the CPT expressed concern about persons in police custody spending significant periods of time attached to metal rails in a standing position. During the 2002 visit, the delegation noted that police cells were fitted with rails fixed to the wall at a height of about 1.20 m, which would allow persons to sit while attached. The rails had clearly been lowered from a greater height (there were holes on the wall from the past). Police staff explained that detainees would be restrained to the rails if there was a risk of them absconding, being violent or harming themselves. As already noted (cf. paragraph 15), the delegation spoke to a number of persons who alleged that they had spent lengthy periods handcuffed to rails.

The CPT has already made known its views on the matter of restraining persons detained in police cells (cf. CPT/Inf (2002) 1, paragraph 17). **The Committee calls upon the Bulgarian authorities to remove altogether the metal rails fixed inside police cells; persons in custody who are drunk and/or violent should be placed in a separate, appropriately equipped and closely supervised (e.g. every 15 minutes) cell.**

40. The delegation also observed rails (sometimes with handcuffs attached to them) in the corridors of some of the police stations visited. At the District Police Directorate in Botevgrad, there was no designated detention area and the delegation was told that detainees would wait in the corridor where there was a rail fixed to the wall, with handcuffs attached to it. While it may be necessary for a criminal suspect in police custody to be handcuffed at certain stages of the procedure, **handcuffs should not be used as a substitute for proper holding facilities. As regards in particular the District Police Directorate in Botevgrad, the CPT recommends that it be equipped with a detention facility corresponding to the requirements identified in paragraph 38.**

b. detention facilities of the National Border Police Service at the Regional border sector in Petrich

41. The Regional border sector in Petrich is responsible for three check points on the Bulgarian border with "the former Yugoslav Republic of Macedonia" and Greece. In accordance with Article 71 of the Law on the Ministry of Internal Affairs, the Border Police can detain for up to 24 hours persons who have violated Articles 279 and 280 of the Criminal Code⁵. Foreign nationals should subsequently be either expelled or, if they have applied for asylum, transported to the Agency for Refugees in Sofia.

⁵ Art. 279 of the CC concerns the crossing of the national border without permission or at an unauthorised place. Art. 280 concerns the unauthorised transfer across the national border of a person or groups of persons.

In complicated cases, the prosecutor may authorise an extension of the detention period by a further 72 hours. It was not clear where detained persons would be held during that time. Staff affirmed that they would be transferred to an investigation detention facility or released while awaiting transportation to Sofia; however, from the custody register it appeared that some persons had spent up to 9 days in the custody of the Border Police. **The CPT would like to receive a clarification of this matter.**

42. The detention area was located in a former army barracks, within an extensive compound run by the Border Police. Conditions of detention were, in general, acceptable. There were three large dormitories (25 - 40 m²) which had good access to natural light and ventilation, and were equipped with artificial lighting (which could be dimmed at night). The equipment consisted of bunk beds with mattresses, blankets, pillows and bed linen, a stove and a few stools. There was also an adjacent dining room where detainees received food three times a day. However, the toilet and washing facilities used by detained persons were appallingly dirty and in a very poor state of repair. Further, in a remote part of the compound, the delegation was shown a shower room in an advanced state of dilapidation which was reportedly used by detainees.

During the day, detainees could move around a spacious, fenced outdoor area, which included a sheltered place with tables and benches.

43. At the time of the visit, there was a group of 24 Iraqi nationals in detention. The delegation was told that they had been returned the previous night from Greece and would be transported later that day to the Agency for Refugees in Sofia for interviewing. The delegation's interviews with the detained foreign nationals were hampered by language problems. Nevertheless, it appeared that they had practically no information about their future situation and had not been able to seek advice from a lawyer. **In this connection, the CPT recalls the recommendations made in paragraph 29 (cf. also paragraph 35).** As regards the foreign nationals' possibility to maintain contact with the outside world, the delegation was told they could buy phone cards (there was a pay-phone).

The arrangements for providing medical care to detained persons appeared to be adequate; they could be examined by health-care staff employed by the Border Police or, if necessary, transferred to a hospital.

44. **The CPT recommends that:**

- **urgent steps be taken to improve conditions in the toilet and washing facilities and the shower-room at the Border Police detention facilities in Petrich;**
- **persons detained by the Border Police be systematically provided with information explaining the procedure applicable to them and their rights. A document should be available in the languages most commonly spoken by persons detained by the Border Police and, if necessary, recourse should be had to the services of an interpreter.**

B. Establishments under the authority of the Ministry of Justice

1. Investigation detention facilities

a. preliminary remarks

45. The CPT's delegation visited ten investigation detention facilities in different parts of Bulgaria; two of them – in Burgas and Plovdiv – had been visited by the Committee in 1999.

46. Since January 2000, the running of investigation detention facilities has been the responsibility of the Ministry of Justice's Main Directorate for the Execution of Punishments. At the time of the 2002 visit, the functioning of investigation detention facilities continued to be governed by Ordinance No. 2 of 19 April 1999 on "the status of accused and defendants remanded in custody", the main provisions of which were referred to in the CPT's report on its 1999 visit (cf. CPT/Inf (2002) 1, paragraphs 67 et seq.). The delegation was informed of forthcoming amendments to the Law on the Execution of Punishments which, inter alia, would integrate the legal framework applicable to investigation detention facilities into mainstream law; as a result of that, Ordinance No. 2 would be repealed. The amendments in question were published in the State Gazette on 25 June 2002.

b. ill-treatment

47. As in 1999, scarcely any allegations were heard of ill-treatment of detained persons by custodial staff at investigation detention facilities.

The delegation received one allegation concerning violence between detainees at the investigation detention facility in "Major Vekilski" Street in Sofia. A juvenile detainee complained that, several months prior to the visit, he had been beaten by an adult detainee with whom he was sharing a cell.

In this connection, it is generally recognised that adult and juvenile detainees should be held in separate accommodation. To place adult and juvenile detainees together in the same cell inevitably brings with it the possibility of domination and exploitation. **The CPT recommends that steps be taken to ensure full compliance in investigation detention facilities with the principle of separation of adult and juvenile detainees.**

48. The delegation observed that custodial staff in the investigation detention facilities visited routinely and openly carried truncheons in the detention areas. In the interest of promoting positive relations between staff and detainees, **the CPT recommends that custodial staff in investigation detention facilities do not carry truncheons as a matter of routine in detention areas; if it is considered necessary for custodial staff to carry truncheons in specific and clearly defined circumstances, the truncheons should be hidden from view** (as is already the case with prison staff).

c. conditions of detention

49. Practically all the investigation detention facilities visited were undergoing renovation, and the one at "Major Vekilski" Street in Sofia had re-entered service a couple of weeks before the visit, following extensive transformation. Efforts were being made to address the problem of lack of access to natural light and poor ventilation by removing the metal plates previously fixed to the windows, adding grilled doors to the cells or making a window in the cell doors. At some facilities (e.g. Burgas, Gabrovo), differentiated day/night lighting systems had been introduced in the cells. Improvements had also been made to the cell equipment: substituting beds for sleeping platforms, adding tables and chairs, etc. The CPT trusts that this momentum will be maintained.

Notwithstanding the above changes, a lot remained to be done. Despite recent transfers of detainees to prisons, the investigation detention facilities were generally overcrowded, even when the maximum official capacity was observed. Furthermore, three of the facilities visited (in Byala Slatina, Kazanluk and Petrich) continued to be located underground, although according to the follow-up response of the Bulgarian authorities to the report on the 1999 visit, all underground detention facilities had been scheduled for closure by the end of 2001. The Minister of Justice admitted himself that investigation detention facilities continued to have the worst conditions of all establishments under his Ministry.

50. Material conditions at the investigation detention facility at "Major Vekilski" Street in Sofia were distinctly superior to those found elsewhere, and in many respects could serve as a model for the rest of the country. With an official capacity of 112, the facility was holding 82 detained persons (including 3 women). There were twenty-eight cells (measuring some 16 m²) designed to hold up to 4 persons each. Access to natural light, artificial lighting and ventilation were adequate. The cells were furnished with beds with full bedding and personal cupboards, and were neat and clean. All cells were equipped with a sanitary annexe (toilet and sink), screened by a waist-high wall. The corridor areas were monitored by closed circuit television cameras.

51. The investigation detention facility in Botevgrad had five cells (5.5 – 7 m²) located on the first floor. At the time of the visit, 12 persons (including 1 woman and 2 juveniles) were in custody. One cell measuring 5.5 m² held three detainees, two of whom had to share a bed; such an occupancy level is totally unacceptable. On a more positive note, the cells had recently been fitted with a grilled door, in addition to the outer steel door, which allowed the entry of some natural light and ventilation from the corridor. The cell equipment consisted of bunk beds, tables and chairs. Further, the premises as a whole were clean.

52. In Byala Slatina, there were six basement cells with a total capacity of 17; two detainees were present at the time of the visit. One of the cells was larger (16 m²) and intended for 7 persons; the rest of the cells measured a mere 4 m² and were designed for two persons each. Once again, such occupancy rates are clearly excessive; further, given the prolonged periods of time persons can be held at investigation detention facilities, cells of 4 m² are too small, even if used for single occupancy. Most of the floor space in the cells was taken up by wooden platforms on which mattresses and blankets were placed. The cells had no access to natural light, and artificial lighting was poor. Ventilation also left a lot to be desired.

53. The investigation detention facility in Gabrovo was located underground. It had nine cells with a total capacity of 27; however, due to ongoing refurbishment, only four of the cells were in use at the time of the visit. Conditions in these renovated cells were unsatisfactory in many respects: the cells were too small for their intended occupancy (e.g. 3 persons in a cell of 6 m²), insufficiently ventilated, with poor access to natural light and damp. The recently applied paint had already started crumbling from the ceiling.

54. The investigation detention facility in Kazanluk had eight cells (measuring 7 m²) designed for double occupancy. Once again, a refurbishment was underway, involving the adding of grilled doors to the cells with the aim of improving access to natural light and ventilation, and substituting bunk beds for sleeping platforms. However, certain of the cells currently in use were grossly overcrowded (up to 5 persons in a cell), dark, stuffy and dirty.

55. The investigation detention facility in Petrich had four basement cells designed for double occupancy. The number of persons in custody (8) corresponded to the official capacity. Three of the cells measured 7.5 m²; the fourth cell, measuring a mere 4 m², was far too small for holding two persons. Access to natural light and ventilation had improved as a result of the recent fitting of grilled doors to the cells. As elsewhere, the sleeping platforms had been replaced with beds, and detainees provided with new bedding.

56. The investigation detention facility at "Maria Louisa" Street in Sofia had six cells with an overall capacity of 18, and was holding 14 detainees. The delegation observed three detainees in a cell of 10 m² which contained only two beds; an additional mattress had been placed on the floor. The cells had windows which allowed limited access to natural light and ventilation. As in most of the other facilities, the electric light was left continuously on.

57. The investigation detention facility in Vratsa had thirteen double occupancy cells with an official capacity of 26; the size of the cells (4 – 4.5 m²) was totally inadequate for their intended use. The facility was empty at the time of the visit due to refurbishment, which involved the removal of the shutters from cell windows, replacing the platforms with bunk beds, and fitting tables and chairs.

58. As already noted, the visits to the investigation detention facilities in Burgas and Plovdiv were of a follow-up nature. Positive changes were observed in Burgas: small windows had been made above the doors, allowing limited access to natural light; a differentiated day/night lighting system and a ventilation system had been added to the cells; individual beds and new bedding had been provided; the sanitary facilities had been refurbished.

In Plovdiv, only a third of the cells had benefited from a refurbishment which involved making windows in the cell doors, improving the artificial lighting and installing wash basins in the cells. However, the majority of the cells remained in the same inadequate condition as in 1999.

59. The investigation detention facility at "Major Vekilski" Street in Sofia was the only establishment visited by the delegation where cells had integral sanitation. At the rest of the investigation detention facilities, access to a toilet depended on staff opening the cell; in this respect, a number of complaints were heard about delays in having access to a toilet, especially at night. The delegation noted that instructions had been issued by the Deputy Minister of Justice (Order of 12 July 1999) to the effect that staff should grant detainees access to the toilet at any time of day or night.

Detainees at all the investigation detention facilities visited stated that they had access to a shower on a weekly basis, and there was a sufficient supply of hot water. At most of the establishments, the sanitary facilities were in a satisfactory state of repair. However, this was not the case at Gabrovo and Plovdiv.

There was no practice of providing personal hygiene products to detainees; at best, they could receive soap.

60. As in 1999, some detainees complained about the quality and/or quantity of food provided at the investigation detention facilities. Nevertheless, the delegation observed that detainees at Gabrovo and Petrich received two meals a day, and at the other establishments, three meals a day were served. Detainees were also allowed to receive food parcels.

61. In the report on the 1999 visit, the CPT stressed that, in view of the length of time that persons undergoing criminal investigation may spend at investigation detention facilities, it is incumbent on the Bulgarian authorities to develop a proper regime of activities. In this respect, the situation remains of serious concern to the CPT. With the notable exception of the investigation detention facility at "Major Vekilski" Street in Sofia, the investigation detention facilities visited did not even have areas for outdoor exercise, in breach of the provisions of Ordinance No. 2. Even at the "Major Vekilski" facility, outdoor exercise was apparently limited to 15 - 20 minutes a day, and no exercise was available during weekends. At some of the establishments (e.g. Botevgrad), attempts were being made to compensate for the lack of outdoor exercise facilities by allowing detainees to stroll in the corridor several times a day.

Consequently, detainees continued to spend months on end locked up in their cells 24 hours a day (apart from short visits to the toilet and an occasional meeting with their lawyers/relatives). Reading books and newspapers was the only form of occupation.

62. The CPT acknowledges the efforts made by the Bulgarian authorities to improve conditions in investigation detention facilities. The integration of this type of establishment into the system of the Main Directorate for the Execution of Punishments should enable the development of a strategy for overcoming the shortcomings of the inherited structures.

The CPT recommends that steps be taken without delay at all investigation detention facilities in Bulgaria to:

- **progressively reduce cell occupancy rates to an acceptable level. A minimum standard of 4 m² per detainee should be used in multiple occupancy cells; further, all cells of less than 6 m² should be withdrawn from service;**

- **ensure that each detainee is provided with a bed;**
- **ensure that material conditions in the cells in terms of access to natural light, ventilation, equipment, general repair and cleanliness are equivalent to those at the investigation detention facility at “Major Vekilski” Street in Sofia;**
- **introduce differentiated day/night lighting systems in the cells;**
- **ensure strict compliance with the instructions given to custodial staff to grant detainees access to the toilet at any time of day or night;**
- **provide detainees with essential personal hygiene products (including sanitary towels for women’s monthly needs);**
- **ensure that detainees are guaranteed their entitlement of one hour of outside exercise per day;**
- **provide other purposeful activities to detainees.**

Further, according to information provided by the Bulgarian authorities, by 1 April 2002, there were 93 persons who had spent over six months in investigation detention facilities. The CPT invites the Bulgarian authorities to explore all possibilities for reducing the period spent in investigation detention facilities; **it would like to be informed of the concrete steps taken to this effect.**

d. health-care services

63. The situation concerning the provision of health care in the investigation detention facilities visited was similar to that described in the report on the 1999 visit (cf. CPT/Inf (2002) 1, paragraphs 82 to 84). In particular, new arrivals were seen by a doctor/feldsher immediately or soon after admission, and access to outside hospital facilities was in principle not a problem.

64. In the report on the 1999 visit, the CPT stressed the important contribution that health-care services in investigation detention facilities can make to the prevention of ill-treatment by the police, through the systematic recording of injuries observed on newly arrived detainees and, if appropriate, the provision of information to the relevant authorities.

The manner in which medical examinations were performed, and their results recorded, at the investigation detention facilities visited remained practically unchanged as compared to the 1999 visit (cf. CPT/Inf (2002) 1, paragraph 23). The examination of medical records kept at those facilities revealed once again that entries in cases of alleged ill-treatment were very brief and there was no mention of the relevant statements made by the person concerned. Some of the detainees interviewed by the delegation who alleged ill-treatment by the police had the impression that the doctors who examined them upon arrival at the investigation detention facility pretended not to see their bruises. According to one detainee, when he pointed out such injuries, the doctor only told him that “they will fade”. Further, medical examinations were carried out as a rule in the presence of non-medical staff (custodial staff, investigators).

Consequently, the CPT must reiterate the recommendations that:

- **steps be taken to ensure that health-care staff at investigation detention facilities always record in a detailed manner any injuries observed on persons admitted to such facilities (i.e. the nature, location, size and specific characteristics of each and every injury). It is important that the medical record drawn up includes, in addition to a description of injuries observed, any relevant statements made by the person concerned (and in particular allegations of ill-treatment) and the doctor's conclusions. In his conclusions, the doctor should indicate the degree of consistency between the allegations made and the objective medical findings;**
- **the results of every examination, including the above-mentioned statements and the doctor's conclusions, be made available to the detained person and his lawyer;**
- **existing procedures be reviewed in order to ensure that whenever injuries are recorded by a doctor which are consistent with allegations of ill-treatment made by a detained person, the record is systematically brought to the attention of the relevant prosecutor;**
- **all medical examinations be conducted out of the hearing and - unless the doctor concerned expressly requests otherwise in a particular case - out of the sight of non-medical staff.**

e. other issues

65. Considerable improvement was observed as regards detainees' contact with the outside world. The investigation detention facilities had been equipped with separate rooms for visits, and detainees could benefit from two visits of up to 45 minutes each per month. At the time of the visit to the recently re-opened facility in "Major Vekilski" Street in Sofia, the visiting arrangements had not yet been put into practice. **The CPT would like to receive confirmation that this is now the case.**

66. At some of the investigation detention facilities visited, detainees were familiar with the internal regulations, copies of which were posted in the cells or distributed upon admission. However, this was not the case at the facilities in "Major Vekilski" Street in Sofia, Byala Slatina, Gabrovo and Kazanluk. **The CPT recommends that this shortcoming be rectified.**

67. As regards complaints procedures, the delegation was informed that they were similar to those applicable to prisons. This has been confirmed by the recent amendments to the Law on the Execution of Punishments, according to which persons deprived of their liberty can send confidential complaints to a number of institutions (cf. Art. 37 (2)). **The CPT trusts that steps will be taken to ensure that persons detained in investigation detention facilities are put in a position to exercise effectively their right to lodge confidential complaints.**

2. Prisons

a. preliminary remarks

68. The CPT's third periodic visit to Bulgaria included a follow-up visit to Burgas Prison and a first full visit to Pleven Prison. Further, in the light of information received on the spot, the CPT's delegation decided to pay a short targeted visit to the basement-level reception/transit unit of Sofia Prison.

69. As during the 1999 visit, the issue of prison overcrowding was raised during the initial discussions with the Minister of Justice and representatives of the prison administration. The CPT's delegation was informed of various measures conceived to relieve this problem and to improve the reintegration of prisoners. These measures included the development of the existing system of semi-open and half-way institutions and the introduction of probation as an alternative to imprisonment. According to recent amendments to the Law on the Execution of Punishments, prisoners who have displayed good behaviour become eligible for transfer to more open conditions already after serving 6 months of their sentence in a closed establishment (on condition that the remainder of their sentence does not exceed five years). The timing of such transfers is to be decided in the light of individual risk-assessments. The CPT welcomes this approach.

The CPT trusts that the Bulgarian authorities will pursue the application of a range of measures designed to combat prison overcrowding, including policies to limit or modulate the number of persons sent to prison. As regards the latter, the Bulgarian authorities should take into account the principles and measures set out in Recommendation No. R (99) 22 of the Committee of Ministers of the Council of Europe concerning prison overcrowding and prison population inflation.

70. As during previous visits, the employment situation for inmates in the prison establishments visited was far from satisfactory, a problem which reportedly exists throughout the Bulgarian penitentiary system. The Bulgarian authorities acknowledged that the provision of appropriate work to sentenced prisoners was a fundamental part of the rehabilitation process. The CPT would stress again that in the interests of their psychological well-being, remand prisoners should as far as possible also be offered work (as well as other purposeful activities). It follows that the employment situation within the prison system should not be dictated exclusively by market forces. **If necessary, special measures should be introduced with a view to promoting employment for prisoners.**

b. ill-treatment

71. During its 1999 visit, the CPT's delegation was inundated with allegations of various forms of ill-treatment of inmates by prison officers at **Burgas Prison**. By contrast, in 2002 the overall situation in the establishment as regards ill-treatment was found to have improved considerably. Generally, the atmosphere was significantly less tense and relations between prisoners and staff were noticeably more relaxed than had been the case in 1999.

Notwithstanding these positive developments, which appeared to be largely due to the change of management, several allegations were received of recent beatings of inmates by groups of prison officers, in particular following attempts to escape. Further, some prisoners claimed that verbal abuse by staff remained a common occurrence.

72. Hardly any allegations of recent physical ill-treatment of prisoners by staff were heard at **Pleven Prison**; overall, relations between staff and prisoners were relaxed. Several prisoners interviewed by the delegation claimed that prison officers' attitudes and behaviour had noticeably improved since the new Director had taken up his duties in October 2001.

73. The delegation did receive several allegations of physical ill-treatment of prisoners by staff at **other prisons**, in particular Stara Zagora and Pazardjik. The alleged ill-treatment was said to be directed primarily against newly arrived prisoners, and to involve premeditated beatings by prison officers at night.

74. In its previous reports, the CPT highlighted the importance of prison management delivering the clear message that both physical ill-treatment and verbal abuse of inmates is not acceptable and will, if discovered, be dealt with severely. **The CPT recommends that the Bulgarian authorities at both central and local level remain vigilant in this respect and recall the above-mentioned message to prison staff at suitable intervals.**

75. The CPT's mandate is not limited to the prevention of ill-treatment inflicted by prison staff. The Committee is also very concerned when it discovers a culture which is conducive to inter-prisoner intimidation and violence. At Pleven Prison, the CPT's delegation heard accounts from both inmates and staff of inter-prisoner violence (especially fights) and intimidation. This was borne out by the establishment's register of incidents and disciplinary sanctions.

The CPT recommends that staff at Pleven Prison make use of all means at their disposal to prevent inter-prisoner violence and intimidation; tackling the phenomenon of inter-prisoner violence requires of prison staff that they be alert to signs of trouble and both determined and properly trained to intervene when necessary.

c. conditions of detention

i. *Burgas Prison*

76. The visit to Burgas Prison was of a follow-up nature, the establishment having been first visited by the CPT in 1999 (cf. CPT/Inf (2002) 1, paragraphs 111 and seq.). In their responses to the report on that visit, the Bulgarian authorities referred to a number of measures aimed at implementing the recommendations made by the Committee. The present report considers the progress made, and makes some proposals for further action.

77. On the day of the visit, 414 inmates were accommodated in the closed part of Burgas Prison. This represented an improvement on the situation observed in May 1999, when the closed part of the establishment was holding 560 inmates. The majority of the prisoner population (74%) were sentenced.

78. As regards material conditions, the delegation observed that some positive changes had taken place since the 1999 visit. With a view to reducing the overcrowding, the 5th floor of the main accommodation building (formerly used as a warehouse) had been converted into accommodation for working prisoners. The dormitories in this part of the establishment had large windows, which provided adequate ventilation and access to natural light, and were equipped with beds and personal lockers. Living space per inmate was more generous than elsewhere in the prison, but remained rather restricted (e.g. 5 to 7 inmates in a room of 19 m²).

Other changes involved the fitting out of a new reception unit on the 3rd floor, in anticipation of the amendments to the Law on the Execution of Punishments which increase the period spent by newly arrived prisoners in the reception unit to one month. Conditions in this unit were superior to those seen in the old reception unit in 1999. The cells were equipped with individual beds, lockers, a table and chairs. Further, there was a pleasant dining room and a sanitary facility with toilets, sinks and showers.

Recent repair works had been carried out or were underway in other parts of the establishment. In particular, the shutters obstructing the cell windows in the high security units had been removed. The CPT welcomes this development and hopes that the same holds true throughout the Bulgarian prison system. Further, adequate dining rooms had been constructed in each unit, as a result of which the large canteen in the basement was no longer in operation. Electricity supply had been a serious problem in 1999; the delegation was pleased to note that the situation had improved in this respect. Prisoners had access to electricity from 6 am to 10 pm. Access to the bathroom had also improved in comparison with 1999 and was currently once every 7 to 10 days.

79. Despite the above-mentioned efforts to improve the material environment for prisoners, conditions in most of the dormitories remained very cramped (e.g. 13 inmates in a dormitory of 27 m²).

Further, as in 1999, there were no in-cell toilets. The cells were unlocked between 6 am and 10 pm, as a result of which there was no problem with access to a toilet during the day. However, at night the practice of using buckets inside the cells continued. The prison management informed the delegation of a project for installing in-cell sanitation, which was said to be awaiting financing.

80. As regards food, both prisoners and staff stated that there had been an improvement since 1999. Nevertheless, the food provision remained problematic; working prisoners in particular complained about insufficient food. The daily food allowance per prisoner was 0.98 Lev (i.e. 0.49 Euro) and had to be supplemented with products from the prison's farm.

81. The prison management informed the delegation of various efforts made to improve the employment situation for prisoners. At the time of the visit, 171 inmates in the closed part of the establishment had jobs (i.e. 41% of the population).⁶ The majority of them (96) worked outside the prison on contracts with private firms. Within the prison, inmates were employed in the mechanical workshop (25), the furniture workshop (5), on various cleaning or maintenance duties (39) and on the refurbishment of the accommodation building (7).

As in 1999, the prison did not have a school; prisoners who wished to study could be transferred to Lovech Prison, but few were motivated to take up this opportunity as it would interfere with visits from their families. Some 17% of prisoners were illiterate. The management team had reportedly applied in 2001 for finance for a project to increase literacy, but had had no reply. The delegation was informed that vocational training courses were being organised periodically. Further, more attention was reportedly being paid to assisting prisoners awaiting release (individual and group meetings with a pedagogue, a social worker and a psychologist).

Prisoners were allowed generous out-of-cell time: between 6 am and 10 pm, the cell doors were unlocked and they could move freely within the units. In some units, the association rooms had been refurbished and were equipped with TV sets and table tennis.

82. The CPT welcomes the progress made in respect of material conditions and activities for prisoners at Burgas Prison, and trusts that the establishment's management will spare no efforts to carry through the improvements already planned. In addition, **the CPT recommends that the management of Burgas Prison continue to seek ways to:**

- **reduce the occupancy levels of the dormitories, a minimum standard of 4 m² per prisoner to be used for this purpose;**
- **improve the quantity and quality of food;**
- **facilitate prisoners' access to the toilet at night and discontinue the use of buckets;**
- **further develop the activities for prisoners, in particular by exploring the scope**

⁶ All prisoners held in the other parts of Burgas Prison were employed.

for literacy programmes, education and vocational training.

ii. Pleven Prison

83. Pleven Prison is located some 8 km from the city, in the Kailuka Park. The establishment was brought into service as a closed prison for recidivists in 1983. With an official capacity of 300 inmates, at the time of the visit it was holding 554 male inmates, of whom 387 were sentenced prisoners (including 4 life-sentenced inmates), 10 were remand prisoners awaiting trial ("accused") and 99 were inmates standing trial or awaiting a final sentence ("defendants"). The establishment's external semi-open labour correctional hostel, which accommodated 58 inmates at the time of the visit, is not examined in this report.

84. Prisoner accommodation was provided in a four-story rectangular building, which was overall in a poor state of repair. There were some signs of recent redecoration and refurbishment, and the management made discernible efforts to keep the premises in a reasonable state of cleanliness. Despite these efforts, material conditions left a lot to be desired.

Not surprisingly, given that it was holding some 250 inmates in excess of its official capacity, the establishment offered cramped conditions of detention, e.g. 5 inmates in a cell of 10 m², 10 in a cell of 24 m² or 19 in a cell of 37 m². In the vast majority of cells, there was little room for other furniture than bunk beds. The furniture available, and especially beds and bedding, were often in a deplorable state. On the positive side, all cells were well lit and ventilated and most of them were equipped with TV sets.

None of the cells had integral sanitation and prisoners had to use collective toilet facilities, to which they had ready access throughout the day; however, at night they had to use a bucket within their cell.

85. Non-working prisoners could have one shower a week; those employed were allowed two showers per week. There were considerable problems with the supply of personal hygiene products and the establishment's laundry facilities were inadequate to meet the needs of the inmate population. As a consequence, prisoners had to rely on improvised arrangements to clean - and dry - their clothes and bed linen in their cells. In this connection, the delegation heard numerous complaints from prisoners that their clothes were infested with lice and that the existing disinfection facilities and procedures were insufficient.

86. The establishment's kitchen was on the whole of an adequate standard and the delegation heard very few complaints from prisoners about the quality and quantity of food provided by the prison.

87. **The CPT recommends that steps be taken at Pleven Prison to:**

- progressively reduce cell occupancy rates to an acceptable level (a minimum of 4 m² per prisoner);**
- examine all possible ways of facilitating prisoners' access to the toilet at night and discontinuing the use of buckets;**
- improve the state of prisoners' bedding and provide all inmates with basic hygiene products as well as with facilities for washing their clothes and bed linen;**
- ensure that the disinfection of prisoners' clothes and of the establishment's premises is carried out in an effective manner and at suitable intervals.**

88. Inmates enjoyed generous out-of-cell time (there was an open-door policy during most of the day) and had access to reasonably equipped common areas, including spacious "club" rooms, which could be used for recreation and education.

Daily outdoor exercise of one hour was guaranteed and, at the time of the visit, a number of prisoners were seen playing ball games in the large main exercise yard. A second smaller exercise area was used exclusively by life-sentenced prisoners. The establishment also had a large hall for various celebrations; however, this facility appeared to be underused.

89. There was insufficient employment at the establishment. A mere 25% of the prisoners had a job (tailoring; reed weaving and wickerwork; carpentry; agricultural work; maintenance and cleaning duties on the prison premises), and for many of them this apparently involved only a part of the day or occasional work.

The establishment had a large production area outside its perimeter consisting of a stretch of farm land and a vast, largely obsolete, industrial complex (a former metal factory which, a number of years ago, had provided jobs for several hundred prisoners); the prison's workshops were situated in that complex.

In this connection, the delegation learnt that two posts for "work organisers" (including one related to agricultural activities) were currently vacant.

90. There were also few educational and training activities available to prisoners. The delegation was informed that 82% of inmates were either illiterate or had only basic education. The establishment's Director recognised the educational needs of most of the prisoners and endeavoured to develop the requisite programmes of activities. The delegation was shown recently established curricula for enhancing prisoners' basic literacy and civic education; some vocational training and pre-release preparation was also available, albeit only for a limited number of inmates.

Initiatives such as those mentioned above are to be welcomed, given the extremely poor educational and professional attainment of the vast majority of the inmate population at Pleven Prison. Nonetheless, there remains considerable scope for improvement.

91. To sum up, the bulk of the inmates at Pleven Prison spent most of their day in idleness. A number of prisoners interviewed complained of this situation; some of them also resented the fact that they were not in a position to earn remission of sentence through work or education. In this context, there were widespread claims of favouritism by staff in connection with the allocation of prisoners to work places and educational activities (cf. paragraph 110).

In the light of the above remarks, **the CPT recommends that the Bulgarian authorities:**

- take further urgent steps to develop activity programmes for inmates at Pleven Prison, in particular as regards work and education, including basic literacy and numeracy, taking account of the specific needs of different groups of the inmate population. In this context, a high priority should be given to fully exploiting the potential offered by the existing production and agricultural areas and to filling the vacant posts of “work organisers”;**
- make the best possible use of the establishment's areas for communal activities.**

iii. life-sentenced prisoners

92. In its previous reports, the CPT made recommendations concerning the conditions under which life-sentenced prisoners were held, and the regime applicable to them. The evidence gathered during the 2002 visit suggests that steps have been taken by the Bulgarian authorities to improve the situation of life-sentenced inmates in the light of these recommendations. In this regard, the CPT's delegation was pleased to learn of plans to progressively integrate life-sentenced prisoners into mainstream prison regimes. Pursuant to the recent amendments to the Law on the Execution of Punishments (cf. Art. 127b), the commission set up at each prison for the purpose of making decisions on prisoners' regime can decide, on the basis of individual risk assessment, to transfer life-sentenced prisoners to ordinary units with the right to participate in work, education, sport and other activities.

93. At the time of the visit, Burgas Prison held eleven life-sentenced prisoners (including three whose sentences had not been confirmed). Similar to other parts of the establishment, the section for life-sentenced prisoners had benefited from recent refurbishment. Due to the removal of shutters from cell windows, ventilation and access to natural light had clearly improved. New cell equipment had been delivered and each cell (measuring 6 m²) was about to be fitted with a bed, table, chair, notice-board and cupboard. The delegation was informed that the plans to build a new high-security facility had been abandoned in anticipation of penal policy changes which would enable life-sentenced prisoners to be eventually accommodated together with other prisoners.

94. Material conditions of detention of the four life-sentenced inmates at Pleven Prison were distinctly inferior to those at Burgas. The prisoners concerned were accommodated in individual front-grilled cells of a mere 4.5 m², in a specific section of the third floor. Access to natural light and fresh air was through small windows in the corridor situated in front of the cell; as a consequence, lighting and ventilation were poorer than elsewhere in the establishment and the cells could apparently become very hot and stuffy in summer. The cell equipment consisted of a bed, locker, table and chair; in addition, prisoners could have a personal television set.

The CPT recommends that immediate steps be taken to improve material conditions of detention of life-sentenced prisoners at Pleven Prison. These improvements should include providing larger cells (cells of 4.5 m² are unsuitable for use as prisoner accommodation) and better access to natural light and ventilation.

95. At both establishments, life-sentenced prisoners' access to the toilet facilities was restricted to three times a day. At other times, they had to use a bucket within their cells. **The recommendations already made in paragraphs 82 and 87 concerning access to toilet facilities apply equally to life-sentenced prisoners.**

96. At the two prisons, life-sentenced inmates referred to recent improvements to their regime, involving, at Burgas, access to the library and recreational activities (e.g. TV, video projections), and at Pleven, the possibility of playing table-tennis. Further, at both establishments, the inmates concerned had been given some productive/creative work which they could carry out in their cells. Finally, they were now allowed to use the phone. These are all steps in the right direction.

However, life-sentenced prisoners complained about the lack of possibilities for associating among themselves and with other prisoners. The little time available for face-to-face interaction during daily outdoor exercise (which, at Pleven Prison, they took in groups of two) and recreational/sports activities did not offer adequate scope for human contact. **The Committee recommends that life-sentenced prisoners at Pleven Prison be allowed to take outdoor exercise together (and not only in groups of two).**

More generally, **the CPT recommends that the Bulgarian authorities continue to develop the regime of life-sentenced prisoners at Burgas and Pleven prisons, as well as at other prisons throughout Bulgaria, by integrating them in the mainstream prison population, in accordance with the above-mentioned amendments to the Law on the Execution of Punishments. The Committee would like to receive information on the practical use made by the prison commissions of the possibility to transfer life-sentenced prisoners to ordinary units.**

iv. *reception/transit cells at Sofia Prison*

97. The basement-level reception/transit unit of Sofia Prison was used to hold, for periods of up to two weeks, new arrivals as well as prisoners from other establishments who had to attend court hearings.

The delegation saw three cells of varying sizes⁷, all in an advanced state of dilapidation. The two larger cells measured 17 and 20 m² and, at the time of the visit, held 9 and 12 inmates respectively. This is already far too high an occupancy level; if used at their maximum intended capacity (i.e. 12 and 14 inmates), the living space would be as little as 1.4 m². The third cell measured 5 m² and had 4 sleeping places; once again, this is an excessively high occupancy level.

⁷

In addition to a small and pleasantly decorated cell occupied by the unit's duty prisoner.

Access to natural light and ventilation was obstructed by metal plates fixed to the cell windows; as a consequence, the air was stifling. The delegation was told that the lack of ventilation posed particular problems in summer. Further, the artificial lighting was dim.

Most of the floor space was taken up by bunk beds, leaving virtually no room for any other furniture. Beds and bedding were generally in a pitiful state: filthy, moist and fraying mattresses, dirty threadbare sheets and blankets; several prisoners complained that they had not been provided with pillows. The premises as a whole were infested with cockroaches and other vermin. Further, prisoners had no proper access to toilet facilities and had to use a bucket, which was emptied several times a day. Maintaining acceptable standards of personal hygiene was practically impossible under such conditions. In the largest cell, the delegation also saw electric wiring which was clearly not in conformity with even the most basic safety standards.

98. On the positive side, the delegation heard no complaints about treatment by staff and regular access to outdoor exercise was guaranteed. Nevertheless, holding prisoners under conditions such as those described above, even for relatively short periods of time, could be considered as amounting to inhuman and degrading treatment.

99. As already mentioned (cf. paragraph 8), at the end of the visit, the delegation made an immediate observation under Article 8 (5) of the Convention, asking the Bulgarian authorities to take the basement-level reception/transit cells of Sofia Prison out of service and to provide confirmation, within three months, of the action taken. By letter of 26 July 2002, the Bulgarian authorities informed the CPT that the reception/transit cells were no longer used as prisoner accommodation. Further, pending the creation, by the end of 2002, of a new reception unit "up to the requirements and recommendations of the CPT", alternative accommodation on "other, appropriate premises within the prison" had been provided. **The CPT would like to receive information on the operation of the new unit.**

d. health-care services

100. As regards health-care staff resources, the full-time health care team at **Burgas Prison** (comprising a doctor, a feldsher, a medical orderly and a dentist) had been complemented by a nurse, in accordance with the CPT's recommendation. However, after the retirement of the psychiatrist one month previously, the establishment had to use the services of an external psychiatric centre on a consultancy basis.

At **Pleven Prison**, health care was provided by a doctor, a dentist, a psychiatrist and a feldsher, all working full-time. However, no qualified nurse was present at the establishment. The prison also employed an inmate as an orderly, who inter alia assisted the doctor during examinations, distributed medication and handled prisoners' medical files.

101. At both prisons, no qualified health-care staff were present at night and during weekends. In the absence of such staff, the establishments relied on the public emergency medical services. Further, the limited attendance hours of health care staff resulted in prescribed medication being distributed by non medical staff, especially during weekends. Moreover, the meagre staff resources reportedly created temporary bottlenecks in the provision of health care during periods when one or more members of the health care staff were absent.

The CPT recommends that staffing levels and hours of attendance of health-care personnel at both establishments be reviewed, in the light of the above remarks. More specifically, the Committee recommends that:

- as a matter of priority, at least one full-time qualified nurse be appointed at Pleven Prison;**
- efforts be made to fill the post of psychiatrist at Burgas Prison;**
- steps be taken to ensure that someone qualified to provide first aid, preferably with a recognised nursing qualification, is always present on the premises of Burgas and Pleven Prisons, including at night and weekends.**

102. In its previous reports, the CPT stressed that the employment of inmates as orderlies should be seen as a last resort, and prisoners should under no circumstances be involved in the distribution of medicines. Further, such persons should not be given access to medical files, nor should they be present during medical examinations. **The Committee recommends that the position of the prisoner working as an orderly at Pleven Prison be reviewed, in the light of these considerations.**

103. The delegation heard hardly any complaints about access to the doctor and no particular difficulties were noted as regards the transfer of prisoners to outside hospitals or other specialist medical services. However, at both prisons, there were some complaints about the standard of treatment and care, in particular as regards the range of medication prescribed and the quality of dental care. **The CPT would like to receive the comments of the Bulgarian authorities on these matters.**

104. At Burgas Prison, the health-care facilities were basically the same as those described in the report on the 1999 visit (cf. CPT/Inf (2002) 1, paragraph 135) and do not call for specific comments.

The health-care premises at Pleven Prison comprised several rooms (including a two-bed quarantine room and a 7-bed medical ward) which displayed shortcomings similar to those observed in other parts in the establishment (overcrowding; poor state of some of the bedding). Nevertheless, the delegation noted that some refurbishment work had recently been undertaken. Overall, the facilities were adequately equipped and reasonably clean.

105. Unlike in 1999, the delegation did not find any evidence suggesting possible delays in the medical screening of newly-arrived prisoners. As a rule, such examinations took place within a few hours of arrival and were performed by the doctor or - in his absence - by the feldsher who reported to the doctor. The CPT welcomes this state of affairs.

106. Since the previous visit, only limited progress appears to have been made in respect of medical documentation and the handling of medical data in Bulgarian prisons. On the positive side, at both establishments visited, all sentenced prisoners (including those with sentences of less than a year) had individual medical files. However, this was apparently not yet the case for remand prisoners. Further, the practice of including results of the medical examination on admission in prisoners' general administrative files (to which other staff had access) still continued.

The CPT trusts that, in line with its previous recommendations, steps will be taken to open a personal and confidential medical file for each prisoner, including those on remand.

The CPT also recommends once more that the practice of including confidential medical information in inmates' general administrative files be discontinued.

107. Both Burgas and Pleven prisons held a certain number of inmates suffering from tuberculosis. Tangible efforts were being made by the respective health care services to address the issue on the basis of the updated "Working programme for combating tuberculosis in the prison system", established by the Ministry of Justice in co-operation with the Ministry of Health.⁸

At both establishments, it was standard practice for prisoners with active TB to be transferred to Lovech Prison Hospital for intensive treatment; following this, sustaining treatment was administered by the respective health care services. The CPT's delegation was told at the two prisons that there was a sufficient supply of anti-tuberculosis medication. However, it would appear that the taking of anti-tuberculosis medication at both establishments was not monitored on an ongoing basis, as prescribed by the DOTS strategy for tuberculosis control. **The CPT would like to receive the comments of the Bulgarian authorities on this matter.**

More generally, the information received by the CPT's delegation during the 2002 visit indicated that the prevalence of tuberculosis in the Bulgarian prison population had fallen noticeably since 1999. This is a positive development. **The CPT encourages the Bulgarian authorities to ensure that vigilance is maintained in respect of tuberculosis control in all penal establishments, especially through adequate screening of the inmate population and the provision of appropriate material resources and training of health care staff. Tuberculosis control should be effected in a consistent manner across the prison system, and in accordance with standards applied in the outside community.**

e. other issues related to the CPT's mandate

i. *prison staff*

108. The information gathered by the delegation suggests that, since the last visit, the Bulgarian authorities continue to devote considerable attention to the training of newly recruited officers and staff already in service. The acquisition and development of interpersonal communication skills (for example via special courses in conflict resolution/mediation) appears to be given particular attention. The CPT welcomes this.

⁸ Cf. CPT/Inf (2002) 1, paragraph 146, and CPT/Inf (2002) 2, page 49.

109. As mentioned above (cf. paragraphs 71 and 72), at both prisons, the relations between inmates and staff had apparently improved considerably over recent years. Notwithstanding this, signs of a distant attitude of staff towards prisoners were still discernible (e.g. reluctance of some of the custodial staff to engage in a dialogue with inmates; little specific knowledge of the inmate population; lack of alertness to inter-prisoner violence and intimidation).

110. At Pleven Prison, a number of inmates interviewed by the delegation claimed that certain staff members (including senior managers) would accept or request payments in exchange for providing work opportunities (and thus help remission of sentence), supporting applications for temporary leave from the establishment, or - more mundanely - for turning a blind eye to inmates' gambling or alcohol consumption. The CPT's delegation was favourably impressed by the prison Director's determination to eradicate such practices.

In this regard, the CPT wishes to stress that a relationship which exploits, or is widely perceived to exploit, persons who are deprived of their liberty by a public authority is clearly unacceptable. More particularly, the exercise of prisoners' rights and their earning of privileges must never depend on payments made, or improper services rendered, to staff. Such dealings amount to an abuse of authority and must be dealt with severely.

111. The CPT recommends that the Bulgarian authorities deliver to both managerial and basic grade staff the clear message that receiving or demanding advantages from prisoners is not acceptable and will be the subject of severe sanctions; this message should be reiterated in an appropriate form at suitable intervals.

More generally, the CPT encourages the Bulgarian authorities to pursue their efforts in the area of prison staff training, both at the induction stage and for staff already in service. In the course of such training, appropriate emphasis should be placed on adherence to official policies, practices and regulations of the prison service.

ii. contact with the outside world

112. Both sentenced and remand prisoners received two visits from relatives per month⁹. Further, a number of sentenced inmates benefited from temporary leave ("interruption of sentence" for up to seven days) on a regular basis; the delegation was informed at Pleven Prison that only a small (and lately decreasing) proportion of prisoners on leave failed to return to the establishment on time.

In the light of the remarks made in paragraph 110, the CPT recommends that efforts be made to ensure that the granting of applications for temporary leave is effected in an impartial and objective manner.

⁹ According to law, sentenced prisoners are entitled to no less than one visit of 30 minutes per month, and remand prisoners, to two visits of 45 minutes each per month.

113. The visit facilities at Burgas Prison remained basically unchanged. However, proper seating arrangements had now been provided for visitors, and visits took place on several days per week, which should relieve somewhat the noise and high occupancy levels which had apparently prevailed previously on the single day set aside for visits.

At Pleven Prison the visiting facilities were spacious and airy and contained adequate stools and benches for prisoners and their visitors.

At both establishments, visits generally took place under closed conditions (with inmates and visitors separated by a double metal netting). At Pleven Prison, the delegation was told that, several years previously, provision had been made - on an experimental basis - for more open visiting conditions; however, these arrangements had been discontinued, reportedly because of the frequent passing of contraband items between visitors and inmates.

The CPT recommends that possibilities be explored for introducing more open visiting arrangements at Burgas and Pleven prisons, if necessary with enhanced supervision. It might be worthwhile to explore in this connection whether the existing facilities at Pleven Prison could be split into two areas designed for visits under closed and more open conditions.

114. The Committee was told that new regulations were in the process of being elaborated which would allow for more flexibility in the handling of visits, depending on the behaviour of the prisoners concerned and the risks posed by them. **The CPT would like to receive additional information on this question.**

115. At the two establishments, prisoners had been given access to a telephone, which was of particular benefit to those who did not receive regular visits because their families lived a long way from the establishments. The CPT welcomes this development.

iii. discipline

116. The disciplinary procedure applicable to prisoners as described in the report on the 1995 visit remained basically unchanged and can still be considered as "on the whole satisfactory" (cf. CPT/Inf (2002) 2, paragraph 152). The CPT's delegation was informed that changes to the system of disciplinary punishments for prisoners were in the process of being introduced. **The CPT would welcome additional information on this subject.**

117. At Burgas Prison, the metal plates covering the windows had been removed in the disciplinary cells, as elsewhere in the establishment. The CPT welcomes this positive development. However, **the Committee recommends once again that the disciplinary cells at Burgas Prison be fitted with a table and chair, if necessary fixed to the floor.**

Material conditions in the disciplinary cells of Pleven Prison were found to be quite satisfactory in terms of size (some 9 m²), lighting, ventilation and equipment. The latter consisted of a wooden sleeping platform, table and chair; further, the delegation was told that mattresses and blankets were provided when the cells were in use.

118. The CPT was pleased to note that, at both establishments, inmates subject to the sanction of disciplinary confinement had access to reading matter and were allowed one hour of outdoor exercise per day.

However, prisoners undergoing disciplinary confinement (as those on normal location) had no permanent access to sanitary facilities and had to use a bucket at times when no escort to these facilities was available. **The recommendations on this question made in paragraphs 82 and 87 apply equally here.**

iv. complaints and inspection procedures

119. Inmates at Burgas and Pleven prisons were generally aware of the various avenues of complaint available to them, both within and outside the prison system. At both prisons, inmates could either place sealed written complaints in special boxes or hand them over to the duty prisoner (or staff), who then passed them on to the prison director; the latter was responsible for transmitting the complaints to the relevant external addressee. The delegation was told that, according to a new procedure, all written complaints to an outside authority (including those addressed to the prison administration) were recorded in a special register together with the name of the complainant and the addressee.

In this regard, the CPT wishes to stress that a procedure which implies that the fact that a given prisoner has lodged a complaint with an outside authority is systematically brought to the attention of the management of the establishment where the prisoner concerned is held, is almost certainly not conducive to him developing a sense of trust in that procedure.

In fact, as was the case in 1995 and 1999, a number of prisoners spoken to by the delegation expressed doubts as to the effectiveness and confidentiality of the existing complaints system: at Burgas Prison, several prisoners asserted that confidential complaints to external bodies had been opened by the establishment's management. A large number of inmates at Pleven Prison alleged that internal complaints (and applications) to the Director were frequently not responded to. At both establishments, complaints boxes were apparently rarely used. **The CPT would like to receive the comments of the Bulgarian authorities on the above matters.**

120. As regards inspections, both Burgas and Pleven prisons received regular visits by the regional prosecutor entrusted with supervising the execution of sentences. Most inmates interviewed by the delegation knew of the possibility of requesting to meet the prosecutor on these occasions. However, at Pleven Prison, some prisoners told the delegation that these requests had not been granted, despite repeated applications.

During the visit, the delegation was made aware of a circular of 14 February 2000 issued by the Supreme Cassation Prosecutor's Office with the purpose of strengthening prosecutors' supervision over prisons, prison hostels, prison hospitals and investigation detention facilities. The circular contains detailed instructions on how prosecutors' inspections should be carried out. To mention only a few of the principles, the inspections should be both announced and unannounced, general and thematic; two days a month should be set aside for meetings with prisoners (which does not preclude meeting prisoners on other occasions at their request); the inspections should cover all aspects of prisoners' rights and duties (material conditions; work; outdoor exercise; health care; visiting arrangements; disciplinary sanctions; lodging of complaints, including in sealed envelopes, etc.). The CPT welcomes the issuing of these instructions and trusts that they will be closely followed in practice.

C. **Establishments under the authority of the Ministry of Public Health**

1. **Preliminary remarks**

121. The CPT's delegation visited a psychiatric establishment under the authority of the Ministry of Public Health: Karlukovo State Psychiatric Hospital. The bulk of the establishment's premises date back to the 19th century; initially serving as army barracks, they were used as a general psychiatric hospital since 1936. The establishment is situated in a picturesque river gorge, in the vicinity of the small village of Karlukovo. The hospital has a catchment area of more than 1 million inhabitants (i.e. the entire North-West of Bulgaria) and caters for a wide variety of patients with different diagnoses and needs.

122. At the time of the visit, the hospital had a total of 250 beds and was accommodating 220 patients, both men and women, of whom 139 had been admitted on a voluntary basis. The CPT's delegation focused upon the treatment of the 81 patients who had been placed by a court decision or a prosecutor's order. 76 of those patients were subject to a civil placement, either for compulsory treatment (52 patients) or for psychiatric assessment (24 patients). The remaining 5 persons had been declared as criminally irresponsible and were detained under the terms of the Criminal Code.

123. The CPT is grateful to the Bulgarian authorities for providing at the end of the visit information on the number of admissions to state psychiatric hospitals in the first quarter of 2002 (with a breakdown into categories) as well as the number of placements for compulsory treatment in 2000. However, it was clear from the talks with senior officials of the Ministry of Public Health that no centralised - and regularly updated - statistics on psychiatric admissions are kept. In the CPT's view, **it would be advisable for the Ministry of Public Health to compile such statistical information for all psychiatric establishments (with a breakdown into types of hospitalisation), as this will assist the authorities in the context of the ongoing reform of psychiatric health care in Bulgaria.**

2. **Ill-treatment**

124. Patients at Karlukovo Hospital generally spoke positively about the establishment's staff and no particular tension between patients and staff was observed. However, a few allegations were received of deliberate ill-treatment of patients; these concerned in particular the orderlies and consisted of kicking, slapping, pushing and occasional blows with a wooden stick. It was claimed that such behaviour occurred mainly when orderlies attempted to speed up certain routines, such as moving patients to the dining rooms or the hospital's central shower facility. Further, the delegation heard isolated allegations that some of the nurses used big keys in order to forcefully open recalcitrant patients' mouths for administering medication.

The CPT recommends that it be made clear to all staff at Karlukovo Psychiatric Hospital that practices such as those described above are not acceptable and will be dealt with severely.

125. The delegation was told by both patients and staff that inter-patient violence and bullying occasionally occurred, mostly in relation to food or items of property. Further, the delegation learned that, a week previously, a patient had killed one of his fellow patients during the night. The incident was under investigation at the time of the visit.

The CPT wishes to stress that the duty of care which is owed by staff in a psychiatric establishment to those in their charge includes the responsibility to protect them from other patients who might wish to cause them harm. This requires not only adequate staff presence and supervision at all times, including at night and weekends, but also for staff to be properly trained in handling challenging situations/patients.

The CPT recommends that the Bulgarian authorities take appropriate steps in the light of the above remarks, with a view to minimising the risk of inter-patient violence and bullying at Karlukovo Psychiatric Hospital.

In this connection, the Committee would also like to be informed of any specific measures adopted in the light of the results of the investigation referred to above.

3. Patients' living conditions

126. Accommodation was provided in three buildings of various ages, in-patients being distributed between five wards (three male and two female), depending on their diagnoses and needs. There were two closed wards (one male and one female); voluntary and involuntary patients were accommodated together on both closed and open wards.

The material conditions varied between the three buildings. They could be described as just about acceptable in ward 2 for moderately dependent male patients. However, they were poor in wards 3-5 (comprising a ward for moderately dependent male patients and two wards for female patients requiring various levels of care) and totally unacceptable in ward 1 for the most needy male patients.

127. Ward 1 was located in one of the establishment's oldest buildings. In addition to several smaller rooms for 3 to 7 patients (ranging in size from 14 to 34 m²), the ward had three large dormitories of some 60 m² each, accommodating 12 to 14 patients. Such facilities fail to provide a satisfactory level of privacy for patients. In this connection, the CPT's delegation was pleased to learn about plans to split the aforementioned dormitories into smaller units.

The ward's premises were in an advanced state of dilapidation (crumbling plaster, peeling paint, floors with broken surfaces, some windows without panes). Beds and bedding left an enormous amount to be desired; some patients had to sleep on uncovered and soiled foam mattresses, and the little other bedding available (sheets, blankets, occasional pillows) was generally worn out and filthy. There was a pervasive smell of urine in several patients' rooms despite the fact that windows and doors were left wide open. In this regard, the delegation was told that the establishment had run out of diapers for some time which posed a serious problem for the personal hygiene of incontinent patients; this deficiency was symptomatic of the general shortage of personal hygiene items.

The material environment was utterly austere and impersonal, and there were hardly any personal possessions in evidence. Further, there were no dayrooms; instead, patients wandered about the corridors or sat on low benches placed within them.

As for the sanitary facilities (lavatories and/or showers), they were in a poor state of repair and cleanliness and some of the lavatories were blocked or otherwise out of order. Hot water was not available on the ward and patients had to be taken to the central shower facility, located on the periphery of the hospital's compound. The delegation was informed that patients had access to that facility once a week, which was also said to be an occasion for them to change their pyjamas/underwear.

128. Although poor, the material conditions in wards 3-5 (situated in the second building) were somewhat better than those prevailing in ward 1. In particular, the CPT's delegation noted some signs of a more congenial atmosphere, such as occasional bedside tables/lockers in patients' rooms, the existence of dayrooms with some rudimentary decoration (plants, pictures) and furniture (usually including a television set).

129. Ward 2 for moderately dependent men was located in a third building which had only been brought into service in 1975 and, as a consequence, did not display the same level of dilapidation as the rest of the establishment. Patients' rooms had 4 to 6 beds and were relatively spacious (up to 6 m² per patient). Big windows made for a light and airy environment. As in wards 3-5, several patients' rooms were equipped with bedside tables and/lockers, and dayrooms were available.

130. At the time of the visit, the hospital's central *heating* system had already been out of order for some time. Some patients and staff spoken to by the delegation expressed doubts as to whether it would be possible to repair the system before the cold season.

131. The delegation was told that patients were allowed to wear their own *clothes*; however, most patients appeared to be dressed around the clock in the same old worn-out, and often dirty, army clothes or pyjamas. In this connection, it should be stressed that the practice of continuously dressing patients in pyjamas is not conducive to strengthening personal identity and self-esteem; individualisation of clothing should form part of the therapeutic process.

132. The CPT's delegation was very concerned by the grossly inadequate provision of *food*. Meat, fresh vegetables and fruit were only very rarely available. The establishment's Chief Medical Doctor underlined that she received 0.82 Lev (i.e. 0.41 Euro) per day to feed each patient; in order to provide all patients with an adequate diet, and to reduce reliance on food supplies from patients' relatives, a noticeable increase in the food budget would be necessary. According to staff, the quality and quantity of food had deteriorated over the last decade.

As regards the hospital's kitchen, it was reasonably well equipped (including with cold storage) and clean.

133. Another matter of concern was *patient mortality*. In 2001, a total of 37 patients died at the hospital; of these approximately 50% were less than 50 years old (25% less than 40 years).¹⁰ Nearly 60 % of all deceased patients had a recorded weight of less than 60 kg (almost 20% had a weight of less than 50 kg).

The hospital's records did not mention the cause of death of all patients. However, diagnoses frequently found in the files of deceased patients, such as anaemia (sideropenia), tuberculosis, pneumonia and other respiratory diseases, suggest a link between mortality and the conditions of deprivation (including in terms of nutrition) from which the vast majority of patients were suffering.

134. To sum up, the insufficient food provision, combined with unacceptable material conditions such as those described in paragraphs 127 to 130, will inevitably contribute to morbidity and - most likely - to increased patient mortality. Therefore, at the end of the visit, the delegation invoked Article 8 (5) of the Convention and called upon the Bulgarian authorities to immediately provide the resources required for meeting the basic needs of the patients in terms of sufficient food and adequate bedding and clothing, and to closely monitor the use of these resources.

135. In their letter of 26 July 2002, the Bulgarian authorities informed the CPT of a series of measures taken or envisaged in the light of both the aforementioned immediate observation and other issues raised by the delegation at the end of the visit. These measures will include:

- an increase in the hospital's budget for food and bedding;
- the refurbishment of patient accommodation, sanitary facilities and the hospital's kitchen;
- the repairing of the central heating system.

In the letter, the Bulgarian authorities also commit themselves to review, after a period of six months, all measures taken and their impact on the hospital's operation and patients' treatment.

136. The CPT notes the measures referred to in paragraph 135 and trusts that the highest priority will be accorded to their full and rigorous implementation, immediate attention to be given to the provision of food to patients. **The Committee wishes to receive confirmation within one month that patients are being provided with food of sufficient quantity and quality.**

Further, the **CPT recommends that the Bulgarian authorities ensure that:**

- **patients are given full bedding (mattresses, blankets, sheets, pillows) and appropriate clothes and underclothes, which are cleaned at regular intervals;**
- **patients are being provided with basic personal hygiene items (soap, toothpaste, towels, etc.); in this connection, the specific needs of incontinent patients should be duly taken into account;**
- **ward 1 and wards 3-5 are thoroughly refurbished so as to meet at least the standard reached in ward 2;**

¹⁰ Between January 2002 and the time of the CPT's visit 18 patients died at the hospital - i.e. a mortality rate comparable to the one observed during the corresponding period in 2001 (i.e. January to April).

- efforts are made to offer more congenial and personalised surroundings for patients, in particular by providing them with lockable space and allowing a reasonable number of personal belongings.

Further, the CPT recommends that the Bulgarian authorities explore the possibility of providing day rooms on ward 1.

The Committee would also like to receive the results of the six-month review referred to by the Bulgarian authorities as soon as it has been completed.

4. Treatment and staff

137. As regards treatment, despite a budget for medication of only 0.81 Lev (i.e. 0.41 Euro) per patient per day, the necessary basic medication was available. However, the range of psychiatric medication was limited. Electro-convulsive therapy (ECT) had not been applied for four years as there was no anaesthetist available.

No psychotherapy was offered and even the opportunity for patients to talk in some depth to appropriately qualified staff appeared to be very limited. Further, virtually no occupational therapeutic activities were available; cleaning duties on the ward were apparently the only occupational activity for some of the patients. Only a small number of patients were involved in some sports, gym or artistic activities.

138. The CPT wishes to emphasise that an individual treatment plan for each patient should be drawn up (including the goals of the treatment, the therapeutic means used and the staff member responsible).

In their letter of 26 July 2002, the Bulgarian authorities informed the CPT of proposals for a series of new treatment programmes at Karlukovo Hospital; it was planned to have these proposals assessed by the National Consultant in Psychiatry, prior to their implementation. **The CPT recommends that due account be taken of the above remark when finalising these programmes.**

139. A large number of patients were noted to suffer from physical disorders and illnesses. The findings of the CPT's delegation indicated that more adequate assessment and treatment of such conditions was required. More specifically, it was noted that patients' weight was not properly recorded; further, the entries seen in patients' files were usually undated and sporadic. **The CPT recommends that these shortcomings be remedied; in particular, patients' weight should be checked on admission and subsequently at regular intervals.**

140. A considerable number of patients claimed that they were only allowed to exercise in the open air in good weather. Especially during autumn and winter, they were reportedly deprived of this possibility for lengthy periods. **The CPT recommends that all patients whose medical condition so permits be offered at least one hour of outdoor exercise every day; further, the Committee recommends that some protection from inclement weather be provided in the areas where outdoor exercise is taken.**

141. To sum up, given the extreme paucity of materials and programmes for recreational and constructive socio-therapeutic activities, the vast majority of patients were confined in a state of inactivity, which clearly exacerbated the very poor living conditions at the hospital.

142. At the time of the visit, the hospital had a total staff complement of 129. The medical team comprised 5 psychiatrists (including the Chief Medical Doctor), 7 trainee psychiatrists and one physician (on sick leave at the time of the visit), all full-time. Other patient care tasks were the responsibility of 32 nurses (without, however, specific training in psychiatric nursing) and 40 orderlies. In addition, a psychologist, a social worker, a physiotherapist and a pharmacist were employed at the hospital on a full-time basis, and a dentist visited the establishment weekly. Consultations with other medical specialists could be arranged if required.

143. In the CPT's opinion, the number of psychiatrists in the establishment was at the limit of what could be considered acceptable, and the accessibility of staff to provide adequate somatic care for patients left something to be desired. Further, an increased contribution from clinical psychologists, social workers and occupational therapists would be conducive to the emergence of a multidisciplinary approach.

The Committee is particularly concerned by the overall low number of nurses and orderlies present on the wards (especially at night): during daytime, there were 2-3 nurses and 2-3 orderlies on each of the wards; this presence was reduced to one nurse and one orderly during the night. Such staffing levels tend to generate highly stressful work conditions and increase the risk of inter-patient violence and disproportionate reactions of staff towards challenging patients. Low staffing on the wards also makes it more difficult to provide appropriate assistance to patients with a limited ability to feed themselves.

Nurses working at Karlukovo Hospital should benefit from specific training for their tasks, in particular the management of patients considered to represent a security risk for other patients and staff. The orderlies should also receive appropriate training before taking up their duties and, during the performance of their tasks, they should always be closely supervised by - and subject to the authority of - qualified health care staff.

The CPT recommends that staff resources and training at Karlukovo Psychiatric Hospital be reviewed in the light of the above remarks.

5. Means of restraint

144. In those cases where the restraint of agitated and/or aggressive patients proved necessary, recourse was had to the administration of a sedative, fixation with leather belts or strips of cloth, or placement in a seclusion room. The CPT's delegation did not gather any evidence of excessive use of means of restraint.

145. The hospital's seclusion rooms were adequate in size (6 to 11 m²); however, this was their only positive feature. Access to natural light and ventilation in the rooms left a lot to be desired, and all of them were in a very bad state of repair and cleanliness. Further, in one of the rooms of ward 4, the remains of a dismantled radiator created a highly dangerous environment for patients in a state of agitation. **The CPT recommends that all seclusion rooms at Karlukovo Psychiatric Hospital be upgraded to an acceptable standard, including in terms of security for patients in a state of agitation.**

146. The CPT's delegation was very concerned by the situation of one of the patients declared criminally irresponsible who had been held in seclusion on ward 1 for 18 months. The delegation was told that the patient's long-term seclusion was necessary to ensure the security of other patients.

The patient was accommodated under very poor material conditions (cf. paragraph 145), a situation rendered all the more unacceptable by the fact that he was only very rarely allowed to leave his room. Further, no appropriate treatment plan had been established for this patient. As stressed by the delegation at the end-of-visit talks with the Head Doctor of Karlukovo Hospital, such a state of affairs is totally unacceptable. **The CPT recommends that the situation of the above-mentioned patient be reviewed as a matter of urgency; if necessary he should be transferred to another establishment which has the means to care for him in a satisfactory manner.**

147. No detailed written policy on the restraint of agitated and/or violent patients existed at the hospital. In their letter of 26 July 2002, the Bulgarian authorities informed the CPT that the Chief Medical Doctor had been recommended to "specify the criteria" for recourse to means of restraint. This is a welcome initiative.

In this regard, the CPT recommends once more (cf. CPT/Inf (97) 1, paragraph 218) that any policy on these matters should emphasise that initial attempts to restrain agitated or violent patients should, as far as possible, be non-physical (e.g. verbal instruction) and that where physical restraint is necessary, it should in principle be limited to manual control. Resort to instruments of physical restraint (straps, etc.) and/or chemical restraint will very rarely be justified.

The CPT also wishes to point out that there is a clear trend in psychiatric practice in favour of avoiding seclusion of patients.

148. The establishment had recently started to record instances of restraint of patients in the nurses' journal and the patient's file. This is a move in the right direction. However, in order to ensure that such recording serves its purpose, namely to facilitate both the management of incidents involving agitated/aggressive patients and the oversight of their occurrence, **the CPT recommends that every instance of the restraint of a patient (manual control, use of instruments of physical restraint, chemical restraint, seclusion) be recorded in a central register established for this purpose (as well as in the patient's file). The entry should include the times at which the measure began and ended, the circumstances of the case, the reasons for resorting to the measure, the name of the doctor who ordered or approved it, and an account of any injuries sustained by patients or staff.**

6. Safeguards

149. Under the Bulgarian Public Health Act (PHA)¹¹, mentally-ill persons who represent a serious danger to others or themselves can be committed by a court for compulsory treatment (including via confinement in a psychiatric establishment), pursuant to a motion by a prosecutor. The PHA provides for an obligatory psychiatric assessment, a court hearing, and an appeal procedure (within 7 days from the court decision). The patient has the right to legal representation; however, such representation is not formally required. The need for compulsory treatment has to be reviewed by the court every 6 months on the basis of a psychiatric assessment.

The information gathered by the delegation indicated that, in a number of cases, the obligatory court review of patients' placement for compulsory treatment at Karlukovo Hospital was delayed substantially (e.g. by up to 7 months) and that at least some of the review hearings were cursory and involved brief and standardised assessments. Further, a few patients also alleged that they had not had the benefit of a lawyer because they could not afford legal representation and/or that they had been denied the possibility to take the floor during the hearing concerning them.

The CPT recommends that the Bulgarian authorities take steps to ensure that the existing procedures concerning compulsory treatment are duly followed in relation to patients at Karlukovo Psychiatric Hospital and throughout Bulgaria. Particular attention should be paid to ensuring observance of the relevant time-limits by the courts, as well as of the patients' right to be heard.

The CPT would also like to receive confirmation that the right to legal representation includes legal assistance for those patients who are not in a position to pay for a lawyer themselves.

¹¹ Cf. Sections 36, 59, 62 and 63.

150. The PHA stipulates that, pursuant to a prosecutor's order¹², persons can be confined in a psychiatric establishment for psychiatric assessment for up to 30 days¹³. At the expiration of that period, patients are to be discharged, "unless the prosecutor or the court have decreed otherwise"¹⁴. **The CPT would like to be informed of the possibilities open to persons placed for psychiatric assessment to have the lawfulness of that measure decided speedily by a court.**

The documentary evidence gathered by the delegation indicated that, in many cases of placement for psychiatric assessment, the competent court had failed to issue its decision within the statutory 30 days; as a consequence, some patients had spent up to 5 months at the establishment in a legal limbo. **The recommendation made in paragraph 149 concerning the observance by the court of the statutory time-limits applies equally here.**

151. The delegation understood that in roughly 80% of all cases, the competent prosecutor had sought a medical opinion before ordering patients' placement for psychiatric assessment at Karlukovo Hospital; however, there was no legal obligation to do so.

The introduction of a formal requirement for prosecutors to seek a medical opinion before ordering a patient's confinement in a psychiatric establishment for assessment would greatly enhance the safeguards surrounding this procedure.

152. As mentioned in paragraph 122, Karlukovo Hospital also held a small number of persons declared to be criminally irresponsible, pursuant to Section 89 (b) of the Penal Code, which provides for the involuntary treatment of such persons in an "ordinary psycho-neurological establishment". As was the case for civil patients, their placement was subject to court review every 6 months; by contrast, the review procedure under criminal law involved a second psychiatric opinion, and the presence of the patient's lawyer in court was obligatory.

The delegation's findings suggest that the review procedure was generally effected in accordance with the aforementioned procedure; however, as was the case for a number of civil patients, the statutory time-limits for review were not always respected. Obviously, **the recommendation already made in paragraph 149 is equally valid in this context.**

153. Some of the "voluntary" patients interviewed at Karlukovo Hospital claimed that they had not been allowed to leave the establishment when they had expressed a wish to do so. This was confirmed by staff, who indicated that the discharge of these patients could not be envisaged because they had nowhere to go. The CPT recognises that families may often not be in a position to provide proper care to (often chronically) mentally-ill family members, nor may suitable community-based facilities (e.g. hostels, sheltered housing, foster families) always be available. However, the CPT considers that the authority to limit the liberty of movement of the patients concerned requires a proper legal basis. **The CPT would like to receive the comments of the Bulgarian authorities on this point.**

¹² The delegation was told at Karlukovo Hospital that such orders were based on Section 185 of the Code of Criminal Procedure, which places a general obligation on the prosecutor "to take all the necessary measures to prevent a crime".

¹³ Cf. Section 61, paragraphs 2-4 of the Public Health Act and Section 5, paragraphs 1 and 2 of the Instruction No. 1/81 of the Ministry of Public Health.

¹⁴ Cf. Section 5, paragraph 3 of the Instruction No. 1/81 of the Ministry of Public Health.

154. The CPT wishes to stress that patients should, as a matter of principle, be placed in a position to give their free and informed consent to treatment. The very concept of "committal for compulsory treatment", as contained in the Bulgarian Public Health Act, appears to be at variance with this principle. In the CPT's opinion, the involuntary hospitalisation of a patient who is competent should not be automatically construed as authorising treatment without his consent. This implies inter alia that patients should be fully informed about the treatment which it is intended to prescribe.

In this connection, the CPT's delegation was shown a form on which patients certified, among other things, that they had received information concerning their treatment, and that they accepted, or refused, such treatment ("Declaration of informed consent to treatment"). The delegation was told that all voluntary patients were asked to sign the form. However, there appeared to be no clear rules as to whether the declaration also applied to involuntary patients. **The CPT would like to know whether there is a formal requirement to use the above procedure for consent to treatment in respect of involuntary patients (i.e. persons committed for psychiatric assessment and/or compulsory treatment or in-patients declared as criminally irresponsible).**

Further, the delegation gathered information which indicated that, in certain cases, involuntary patients (particularly those committed for psychiatric assessment) had very recently been persuaded - with little explanation - to sign the above declaration of consent to treatment; **the CPT would welcome the comments of the Bulgarian authorities on this issue.**

155. The delegation was informed that involuntary patients at Karlukovo Hospital had been involved in pharmaceutical clinical trials. **The CPT would like to receive information on the ethical review system and the procedure applied with a view to enabling involuntary patients to give their informed consent to such trials.**

156. As regards information for patients, there were indications that patients (or their legal representatives) had not always been served promptly with copies of the prosecutors' orders or court decisions concerning them, setting out, inter alia, the remedies available to challenge these orders/decisions and the applicable time-limits. More generally, it appeared that even patients with the necessary capacity did not have a clear understanding of their legal position. **The CPT would like to receive the comments of the Bulgarian authorities on these matters.**

More generally, it has already been stressed in previous visit reports (cf. CPT/Inf (97) 1, paragraph 221 and CPT/Inf (2001) 1, paragraph 186), that an introductory brochure setting out the establishment's routine and patients' rights (including possibilities for appeal) should be issued to each patient on admission, as well as to their families. Any patients unable to understand this brochure should receive appropriate assistance. In the light of the CPT's findings during the 2002 visit, **the Committee must reiterate its recommendation on this issue.**

157. An effective complaints procedure is another basic safeguard against ill-treatment in psychiatric establishments. Specific arrangements should exist enabling patients to lodge formal complaints with a clearly-designated body, and to communicate on a confidential basis with an appropriate authority outside the establishment.

The delegation was told that it was most unusual for patients at Karlukovo Hospital to make complaints. Many of the patients interviewed did not appear to be aware of any avenues of complaint other than addressing staff directly. In their letter of 26 July 2002, the Bulgarian authorities informed the CPT that a "procedure" for lodging complaints, including on a confidential basis, would be set up at Karlukovo Hospital. **The Committee would like to receive more information on this procedure (for example, timetable for its introduction; list of authorities/bodies to which complaints can be addressed; steps to ensure the confidentiality of complaints; etc.).**

158. As regards external supervision, the delegation was informed that the hospital was regularly visited by the competent services of the Ministry of Public Health and the regional health authority. However, the results of such visits were not always made available to the hospital's management. The establishment had also received visits by the Bulgarian Helsinki Committee, which was said to have reported back on its findings and recommendations.

The CPT recommends that regular visits to psychiatric establishments by independent bodies be encouraged. Such bodies should be authorised, in particular, to talk privately with patients, receive directly any complaints, transmit them, if appropriate, to the competent authority, and make any recommendations. Further, the management of all psychiatric establishments should be duly informed of the results of any inspections carried out on their premises.

159. In respect of contact with the outside world, the situation at Karlukovo Hospital was on the whole satisfactory. However, due to the remote location of the establishment and/or the financial situation of the families concerned, some 40 patients did not receive any visits. In this regard, **the CPT invites the Bulgarian authorities to explore the possibility of setting up a system of volunteer visitors for patients in psychiatric establishments.**

Further, several patients claimed that they had no access to the public phones available on the hospital's premises. **The CPT would welcome clarification of this point.**

D. **Establishments under the authority of the Ministry of Labour and Social Policy**

1. Preliminary remarks

160. The CPT's delegation visited one establishment falling under the authority of the Ministry of Labour and Social Policy: the "Home for adults with mental disorders" in the village of Razdol, Strumyani municipality (Blagoevgrad Region). Set up in 1958 on former border police premises, the Home is located in an isolated mountainous area, in close proximity to the border with "the former Yugoslav Republic of Macedonia". With an official capacity of 120, at the time of the visit it was accommodating 113 female residents, ranging in age from 23 to 79 years. According to information provided by the Home's management, 60 of the residents were mentally retarded (including some 20 women with severe neurological and motor disabilities), 46 suffered from mental disorders, mainly schizophrenia, and the remainder had alcohol dependency or dementia. The majority had spent many years at the Home; some had been admitted directly from a social home for children and their discharge was an unlikely event.

161. According to senior officials at the Ministry of Labour and Social Policy, the key problems of the homes for adults with mental disorders and/or mental retardation (of which there are some 50 in Bulgaria) are linked to the obsolete premises in remote locations, the shortage of health-care and other staff, and insufficient funding. The financing of such homes is currently the responsibility of the local municipality, which often fails to provide the requisite resources. The delegation was informed that the Ministry was contemplating a new, centralised system for financing, which would involve the calculation of a standard upkeep cost per resident, and transferring the money from the State budget directly to the home.

The need was also stressed to introduce a better differentiation between social and medical criteria for admission to homes for adults with mental disorders and/or mental retardation, including by means of amending the legislative basis. As a result of the reduction of the number of psychiatric beds, many chronic psychiatric patients had been "abandoned" by the system of the Ministry of Health and, for lack of other structures, had ended up in homes under the Ministry of Labour and Social Policy. The National Programme for Mental Health apparently failed to recognise this fact, the resources under the programme being primarily assigned to the Ministry of Health. **The CPT would like to receive more information on these issues.**

2. Ill-treatment

162. The atmosphere at the Home in Razdol appeared relaxed and the staff's attitude to residents seemed to be marked by care and kindness. Nevertheless, the delegation heard a limited number of allegations of ill-treatment of residents by staff. In particular, several residents complained of rough treatment by some of the orderlies, e.g. being pushed in order to move or eat faster. A few allegations were also heard of residents being hit with sticks by orderlies and locked overnight in a room referred to as "the kartzer" (cf. paragraph 176) in retaliation for attempted escapes.

The CPT recommends that the Home's staff, and in particular the orderlies, be reminded that the ill-treatment of residents is not acceptable and will be dealt with severely.

3. Living conditions and care of residents

163. The Home occupies a large compound comprising a three-storey building with sleeping quarters for the residents and several auxiliary constructions.

The delegation was told that, until recently, conditions at the Home had been appalling: severe shortage of beds and bedding, no shower room, deficient heating, to mention but a few of the problems. The situation had somewhat improved due to the efforts of staff and the regional and municipal social services, who had managed to attract private donations and assistance from NGOs. Shortly before the visit, residents had been provided with hospital-style beds, due to a fresh supply of aid by a foreign donor. Nevertheless, material conditions remained unsatisfactory in many respects.

164. The majority of the residents were accommodated in two large dormitories, each measuring some 110 m². Units of this size are far from ideal; the provision of accommodation structures based on small groups is a crucial factor in preserving/restoring residents' dignity.

The dormitories had big windows, and as a result access to natural light and ventilation were adequate; however, the artificial lighting (consisting of a few bare electric bulbs) was deficient. Heating was provided by a stove placed in the centre of the dormitories, which presented a fire risk. Beds constituted the only item of furniture (33 and 35 beds respectively in each dormitory) and were lined up in dense rows, leaving very little space to move around. Full bedding in generally good condition was provided (however, in the dormitory on the first floor, used for incontinent residents, pillows were seen on only three of the beds). The dormitories had been painted recently and were clean. Nevertheless, the absence of other pieces of furniture, such as lockers, or decoration created a highly impersonal atmosphere.

Bedridden residents with severe neurological and motor disabilities were accommodated in three smaller rooms on the first floor. One of the rooms, measuring 28 m², contained 7 beds, a table and chair, and a TV set. At the time of the visit, nine residents were present in that room, as a result of which two of the beds were shared; this is unacceptable. The other two rooms measured 12 m² and accommodated three residents each. The rooms' furnishings were very sparse and the atmosphere austere.

Somewhat better conditions were observed in seven rooms on the top floor, which were designed for double or triple occupancy. The rooms measured 10 - 12 m² and, in addition to beds, contained lockers, tables, TV and radio sets, as well as some decoration (pictures, photographs).

165. The Home's sanitary facilities were totally inadequate to meet the residents' needs. The toilets were insufficient in quantity, dilapidated and unsuited for persons with serious physical disabilities. The recently installed shower room was located in a building some 200 m from the sleeping quarters. It comprised four shower heads and two basins. The delegation was told that residents could have a weekly shower; however, according to residents, this happened only once a month.

166. The clothing worn by residents was individualised. However, some residents complained about the poor state of their shoes.

Some hygiene items were provided by the Home (soap, washing powder, toothbrushes) and from donations (cosmetics). However, residents claimed that they had no access to shampoo and sanitary napkins for their monthly needs.

Further, diapers for incontinent residents were in short supply, and a stench of urine permeated some of the dormitories, despite staff's efforts to air the premises. The residents' bedding had to be washed frequently, which, in the absence of a proper laundry, was done by hand. However, three new washing machines had just been donated.

167. Both staff and residents stated that the provision of food had substantially improved in recent months. The daily food allowance per resident was 1.72 Lev (0.86 Euro). The kitchen was modestly equipped but seemed to function satisfactorily. Food was served in a canteen in the basement of the main building, which had recently been fitted out with tables and chairs.

168. The Home employed a total of 38 staff at the time of the visit. The recently appointed Director was a nurse by education and had worked at the establishment for many years. There were 3 nurses, 3 social workers, 2 occupational therapists and 15 orderlies. A feldsher had been employed at the Home until seven months before the visit; however, the post was currently vacant. The doctor's post had also been vacant for some fifteen years; the delegation was told that a general practitioner from the municipal centre visited the Home once a month. Further, since August 2001, the Home had been visited twice a month by a psychiatrist from the regional centre, Blagoevgrad.

The nurses worked in two shifts; there was no night nurse (however, during the week, the Director was lodged on the Home's premises and could apparently be called in case of need). The orderlies worked in three shifts; at night, only two orderlies were on duty.

169. At the time of the visit, 49 residents were receiving antipsychotic medication. Common neuroleptics were being used in ordinary doses, and the delegation observed no signs of overmedication. The psychiatrist, whom the delegation had the opportunity to meet in Blagoevgrad, stated that since taking up her contract at the Home, she had examined all residents and regularly adjusted their medication; this was borne out by the residents' medical cards. The nurses distributed the medicines twice a day.

The delegation was told that, once a year, an external medical commission visited the Home and examined all residents. However, access to outside medical specialists at other times was problematic. Some residents complained of various health problems (e.g. they needed eyeglasses). The Home had not been visited by a dentist since 1989, and the residents' teeth were in a deplorable condition. In case of emergency, residents could reportedly be taken to a dentist in Strumyani.

The delegation was informed that hospitalisation for somatic treatment was problematic; a staff member had to stay with the residents during in-hospital care, a requirement difficult to meet given the shortage of staff at the Home. The transfer of residents to a psychiatric hospital was apparently easier as the above-mentioned requirement did not apply (such hospitals having the relevant expertise themselves).

170. The delegation observed that medical files were adequately kept and their confidentiality respected. Each resident had a medical card, which contained periodic notes by the psychiatrist and the GP, as well as the results of the examination by the external medical commission. The cards were kept in the nurses' room, together with other medical records, and could be accessed only by health-care staff.

171. During the day, the residents who were not bedridden stayed in three day-rooms located in a separate building. The room assigned to the least disabled residents was pleasantly decorated with plants and pictures; there were some games, children's books and a TV set. Staff in that room made efforts to engage the residents in some activity (reading, singing, drawing, embroidery, knitting). In the second day-room, elderly residents sat silently along the walls, clinging to their few possessions which they carried around with them in bags; a TV set blared away in the background. The third day-room, intended for the most severely retarded residents, was run-down (peeling paint, broken window panes) and undecorated. The residents sat in the adjacent enclosed yard, rocking to and fro on their chairs; there was no sign of interaction with staff.

172. The management told the delegation that they were making efforts to re-introduce some form of occupational therapy for residents in the Home's animal farm (raising pigs and chickens) and vegetable garden.

However, the residents' life was characterised by monotony and passivity, the Home lacking staff, facilities and programmes for recreational or constructive socio-therapeutic activities. Many of the women had spent decades at the Home and were so severely handicapped or institutionalised that their re-integration into society would be difficult, if not impossible.

173. To sum up, the Home in Razdol had neither the material environment nor the human resources necessary to provide appropriate care to residents suffering from serious mental disorders, psychomotor deficiencies and/or mental retardation. The remote location of the Home (which was rendered even more inaccessible because of the poor condition of the road and the lack of public transport) seriously limited the possibilities for recruiting qualified staff and impeded visits by outside doctors. In addition, the low remuneration made employment at the Home an unattractive option.

The Head of the Regional service for social assistance informed the delegation of intentions to eventually move the Home to a different – less isolated - location, and to construct small sheltered accommodation for some of the residents. Four day-centres for persons with mental deficiencies had already been opened in the region; this was an example of the beginning of a new trend of returning such persons to society after decades of isolation.

174. The CPT welcomes the Bulgarian authorities' plans to reorganise the system of homes for persons with mental disorders and/or mental retardation. In the case of the Home in Razdol, urgent change is clearly needed. **The Committee recommends that the plans to relocate the Home for adults with mental disorders in Razdol be given a high priority; it wishes to receive the time-table envisaged for this.**

The Committee also wishes to stress that mentally retarded persons and mentally ill patients have different needs and preferably should not be mixed together. In the interest of residents, the Bulgarian authorities should introduce a better differentiation in social homes which will enable persons with mental illnesses to receive a level of treatment which is adapted to their needs, and persons with mental retardation to receive the stimulation, support and care required by their condition. This would involve an overall rethinking of the system for providing care to persons with mental illnesses and mental retardation within the framework of the National Mental Health Programme. **The CPT would welcome the comments of the Bulgarian authorities on this issue.**

175. Pending its relocation, the CPT recommends that steps be taken at the Home for adults with mental disorders in Razdol to:

- provide each resident with a bed and full bedding;
- personalise the living environment for residents by means of providing lockable space and visual stimulation;
- refurbish the toilets, as a matter of priority;
- ensure that residents are bathed at least once a week;
- supply residents with an adequate range of personal hygiene items (toothpaste, diapers for incontinent residents, sanitary towels for women's monthly needs);
- increase the number of staff involved in direct and continued contact with the residents (nurses, educators, occupational therapists);
- increase the number of staff assigned to the night shift and ensure that at least one nurse is present at night;
- increase the attendance hours of the GP and the psychiatrist;
- ensure that residents have access to specialist medical care (dentist, optician);
- provide residents with more materials for recreational activities (books, newspapers, etc.);
- refurbish the day-room used for the most severely mentally retarded residents.

4. Means of restraint

176. Staff indicated that there was no resort at the Home to instruments of physical restraint; the handling of agitated or violent residents was reportedly limited to manual control and the use of medication. Further, the delegation was informed that seclusion was not practised at the Home.

However, as already noted (cf. paragraph 162), some allegations were heard concerning a room referred to as the "kartzer" where residents who had attempted to escape would apparently be placed. The room in question was locked and the delegation had to insist that it be opened. The Home's management denied that the latter room – which had been transformed into a warehouse shortly before the visit – had been used in the alleged manner.

The CPT wishes to stress that seclusion should never be used as a punishment vis-à-vis mentally ill or mentally handicapped persons.

As regards the recording of instances of restraint of residents, the CPT recalls the remarks made in paragraph 148 **and recommends that a specific register be established for this purpose.**

5. Safeguards

177. The procedure for placement in homes for persons with mental deficiencies and/or disorders is contained in Ordinance No. 4 of 16 March 1999 on the conditions and rules for providing social services. Pursuant to section 32, the placement decision is made by the Head of the municipal service for social assistance, on the basis of an application by the person concerned, his family or legal guardian, and a medical certificate. Discharge can take place on a written application by the person concerned or his legal guardian, or following changes in the former's mental or physical condition.

178. From the information gathered during the visit, it transpired that only one resident had herself applied to be placed in the Home. Five residents with acquired mental disorders had been declared legally incompetent and had been placed in the Home on the application of their guardians. As for the remaining residents with "acquired mental illnesses" and the majority of the residents with "inborn deficiencies", they were legally competent and had apparently been placed involuntarily in the Home following an application by their family. These residents were effectively deprived of their liberty for an indefinite period. If a resident attempted to leave the Home, she was tracked down by staff and returned. During the visit, many residents kept pleading with staff to let them "go home".

As the CPT stressed in the report on the 1999 visit, a person involuntarily placed in an institution by a non-judicial authority must have the right to bring proceedings by which the lawfulness of his/her placement is speedily decided by a court. From the information gathered during the 2002 visit, it would appear that no such right currently exists. **The CPT recommends that steps be taken to introduce a right for persons involuntarily placed in homes for persons with mental deficiencies and/or disorders to have the lawfulness of that placement decided speedily by a court. Further, persons placed involuntarily in such a home should be immediately informed of their right to bring proceedings to have the lawfulness of their placement decided by a court. In addition, a system should be developed under which the need for continuing the placement in a home for persons with mental deficiencies and/or disorders is automatically reviewed at regular intervals.**

The CPT would also like to receive information on the procedure for consent to treatment in respect of persons admitted to homes for persons with mental disorders and/or mental retardation.

179. The delegation was told that between 1987 and 1999, the Home had not received visits by an outside body. Since 1999, the Head of the Regional service for social assistance had started paying monthly visits to the establishment. Visits by officials from the municipal service for social assistance and the Ministry of Labour and Social Policy were also in principle possible. Further, some NGOs had started visiting the Home.

Regular visits to establishments like the Home in Razdol by an independent body (e.g. a judge or a supervisory committee) can substantially contribute to the prevention of ill-treatment and, more generally, to the improvement of conditions. Such a body should be authorised, in particular, to talk privately with residents, receive their complaints and, if necessary, make recommendations. **The CPT invites the Bulgarian authorities to consider introducing such an inspecting mechanism.**

180. Residents' contact with the outside world was practically non-existent. The residents came from all over Bulgaria, and most of them had been abandoned by their families. Trips to nearby historical and cultural sites provided a welcome if rare opportunity for residents to see a world beyond the boundaries of the Home. Further, in recent years, NGOs and private donors had become involved with the situation of the residents. **The CPT encourages the Bulgarian authorities to pursue their efforts to improve residents' contact with the outside world.**

181. **The CPT also reiterates the recommendations made in the report on the 1999 visit to Bulgaria, in respect of the Home in Terter, that:**

- **an introductory brochure setting out the Home's routine and residents' rights be issued on admission to residents and their families. Residents unable to understand this brochure should receive appropriate assistance;**
- **special arrangements be made enabling residents to lodge formal complaints with a clearly designated body and to communicate on a confidential basis with an appropriate authority outside the establishment.**

E. Establishments under the authority of the Ministry of Education

182. The Correctional boarding school in the village of Yagoda, Muglizh municipality is one of seven establishments run by the Ministry of Education for children “who have committed anti-social acts and in respect of whom all other educational measures have failed”. Pursuant to the 1961 Law on combating anti-social acts by juveniles, the decision to place a child in a correctional school is taken by a district court, following a proposal by the local commission for combating anti-social behaviour. The children are allocated to correctional schools by a commission set up at the Ministry of Education. The maximum length of stay is three years (extendable by one year with the consent of the child concerned, in order to complete the course of study).

183. The school in Yagoda occupies an extensive compound (50,000 m²) on the outskirts of the village. The building, dating back to 1963, has considerable spare capacity: up to 120 children used to be lodged there in the past, including girls (the wing previously used for girls was not in use). On the first day of the visit, the delegation was informed that the school had 42 boys in its care, aged from 7 to 18 years. However, it subsequently emerged that only 15 boys were in fact present at the school, the remainder being either on the run or in the juvenile prison in Boychinovtsi.

The official staff complement was 24, including 9 teachers and 7 educators (the rest were non-pedagogical staff). An educator and a guard were on duty at night.

184. In view of reports of problems at the Correctional boarding school at Yagoda in previous years, the CPT is pleased to note that there were no allegations of ill-treatment of children by staff in recent months. The new school Director said that she was resolved to overcome the history of abuse; the staff members who had ill-treated children had been dismissed, and criminal proceedings opened against them. **The CPT trusts that the new management of the Correctional boarding school in Yagoda will remain vigilant in this respect and ensure that staff are kept fully aware that both physical ill-treatment and verbal abuse of children is not acceptable and will be dealt with severely.**

185. As to living conditions, the premises showed clear signs of dilapidation and abandonment. Only three dormitories (measuring 22 – 32 m²) were currently in use, containing, respectively, four, five and eight beds. The dormitories had large windows, providing ample light but posing problems for heating; one of the dormitories had a stove, while the others had radiators which were turned off. Conditions in the dormitories were generally shabby (broken old furniture, frayed bed linen, scattered dirty clothes) and the standard of hygiene was poor. Further, the décor was impersonal with few signs of efforts to alleviate the austerity of the premises.

The delegation also had concerns about the possibilities for children to maintain their personal hygiene. The sanitary facilities were dilapidated and dirty. In the absence of a functioning bathroom, the children were taken to the public bath in the village once a week. The first floor of the unused wing was in the process of being turned into a laundry.

186. Food was served in a spacious dining room. The daily food allowance per child was 1.75 Leva (0.87 Euros) and was supplemented by donations from private companies. However, the children did not seem well nourished and some of them complained that food was not sufficient.

187. The children were assigned to five educational groups and attended classes in pleasantly decorated classrooms. The educational programme had been drawn up specifically for the needs of this type of establishment and involved mostly the teaching of basic literacy and numeracy skills. However, there was scope for developing other structured activities. After classes, the boys seemed largely unoccupied and there was not much interaction with staff. The school had a large fitness room, newly furnished with bodybuilding machines and table tennis. The boys could also play sports games in the yard, go for a walk in the village accompanied by an educator, or play football in the village stadium. In the evening, they watched television in a specially assigned room.

The school used to have good facilities for vocational training. However, over time the carpentry and metal workshops had fallen into disuse and there were signs of vandalism. The boys could reportedly work in the school's garden, but there was not much evidence of that (the orchard was overgrown, and a new tractor donated by the Bulgarian Red Cross was lying unused).

188. To sum up, the school in Yagoda has the potential to offer adequate living conditions and activities, provided that sufficient resources can be made available. **The CPT recommends that:**

- **priority be given to the refurbishment of the school's premises and, in particular, the children's sleeping areas, which should be properly furnished, well-decorated, clean and personalised;**
- **steps be taken to provide appropriate heating and improve the sanitation;**
- **efforts be made to develop the range of vocational training and recreational activities offered to the children, and to ensure that they are engaged in structured activities under the supervision of adequate staff throughout the day.**

The CPT also invites the Bulgarian authorities to verify that the children are receiving sufficient food, in terms of both quantity and quality, and are provided with appropriate clothing.

189. Turning to health care, the school did not employ its own health-care staff. All children were registered with the medical centre in the village and were brought there when in need of medical attention. New admissions to the school did not undergo a routine medical examination; likewise, children returned to the school after an escape or a transfer elsewhere were medically examined at the discretion of staff. No personal medical files were kept.

The CPT recommends that steps be taken at the Correctional school in Yagoda to:

- **ensure that all new arrivals at the school as well as children returned to the school after an escape or a transfer elsewhere are medically screened; provision should also be made for regular attendance by a paediatrician;**
- **compile a personal medical file for each child, containing diagnostic information as well as an ongoing record of his development and of any special examinations he has undergone. In the event of transfer, this file should be forwarded to the doctors in the receiving establishment.**

190. Further, the CPT would like to receive information on the professional composition of the local commissions for combating anti-social behaviour, and the procedure for reviewing placements in correctional boarding schools.

F. Establishments under the authority of the Ministry of Defence

191. In 2002, a CPT delegation visited for the first time in Bulgaria three Ministry of Defence detention facilities: two army disciplinary units ("arrests") in Pleven and Gorna Banya, and a temporary detention facility of the military police in Sofia. The delegation met only one detained person (at Gorna Banya); he stated that he had been treated well by custodial staff.

192. The disciplinary units are used for the cellular confinement of conscripts for up to 10 days. Confinement as a disciplinary sanction can only be imposed by company commanders, or other officers equivalent or superior in rank. In case of especially serious infringements of discipline (e.g. prolonged absence from the garrison while on armed sentry duty), detention for periods exceeding 10 days can be ordered, subject to authorisation by the military prosecutor. **The CPT would like to receive more information on this issue (e.g. types of infringements which warrant disciplinary confinement of over 10 days; maximum possible term).**

193. The temporary detention facility was reserved for soldiers arrested by the military police for having committed disciplinary violations outside garrison territory, prior to being returned to their garrisons, and servicemen suspected of criminal offences, pending their release or transfer to an investigation detention facility. The maximum duration of stay in the facility was 24 hours.

194. Material conditions in the "arrests" left a lot to be desired.

The "arrest" of the Central Training Centre for junior officers and new recruits in Pleven had 6 cells of some 7 m² for an intended maximum capacity of three detainees each. The cells were dimly lit and poorly ventilated; their small grilled windows were covered with metal plates and the artificial lighting was very weak. In-cell equipment consisted of three plank beds, fixed to the wall and folded during the day, and a stool. The delegation was told that, on average, no more than two detainees were held in each of the cells.

The "arrest" of the 9th Armoured Tank Brigade in Gorna Banya had two dilapidated bar-fronted holding cells, measuring 8 and 14 m² respectively. Unlike at Pleven, the detention area was well lit and ventilated. However, the in-cell equipment was even more spartan than at Pleven, comprising merely 2-3 retractable wooden sleeping benches (which were folded during the day); there were no seating arrangements. According to the establishments' registers, up to 15 conscripts undergoing disciplinary punishment had on occasion been held in these cells.

At both "arrests", detainees were not provided with mattresses and blankets at night and had to sleep in their uniforms. The common lavatories and showers were, overall, in a poor state of repair and cleanliness. However, access to these facilities did not appear to be problematic.

195. As regards the regime, the delegation was told that, as a rule, detainees participated in military drill and/or other activities (e.g. cleaning duties) during the day; in the absence of such activities, they were entitled to daily outdoor exercise of 50 minutes. As for in-cell activities, these were limited to reading the army newspaper.

196. **The CPT recommends that, at both "arrests":**

- **the permissible cell occupancy be set at such a level as to offer at least 4 m² per detainee;**
- **detainees be provided with clean mattresses and blankets at night; if necessary, the relevant statutory provisions should be amended;**
- **all cells be equipped with adequate means for sitting (fixed to the floor if necessary) and a table;**
- **the state of repair and hygiene of the common sanitary facilities be improved;**
- **all detainees be offered outdoor exercise for at least one hour per day;**

The CPT also recommends that the metal plates covering the windows at the "arrest" of the Central Training Centre for junior officers and new recruits in Pleven be removed.

197. All soldiers placed in an "arrest" were examined by a doctor before admission. Further, in case of need, they could have access to a doctor during detention.

198. As regards safeguards in respect of disciplinary proceedings, the army statutes require that soldiers be informed in writing of the charges against them, and that they be heard in person. Disciplinary sanctions may be appealed against to a higher commanding officer. The disciplinary procedure is thus accompanied by appropriate safeguards.

199. The temporary detention facility of the Regional Army Security Service in Sofia had a cell of 16 m² which was well-lit and ventilated. The equipment consisted of a bed (with full bedding) and a table and bench fixed to the floor. The cell was clean, but in a rather poor state of repair; **the CPT invites the Bulgarian authorities to remedy this shortcoming.**

The cell contained a metal rail, at a height of some 110 cm, to which it was said detainees who were violent or drunk could be handcuffed. In the CPT's opinion, this is not an appropriate way of dealing with persons in a state of agitation. **The recommendation already made on this subject in respect of police cells applies equally in this context (cf. paragraph 39).**

The communal lavatory was of an acceptable standard.

200. The examination of the facility's records indicated that periods spent in custody were not always properly documented (e.g. missing entries concerning the date and/or time of release/transfer). **The CPT recommends that the keeping of custody records at the detention facility of the Regional Army Security Service in Sofia be improved.**

201. Finally, **the CPT would like to be informed whether detention facilities under the authority of the Ministry of the Defence are visited on a regular basis by an outside inspection body (such as a military prosecutor or NGOs).**

III. RECAPITULATION AND CONCLUSIONS

A. Establishments under the authority of the Ministry of Internal Affairs

202. A considerable number of persons interviewed by the CPT's delegation during the 2002 visit alleged that they had been ill-treated by the police. Most of the alleged ill-treatment related to the time of initial questioning by operational police officers and inquiry officers, and was reportedly aimed at the obtaining of confessions and/or information. Some allegations were also heard of the disproportionate use of force at the time of apprehension.

The forms of physical ill-treatment alleged mainly concerned slaps, punches, kicks and blows struck with truncheons, wooden bats and other hard objects. Further, some persons alleged that they had spent prolonged periods of time handcuffed to rails, radiators or other fixed objects, and had been physically assaulted while restrained. A few allegations were received of asphyxiation using a gas mask, the infliction of electric shocks and beating on the soles of the feet. The ill-treatment alleged was on occasion of such a severity that it could be considered as amounting to torture.

203. The delegation was particularly concerned by the striking number of allegations of the recent resort to severe ill-treatment at the 3rd District Police Directorate in Sofia; in two cases, medical evidence consistent with those allegations was gathered. In response to an immediate observation under Article 8 (5) of the Convention, the Bulgarian authorities carried out an inquiry into the methods used during the interrogation of criminal suspects at that establishment. Although, the inquiry concluded that no unequivocal facts and evidence of ill-treatment could be gathered, it did bring to light a number of violations and deficiencies, which were the subject of recommendations by the inspecting commission. The CPT has sought information on the measures taken in response to those recommendations, as well as on the outcome of checks carried out at other district police directorates in Sofia.

204. To prevent ill-treatment by the police, the Committee has proposed measures concerning the integration of human rights concepts into professional training of all ranks and categories of law enforcement staff, and the action to be taken by judges when criminal suspects brought before them allege ill-treatment by the police. The CPT has also stressed the importance of persons released from police custody without being brought before a judge having the right to directly request a medical examination from a recognised forensic doctor.

205. A series of recommendations designed to strengthen the formal safeguards against ill-treatment offered to persons deprived of their liberty by the police have been made by the CPT in the past. The information gathered by the delegation during the 2002 visit suggests that much remains to be done in this area. In particular, there are still no legal provisions explicitly guaranteeing the rights of notification of custody and access to a doctor to persons detained by the police. The Committee has recommended that such provisions be adopted.

Further, the CPT has reiterated its recommendations with regard to access to a lawyer (which should apply from the very outset of deprivation of liberty, and not only when a formal order of detention is issued) and the provision of legal assistance for detained persons.

The CPT has welcomed the introduction in March 2002 of a form called “declaration of rights”, which is a step in the direction of implementing some of the Committee’s previous recommendations. It has recommended that measures be taken to ensure that this form is given systematically to all persons apprehended by the police, at the very outset of their custody and, if necessary, explained to them.

206. Conditions of detention in the police stations visited remained on the whole inadequate. The CPT has identified a number of specific measures designed to remedy the shortcomings observed. In particular, all cells should be equipped with a means of rest suitable for overnight stays, persons detained overnight should be provided with clean mattresses and blankets, and detainees should not be exposed to the view of visitors to the police station. Moreover, police establishments should be allocated a specific budget to cover the cost of providing food to detained persons.

207. At the time of the 1999 visit, the CPT expressed concern about persons in police custody spending significant periods of time attached to metal rails in a standing position. During the 2002 visit, the delegation noted that police cells were fitted with rails fixed to the wall at a height of about 1.20 m, which would allow persons to sit while attached. Nevertheless, the CPT remains of the view that detention in a cell normally does not require the use of additional restraints. The Committee has called upon the Bulgarian authorities to remove altogether the metal rails fixed inside police cells; persons in custody who are drunk and/or violent should be placed in a separate, appropriately equipped and closely supervised cell.

208. Conditions at the detention facility of the National Border Police Service in Petrich were, in general, acceptable. However, the toilet and washing facilities used by detained persons left a great deal to be desired. Further, it appeared that detained foreign nationals had practically no information about their future situation and had not been able to seek advice from a lawyer. The CPT has recommended measures to rectify these shortcomings.

B. Establishments under the authority of the Ministry of Justice

209. As regards **investigation detention facilities**, scarcely any allegations were heard of ill-treatment of detained persons by custodial staff. One allegation was received concerning violence between detainees (which involved a juvenile detainee apparently beaten by an adult detainee with whom he was sharing a cell). In this connection, the CPT has recommended that steps be taken to ensure full compliance in investigation detention facilities with the principle of separation of adult and juvenile detainees.

210. As for conditions of detention, practically all the investigation detention facilities visited were undergoing renovation, and the one at “Major Vekilski” Street in Sofia had re-entered service a couple of weeks before the visit, following extensive transformation. Efforts were being made to address the problem of lack of access to natural light and poor ventilation; further, improvements had been made to cell equipment. However, a lot remained to be done. The investigation detention facilities were generally overcrowded, even when the maximum official capacity was observed. Moreover, three of the facilities visited (in Byala Slatina, Kazanluk and Petrich) continued to be located underground. The CPT trusts that the movement towards better material conditions will be maintained.

The situation as regards activities remains of serious concern to the CPT. With the notable exception of the establishment at "Major Vekilski" Street in Sofia, the investigation detention facilities visited did not even have areas for outdoor exercise. Consequently, detainees continued to spend months on end locked up in their cells 24 hours a day (apart from short visits to the toilet and an occasional meeting with their lawyers/relatives). Reading books and newspapers was the only form of occupation.

The CPT has identified a number of specific measures designed to remedy the shortcomings observed. More generally, the Committee has invited the Bulgarian authorities to explore all possibilities for reducing the period spent in investigation detention facilities.

211. Turning to **prisons**, the situation at Burgas Prison as regards the treatment of inmates by prison officers was found to have improved considerably in comparison with 1999; the atmosphere was significantly less tense and relations between prisoners and staff noticeably more relaxed. Nevertheless, several allegations were received of recent ill-treatment of inmates by groups of prison officers, in particular following attempts to escape. At Pleven Prison, hardly any allegations of recent physical ill-treatment of prisoners by staff were heard. The delegation did receive several allegations of physical ill-treatment of prisoners by staff at other prisons, in particular Stara Zagora and Pazardjik. The CPT has recommended that the Bulgarian authorities at both central and local level remain vigilant and recall at suitable intervals that both physical ill-treatment and verbal abuse of inmates is not acceptable and will be dealt with severely. In the light of the delegation's findings, the Committee has also recommended that staff at Pleven Prison make use of all means at their disposal to prevent inter-prisoner violence and intimidation.

212. The CPT has noted with interest various measures conceived to relieve the problem of overcrowding in the Bulgarian penitentiary system. The Committee has welcomed in particular recent amendments to the legislation, according to which prisoners who have displayed good behaviour are eligible for transfer to more open conditions after serving 6 months of their sentence in a closed establishment (on condition that the remainder of their sentence does not exceed five years).

213. With regard to conditions of detention, at *Burgas Prison*, some positive changes in material conditions had occurred since the CPT's visit in 1999 (e.g. removal of the shutters obstructing the cell windows in the high security units, fitting-out of a new reception unit, etc.). Efforts had also been made to improve the employment situation of prisoners (41% of the inmates had jobs). However, conditions in most of the dormitories remained very cramped. Further, due to the lack of in-cell toilets, the practice of using buckets inside the cells at night continued.

The CPT has welcomed the progress made and recommended that the management continue to seek ways to reduce the occupancy levels of the dormitories, facilitate prisoners' access to the toilet at night, and further develop activities for prisoners.

214. Material conditions at *Pleven Prison* left a lot to be desired, despite some signs of recent redecoration/refurbishment and discernible efforts to keep the premises in a reasonable state of cleanliness. As at Burgas Prison, inmates were accommodated in cramped conditions and had no access to the collective toilet facilities at night. As regards activities, only 25% of the inmates were employed. There were also few educational and training activities available to prisoners.

The CPT has identified a number of steps designed to improve the situation: a progressive reduction of the cell occupancy rates to a minimum of 4 m² per prisoner; facilitating prisoners' access to the toilet at night; improving the state of prisoners' bedding; developing activity programmes, including curricula for enhancing prisoners' basic literacy and numeracy skills.

215. Material conditions of detention in the *basement-level reception/transit cells of Sofia Prison*, to which the delegation paid a targeted visit, were totally unacceptable and gave rise to an immediate observation at the end of the visit. The Bulgarian authorities subsequently informed the CPT that the cells in question were no longer used as prisoner accommodation and that a new reception unit would be created before the end of 2002.

216. Steps had been taken to improve the situation of life-sentenced prisoners, in the light of recommendations made by the CPT in the past, in particular in respect of their regime (e.g. access to recreational activities, permission to use a phone). Further, at Burgas Prison, ventilation and access to natural light in the cells accommodating such prisoners had improved and better cell equipment was about to be installed. Material conditions of detention of life-sentenced inmates at Pleven Prison were distinctly inferior; recommendations designed to remedy this shortcoming have been made.

The CPT has welcomed plans to progressively integrate life-sentenced prisoners into mainstream prison regimes.

217. As to the provision of health-care to prisoners, the CPT has recommended that staffing levels and hours of attendance of health-care personnel at both Burgas and Pleven Prisons be reviewed. Further, certain recommendations concerning medical documentation and the handling of medical data in prisons have been reiterated. The Committee has also encouraged the Bulgarian authorities to ensure that vigilance is maintained in respect of tuberculosis control in all penal establishments, especially through adequate screening of the inmate population and the provision of appropriate material resources and training of health care staff.

218. The CPT has made a number of recommendations and comments about other issues of relevance to its mandate (staff; contact with the outside world; discipline; complaints and inspections). In particular, the Committee has encouraged the Bulgarian authorities to pursue their efforts in the area of prison staff training, both at the induction stage and for staff already in service.

C. Establishments under the authority of the Ministry of Public Health

219. Patients at *Karlukovo State Psychiatric Hospital* generally spoke positively about the establishment's staff and no particular tension between patients and staff was observed. However, a few allegations were received of ill-treatment of patients by orderlies (kicking, slapping, pushing and occasional blows with a stick), mainly when the latter attempted to speed up certain routines. The CPT has recommended that it be made clear to all staff at the hospital that such behaviour is not acceptable and will be dealt with severely. Steps should also be taken with a view to minimising the risk of inter-patient violence and bullying.

220. Patients' living conditions ranged from just about acceptable to totally unacceptable. In Ward 1, in particular, the delegation saw rooms which were in an advanced state of dilapidation. Further, beds and bedding left an enormous amount to be desired. Such material conditions, combined with a grossly inadequate provision of food, will inevitably contribute to morbidity and - most likely - to increased patient mortality. At the end of the visit, the delegation called upon the Bulgarian authorities to immediately provide the resources required for meeting the basic needs of patients and to closely monitor the use of these resources. The CPT has noted the measures subsequently taken and has made further recommendations aimed at improving the situation.

221. As regards treatment, the necessary basic medication was available, though the range of psychiatric medication was limited. Hardly any other therapeutic options (e.g. psychotherapy, occupational therapeutic activities) were available. The CPT has noted plans for a series of new treatment programmes at the Hospital and in this context has emphasised the need for an individual treatment plan for each patient. Further, a more adequate assessment and treatment of patients' physical disorders and illnesses was required.

The CPT has also recommended that staff resources and training at the hospital be reviewed.

222. There was no evidence of excessive use of means of restraint. However, in the light of the delegation's findings, the CPT has recommended that all seclusion rooms at the Hospital be upgraded and has reiterated its recommendations concerning the drawing-up of a written policy on the restraint of patients and the recording of every instance of restraint.

223. The CPT has also raised a number of issues concerning the safeguards which apply in the context of involuntary hospitalisation (observance of the time-limits for court reviews; consent to treatment; information to patients; complaints procedure; external supervision, etc.). In particular, the Committee has recommended that regular visits to psychiatric establishments by independent bodies be encouraged.

D. Establishments under the authority of the Ministry of Labour and Social Policy

224. The atmosphere at the "Home for adults with mental disorders" in the village of Razdol appeared relaxed and the staff's attitude to residents seemed to be marked by care and kindness. Nevertheless, the delegation heard a limited number of allegations of ill-treatment of residents by staff, especially by some of the orderlies. The CPT has recommended that the Home's staff, and in particular the orderlies, be reminded that the ill-treatment of residents is not acceptable and will be dealt with severely.

225. As regards living conditions and treatment of residents, despite the efforts of staff and the assistance received from private donors and NGOs, the Home in Razdol had neither the material environment nor the human resources necessary to provide appropriate care to residents suffering from serious mental disorders, psychomotor deficiencies and/or mental retardation. The remote location of the Home seriously limited the possibilities for recruiting qualified staff and impeded visits by outside doctors.

The CPT has welcomed the Bulgarian authorities' plans to reorganise the system of homes for persons with mental disorders and/or mental retardation. In the case of the Home in Razdol, urgent change is clearly needed. The Committee has therefore recommended that the plans to relocate the Home be given a high priority. Pending its relocation, the CPT has identified a number of specific steps designed to improve material conditions and the treatment of residents.

226. On the subject of the safeguards applicable to persons involuntarily placed in homes for persons with mental deficiencies and/or disorders, the CPT has in particular recommended that steps be taken to introduce a right for such persons to have the lawfulness of their placement decided speedily by a court. Further, the need for continuing the placement should be automatically reviewed at regular intervals.

E. Establishments under the authority of the Ministry of Education

227. In view of reports of problems at the Correctional boarding school at Yagoda in previous years, the CPT was pleased to note that there were no allegations of ill-treatment of children by staff in recent months. The Committee trusts that the new management of the school will remain vigilant in this respect and ensure that staff are kept fully aware that both physical ill-treatment and verbal abuse of children is not acceptable and will be dealt with severely.

228. The school had the potential to offer adequate living conditions and activities, provided that sufficient resources could be made available. The CPT has recommended that priority be given to the refurbishment of the school's premises and, in particular, the children's sleeping areas, that appropriate heating be provided and the sanitation improved. Efforts should also be made to develop the range of vocational training and recreational activities, and to ensure that the children are engaged in structured activities under the supervision of adequate staff throughout the day.

As regards health care, the Committee has recommended that all new arrivals at the school as well as children returned to the school after an escape or a transfer elsewhere be medically screened. Provision should also be made for regular attendance by a paediatrician.

F. Establishments under the authority of the Ministry of Defence

229. Conditions of detention in the *army disciplinary units ("arrests") in Plevlen and Gorna Banya* left much to be desired. The CPT has recommended that the various shortcomings observed be remedied, and that all detainees be offered outdoor exercise for at least one hour per day.

Conditions in the *temporary detention facility of the military police in Sofia* were somewhat better. However, the facility's cell contained a metal rail to which detainees who were violent or drunk could be handcuffed. The CPT has stressed again that such a practice is not an appropriate way of dealing with persons in a state of agitation.

G. Action on the CPT's recommendations, comments and requests for information

230. The various recommendations, comments and requests for information formulated by the CPT are listed in Appendix I.

231. As regards the CPT's recommendations, having regard to Article 10 of the Convention, the CPT requests the Bulgarian authorities to provide **within six months** a response providing a full account of action taken to implement the CPT's recommendations. As regards the State Psychiatric Hospital in Karlukovo, the Committee would like to receive confirmation **within one month** that patients are provided with food of sufficient quantity and quality.

The CPT trusts that it will also be possible for the Bulgarian authorities to provide in the above-mentioned response, reactions to the comments formulated in this report which are listed in Appendix I as well as replies to the requests for information made.

APPENDIX I

LIST OF THE CPT'S RECOMMENDATIONS, COMMENTS AND REQUESTS FOR INFORMATION

A. Establishments under the authority of the Ministry of Internal Affairs

1. Preliminary remarks

comments

- the CPT urges the Bulgarian authorities to take appropriate steps to ensure that the detention of criminal suspects is carried out in strict conformity with the legislative provisions (paragraph 14).

requests for information

- clarification of the maximum length of time during which a criminal suspect may be detained prior to being brought before a court (paragraph 11);
- clarification as regards the legal basis of the practice of keeping “brought-in” persons for up to 3 hours prior to the drawing up of an order of detention and the rights of persons during that time (paragraph 13).

2. Torture and other forms of physical ill-treatment

recommendations

- the remarks made in paragraph 20 to be taken into account when investigating allegations of ill-treatment (paragraph 20);
- whenever criminal suspects brought before a judge allege ill-treatment by the police, the judge to record the allegations in writing, order immediately a forensic examination and take the necessary steps to ensure that the allegations are properly investigated. Such an approach should be followed whether or not the person concerned bears visible external injuries. Further, even in the absence of an express allegation of ill-treatment, the judge should request a forensic medical examination whenever there are other grounds to believe that a person brought before him could have been the victim of ill-treatment (paragraph 22);
- persons who are released from police custody without being brought before a judge to have the right to directly request a medical examination/certificate from a recognised forensic doctor (paragraph 22);

- appropriate steps to be taken to ensure the effectiveness of inspection visits by prosecutors and senior police officers to police establishments in Bulgaria, in the light of the remarks made in paragraph 25 (paragraph 25);
- specific registers for inspections to be set up at all police establishments (paragraph 25).

comments

- the CPT trusts that the practice of involving NGO's in inquiries concerning police establishments will continue in the future (paragraph 20);
- human rights should be a common thread throughout all aspects of professional training (e.g. restraint techniques, the use of firearms and auxiliary means, interviewing techniques, etc.), both theoretical and practical, and for all ranks and categories of law enforcement staff (paragraph 21);
- the Bulgarian authorities are invited to introduce a uniform nationwide system for the compilation of statistical information on complaints, disciplinary sanctions, and criminal proceedings/sanctions against police officers (paragraph 24);
- the Bulgarian authorities are invited to further develop the system of visits to police establishments by independent outside bodies (NGOs) (paragraph 25).

requests for information

- the measures taken by the management of Sofia City Directorate of Internal Affairs to eradicate the shortcomings observed at the 3rd District Police Directorate (paragraph 20);
- the outcome of the checks carried out at the other district police directorates, and measures subsequently taken (paragraph 20);
- the new "methodology concerning the activities of on-duty units, operational officers and inquiry staff when detaining persons and the effectiveness of the control exercised by senior staff over the legality of police activities" (paragraph 20);
- detailed information on the rules and regulations governing the internal accountability procedures of the Ministry of the Interior (paragraph 23);
- statistical information on complaints, disciplinary sanctions, and criminal proceedings/sanctions against police officers in respect of 2002 (paragraph 24).

3. Safeguards against the ill-treatment of persons deprived of their liberty

recommendations

- legal provisions to be adopted to ensure that all persons detained by the police have a formally recognised right to inform a relative or another third party of their choice of their situation, from the outset of their detention. Any possibility exceptionally to delay the exercise of this right should be clearly circumscribed in law, made subject to appropriate safeguards (e.g. any delay to be recorded in writing with the reasons therefor, and to require the approval of a senior police officer unconnected with the case at hand or a prosecutor) and strictly limited in time (paragraph 28);
- as regards juveniles detained by the police, steps to be taken to ensure that an adult responsible for the interests of the juvenile (e.g. a relative or guardian) is present when the juvenile concerned is interviewed (paragraph 28);
- the Bulgarian authorities to take steps to ensure that:
 - the right of access to a lawyer for persons in police custody applies as from the very outset of their deprivation of liberty (and not only when a formal order of detention is issued);
 - the confidentiality of discussions between persons in police custody and lawyers is respected
(paragraphs 29 and 43);
- the Bulgarian authorities to take steps to ensure the effectiveness of the system of legal assistance for detained persons, including at the initial stage of police custody (paragraph 30);
- specific legal provisions and/or instructions to be adopted, stipulating that a request by a detained person to see a doctor should be met promptly. It should also be stipulated that:
 - with a view to protecting medical confidentiality, all medical examinations of persons in custody are to be conducted out of the hearing and - unless the doctor concerned expressly requests otherwise in a given case - out of the sight of police officers;
 - the results of every examination, as well as any relevant statements by the person in custody and the doctor's conclusions, are to be recorded in writing by the doctor and made available to the detained person and his lawyer
(paragraph 31);
- steps to be taken to ensure that the "declaration of rights" is given systematically to all persons apprehended by the police, at the very outset of their custody and, if appropriate, explained to them. The declaration should be made available in a variety of languages (paragraph 32);
- appropriate steps to be taken to ensure that the new custody registers are filled out accurately and systematically (paragraph 33);
- the Bulgarian authorities to implement the recommendation concerning the drawing up of a code of conduct for interrogations, made in the reports on the 1995 and 1999 visits (paragraph 34);

- the recommendations made by the CPT with a view to strengthening the safeguards for persons in police custody to be applied to all types of police services (National Police, Border Police, National Service on Organised Crime, Military Police, Gendarmerie, etc) (paragraph 35).

4. Conditions of detention

recommendations

- serious efforts to be made to bring conditions of detention in police establishments in Bulgaria into line with the basic requirements set out in the reports on the CPT's previous visits. In particular, steps to be taken to ensure that:
 - all cells are equipped with a means of rest suitable for overnight stays;
 - all persons detained overnight are provided with clean mattresses and blankets;
 - cell lighting and ventilation are adequate;
 - detained persons have ready access to a toilet facility;
 - police establishments are allocated a specific budget to cover the cost of providing food to detained persons;
 - detained persons are guaranteed ready access to drinking water;
 - detainees are not exposed to the view of persons visiting the police station (paragraph 38);
- the Bulgarian authorities to remove altogether the metal rails fixed inside police cells; persons in custody who are drunk and/or violent should be placed in a separate, appropriately equipped and closely supervised (e.g. every 15 minutes) cell (paragraph 39);
- the District Police Directorate in Botevgrad to be equipped with a detention facility corresponding to the requirements identified in paragraph 38 (paragraph 40);
- urgent steps to be taken to improve conditions in the toilet and washing facilities and the shower-room at the Border Police detention facilities in Petrich (paragraph 44);
- persons detained by the Border Police to be systematically provided with information explaining the procedure applicable to them and their rights. A document should be available in the languages most commonly spoken by persons detained by the Border Police and, if necessary, recourse should be had to the services of an interpreter (paragraph 44).

comments

- the limited size of the cells at the 1st and 3rd District Police Directorates in Burgas and at the Sofia Railway Station rendered them unsuitable for use as overnight accommodation (paragraph 38);
- handcuffs should not be used as a substitute for proper holding facilities (paragraph 40).

requests for information

- clarification as to where persons detained by the Border Police in the Regional border sector in Petrich are held if their detention period is extended (paragraph 41).

B. Establishments under the authority of the Ministry of Justice

1. Investigation detention facilities

recommendations

- steps to be taken to ensure full compliance in investigation detention facilities with the principle of separation of adult and juvenile detainees (paragraph 47);
- custodial staff in investigation detention facilities not to carry truncheons as a matter of routine in detention areas; if it is considered necessary for custodial staff to carry truncheons in specific and clearly defined circumstance, the truncheons should be hidden from view (paragraph 48);
- steps to be taken without delay at all investigation detention facilities in Bulgaria to:
 - progressively reduce cell occupancy rates to an acceptable level. A minimum standard of 4 m² per detainee should be used in multiple occupancy cells; further, all cells of less than 6 m² to be withdrawn from service;
 - ensure that each detainee is provided with a bed;
 - ensure that material conditions in the cells in terms of access to natural light, ventilation, equipment, general repair and cleanliness are equivalent to those at the investigation detention facility at "Major Vekilski" Street in Sofia;
 - introduce differentiated day/night lighting systems in the cells;
 - ensure strict compliance with the instructions given to custodial staff to grant detainees access to the toilet at any time of day or night;
 - provide detainees with essential personal hygiene products (including sanitary towels for women's monthly needs);

- ensure that detainees are guaranteed their entitlement of one hour of outside exercise per day;
- provide other purposeful activities to detainees (paragraph 62);
- steps to be taken to ensure that health-care staff at investigation detention facilities always record in a detailed manner any injuries observed on persons admitted to such facilities (i.e. the nature, location, size and specific characteristics of each and every injury). It is important that the medical record drawn up includes, in addition to a description of injuries observed, any relevant statements made by the person concerned (and in particular allegations of ill-treatment) and the doctor's conclusions. In his conclusions, the doctor should indicate the degree of consistency between the allegations made and the objective medical findings (paragraph 64);
- the results of every medical examination, including the above-mentioned statements and the doctor's conclusions, to be made available to the detained person and his lawyer (paragraph 64);
- existing procedures to be reviewed in order to ensure that whenever injuries are recorded by a doctor which are consistent with allegations of ill-treatment made by a detained person, the record is systematically brought to the attention of the relevant prosecutor (paragraph 64);
- all medical examinations to be conducted out of the hearing and - unless the doctor concerned expressly requests otherwise in a particular case - out of the sight of non-medical staff (paragraph 64);
- steps to be taken to ensure that detainees in all investigation detention facilities are acquainted with the internal regulations (paragraph 66).

comments

- the CPT trusts that steps will be taken to ensure that persons detained in investigation detention facilities are put in a position to exercise effectively their right to lodge confidential complaints (paragraph 67).

requests for information

- the concrete steps taken to reduce the period spent by detainees in investigation detention facilities (paragraph 62);
- confirmation that the visiting arrangements have been put in practice at the investigation detention facility in "Major Vekilska" Street in Sofia (paragraph 65).

2. Prisons

recommendations

- the Bulgarian authorities at both central and local level to remain vigilant and deliver to the prison staff at suitable intervals the clear message that both physical ill-treatment and verbal abuse of inmates is not acceptable and will, if discovered, be dealt with severely (paragraph 74);
- staff at Pleven Prison to make use of all means at their disposal to prevent inter-prisoner violence and intimidation; tackling the phenomenon of inter-prisoner violence requires of prison staff to be alert to signs of trouble and both determined and properly trained to intervene when necessary (paragraph 75);
- the management of Burgas Prison to continue to seek ways to:
 - reduce the occupancy levels of the dormitories, a minimum standard of 4 m² per prisoner to be used for this purpose;
 - improve the quantity and quality of food;
 - facilitate prisoners' access to the toilet at night and discontinue the use of buckets;
 - further develop the activities for prisoners, in particular by exploring the scope for literary programmes, education and vocational training (paragraph 82);
- steps to be taken at Pleven Prison to:
 - progressively reduce cell occupancy rates to an acceptable level (a minimum of 4 m² per prisoner);
 - examine all possible ways of facilitating prisoners' access to the toilet at night and discontinuing the use of buckets;
 - improve the state of prisoners' bedding and provide all inmates with basic hygiene products as well as with facilities for washing their clothes and bed linen;
 - ensure that the disinfection of prisoners' clothes and of the establishment's premises is carried out in an effective manner and at suitable intervals (paragraph 87);
- the Bulgarian authorities to:
 - take further urgent steps to develop activity programmes for inmates at Pleven Prison, in particular as regards work and education, including basic literacy and numeracy, taking account of the specific needs of different groups of the inmate population. In this context, a high priority should be given to fully exploiting the potential offered by the existing production and agricultural areas and to filling the vacant posts of "work organisers";

- make the best possible use of the establishment's areas for communal activities. (paragraph 91);
- immediate steps to be taken to improve material conditions of detention of life-sentenced prisoners at Pleven Prison. These improvements should include providing larger cells (cells 4.5 m² are unsuitable for use as prisoner accommodation) and better access to natural light and ventilation (paragraph 94);
- the recommendations already made in paragraphs 82 and 87 of the report concerning access to toilet facilities to apply equally to life-sentenced prisoners (paragraph 95);
- life-sentenced prisoners at Pleven Prison to be allowed to take outdoor exercise together (and not only in groups of two) (paragraph 96);
- the Bulgarian authorities to continue to develop the regime of life-sentenced prisoners at Burgas and Pleven Prisons, as well as at other prisons throughout Bulgaria, by integrating them in the mainstream prison population, in accordance with the recent amendments to the Law on the Execution of Punishments (paragraph 96);
- staffing levels and hours of attendance of health-care personnel at Burgas and Pleven Prisons to be reviewed, in the light of the remarks made in paragraphs 100 and 101. More specifically:
 - as a matter of priority, at least one full-time qualified nurse to be appointed at Pleven Prison;
 - efforts to be made to fill the post of psychiatrist at Burgas Prison;
 - steps to be taken to ensure that someone qualified to provide first aid, preferably with a recognised nursing qualification, is always present on the premises of Burgas and Pleven Prisons, including at night and weekends(paragraph 101);
- the position of the prisoner working as an orderly at Pleven Prison to be reviewed, in the light of the remarks made in paragraph 102 (paragraph 102);
- the practice of including confidential medical information in inmates' general administrative files to be discontinued (paragraph 106);
- the Bulgarian authorities to deliver to both managerial and basic grade staff the clear message that receiving or demanding advantages from prisoners is not acceptable and will be the subject of severe sanctions; this message should be reiterated in an appropriate form at suitable intervals (paragraph 111);
- efforts to be made to ensure that the granting of applications for temporary leave is effected in an impartial and objective manner (paragraph 112);
- possibilities to be explored for introducing more open visiting arrangements at Burgas and Pleven Prisons, if necessary with enhanced supervision (paragraph 113);

- the disciplinary cells at Burgas Prison to be fitted with a table and chair, if necessary fixed to the floor (paragraph 117);
- the recommendations made in paragraphs 82 and 87 of the report to apply equally to prisoners undergoing disciplinary confinement (paragraph 118).

comments

- the CPT trusts that the Bulgarian authorities will pursue the application of a range of measures designed to combat prison overcrowding, including policies to limit or modulate the number of persons sent to prison. As regards the latter, the Bulgarian authorities should take into account the principles and measures set out in Recommendation No R (99) 22 of the Committee of Ministers of the Council of Europe concerning prison overcrowding and prison population inflation (paragraph 69);
- if necessary, special measures should be introduced with a view to promoting employment for prisoners (paragraph 70);
- the CPT trusts that, in line with its previous recommendations, steps will be taken to open a personal and confidential medical file for each prisoner, including those on remand (paragraph 106);
- the Bulgarian authorities are encouraged to ensure that vigilance is maintained in respect of tuberculosis control in all penal establishments, especially through adequate screening of the inmate population and the provision of appropriate material resources and training of health care staff. Tuberculosis control should be effected in a consistent manner across the prison system, and in accordance with standards applied in the outside community (paragraph 107);
- the Bulgarian authorities are encouraged to pursue their efforts in the area of prison staff training, both at the induction stage and for staff already in service. In the course of such training, appropriate emphasis should be placed on adherence to official policies, practices and regulations of the prison service (paragraph 111).

requests for information

- information on the practical use made by the prison commissions of the possibility to transfer life-sentenced prisoners to ordinary units (paragraph 96);
- information on the operation of the new reception unit at Sofia Prison which was due to be created by the end of 2002 (paragraph 99);
- the comments of the Bulgarian authorities on the standard of treatment and care at Burgas and Pleven Prisons, in particular as regards the range of medication prescribed and the quality of dental care (paragraph 103);

- the comments of the Bulgaria authorities on the lack on ongoing monitoring of the taking of anti-tuberculosis medication, as prescribed by the DOTS strategy for tuberculosis control, at Burgas and Pleven Prisons (paragraph 107);
- additional information on the new visiting regulations which were in the process of being elaborated at the time of the visit (paragraph 114);
- additional information on the changes to the system of disciplinary punishments for prisoners (paragraph 116);
- the comments of the Bulgarian authorities on the matters raised in paragraph 119 (paragraph 119).

C. **Establishments under the authority of the Ministry of Public Health**

1. **Preliminary remarks**

comments

- it would be advisable for the Ministry of Public Health to compile statistical information on the number of admissions and placements for compulsory treatment for all psychiatric establishments (with a breakdown into types of hospitalisation), as this will assist the authorities in the context of the ongoing reform of psychiatric health care in Bulgaria (paragraph 123).

2. **Ill-treatment**

recommendations

- to be made clear to all staff at Karlukovo Psychiatric Hospital that the practices described in paragraph 124 are not acceptable and will be dealt with severely (paragraph 124);
- the Bulgarian authorities to take appropriate steps in the light of the remarks made in paragraph 125, with a view to minimising the risk of inter-patient violence and bullying at Karlukovo Psychiatric Hospital (paragraph 125).

requests for information

- any specific measures adopted in the light of the results of the investigation of the case referred to in paragraph 125 (paragraph 125).

3. Patients' living conditions

recommendations

- the Bulgarian authorities to ensure at Karlukovo Psychiatric Hospital that:
 - patients are given full bedding (mattresses, blankets, sheets, pillows) and appropriate clothes and underclothes, which are cleaned at regular intervals;
 - patients are being provided with basic personal hygiene items (soap, toothpaste, towels, etc.); in this connection, the specific needs of incontinent patients should be duly taken into account;
 - ward 1 and wards 3-5 are thoroughly refurbished so as to meet at least the standard reached in ward 2;
 - efforts are made to offer more congenial and personalised surroundings for patients, in particular by providing them with lockable space and allowing a reasonable number of personal belongings (paragraph 136);
- the Bulgarian authorities to explore the possibility of providing day rooms on ward 1 (paragraph 136).

requests for information

- confirmation within one month that patients at Karlukovo Psychiatric Hospital are being provided with food of sufficient quantity and quality (paragraph 136);
- the results of the six-month review referred to in paragraph 135 (paragraph 136).

4. Treatment and staff

recommendations

- due account to be taken of the remark made in paragraph 139 concerning the drawing up of individual treatment plans when finalising the new treatment programmes to be introduced at Karlukovo Hospital (paragraph 138);
- the shortcomings concerning the assessment and treatment of patients' physical conditions and illnesses to be remedied; in particular, patients' weight to be checked on admission and subsequently at regular intervals (paragraph 139);
- all patients whose medical condition so permits to be offered at least one hour of outdoor exercise every day; further, some protection from inclement weather to be provided in the areas where outdoor exercise is taken (paragraph 140);

- staff resources and training at Karlukovo Psychiatric Hospital to be reviewed in the light of the remarks made in paragraph 143 (paragraph 143).

5. Means of restraint

recommendations

- all seclusion rooms at Karlukovo Psychiatric Hospital to be upgraded to an acceptable standard, including in terms of security for patients in a state of agitation (paragraph 145);
- the situation of the patient referred to in paragraph 146 to be reviewed as a matter of urgency; if necessary, he should be transferred to another establishment which has the means to care for him in a satisfactory manner (paragraph 146);
- any policy on the restraint of agitated and/or violent patients should emphasise that initial attempts to restrain such patients should, as far as possible, be non-physical (e.g. verbal instruction) and that where physical restraint is necessary, it should in principle be limited to manual control. Resort to instruments of physical restraint (straps, etc.) and/or chemical restraint will very rarely be justified (paragraph 147);
- every instance of the restraint of a patient (manual control, use of instruments of physical restraint, chemical restraint, seclusion) to be recorded in a central register established for this purpose (as well as in the patient's file). The entry should include the times at which the measure began and ended, the circumstances of the case, the reasons for resorting to the measure, the name of the doctor who ordered or approved it, and an account of any injuries sustained by patients or staff (paragraph 148).

comments

- there is a clear trend in psychiatric practice in favour of avoiding seclusion of patients (paragraph 147).

6. Safeguards

recommendations

- the Bulgarian authorities to take steps to ensure that the existing procedures concerning compulsory treatment are duly followed in relation to patients at Karlukovo Psychiatric Hospital and throughout Bulgaria. Particular attention should be paid to ensuring observance of the relevant time-limits by the courts, as well as of the patients' right to be heard (paragraph 149);

- the recommendation made in paragraph 149 of the report concerning the observance by the court of the statutory time-limits to be equally applicable to persons confined to a psychiatric establishment for psychiatric assessment and to persons declared to be criminally irresponsible (paragraphs 150 and 152);
- an introductory brochure setting out the establishment's routine and patient's right to be issued to each patient on admission, as well as to their families. Any patient unable to understand this brochure should receive appropriate assistance (paragraph 156);
- regular visits to psychiatric establishments by independent bodies to be encouraged. Such bodies should be authorised, in particular, to talk privately with patients, receive directly any complaints, transmit them, if appropriate, to the competent authority, and make any recommendations. The management of all psychiatric establishments should be duly informed of the results of any inspections carried out on their premises (paragraph 158).

comments

- the introduction of a formal requirement for prosecutors to seek a medical opinion before ordering a patient's confinement in a psychiatric establishment for assessment, would greatly enhance the safeguards surrounding this procedure (paragraph 151);
- the Bulgarian authorities are invited to explore the possibility of setting up a system of volunteer visitors for patients in psychiatric establishments (paragraph 159).

requests for information

- confirmation that the right to legal representation includes legal assistance for those patients who are not in a position to pay for a lawyer themselves (paragraph 149);
- the possibilities open to persons placed for psychiatric assessment to have the lawfulness of that measure decided speedily by a court (paragraph 150);
- the comments of the Bulgarian authorities on the fact that some "voluntary patients" interviewed at Karlukovo Hospital had not been allowed to leave the establishment when they had expressed a wish to do so (paragraph 153);
- whether there is a formal requirement to use the procedure for obtaining informed consent to treatment in respect of involuntary patients (i.e. persons committed for psychiatric assessment and/or compulsory treatment or in-patients declared as criminally irresponsible) (paragraph 154);
- the comments of the Bulgarian authorities on the issue raised in the third sub-paragraph of paragraph 154 (paragraph 154);
- the ethical review system and the procedure applied with a view to enabling involuntary patients to give their informed consent to pharmaceutical clinical trials (paragraph 155);

- the comments of the Bulgarian authorities on matters referred to in paragraph 156 (paragraph 156);
- more details on the complaints procedure to be set up at Karlukovo Hostipal (for example, timetable for its introduction; list of authorities/bodies to which complaint can be addressed; steps to ensure the confidentiality of complaints; etc.) (paragraph 157);
- clarification as regards claims from several patients that they had no access to the public phones available on the hospital's premises (paragraph 159).

D. Establishments under the authority of the Ministry of Labour and Social Policy

1. Preliminary remarks

requests for information

- more information on the issues raised in paragraph 161(paragraph 161).

2 Ill-treatment

recommendations

- staff at the Home for adults with mental disorders in Razdol, and in particular the orderlies, to be reminded that ill-treatment of residents is not acceptable and will be dealt with severely (paragraph 162).

3. Living conditions and care of residents

recommendations

- the plans to relocate the Home for adults with mental disorders in Razdol to be given a high priority (paragraph 174);
- pending the relocation of the Home for adults with mental disorder in Razdol, steps to be taken to:
 - provide each resident with a bed and full bedding;
 - personalise the living environment for residents by means of providing lockable space and visual stimulation;

- refurbish the toilets, as a matter of priority;
- ensure that residents are bathed at least once a week;
- supply residents with an adequate range of personal hygiene items (toothpaste, diapers for incontinent residents, sanitary towels for women's monthly needs);
- increase the number of staff involved in direct and continued contact with the residents (nurses, educators, occupational therapists);
- increase the number of staff assigned to the night shift and ensure that at least one nurse is present at night;
- increase the attendance hours of the GP and the psychiatrist;
- ensure that residents have access to specialised medical care (dentist, optician);
- provide residents with more materials for recreational activities (books, newspapers, etc.);
- refurbish the day-room used for the most severely mentally retarded residents (paragraph 175).

requests for information

- the timetable envisaged for the relocation of the Home for adults with mental disorders in Razdol (paragraph 174);
- the comments of the Bulgarian authorities as regards the introduction of a better differentiation in social homes between mentally retarded persons and mentally ill persons (paragraph 174).

4. Means of restraint

recommendations

- a special register recording every instance of restraint of residents to be established (paragraph 176).

comments

- seclusion should never be used as a punishment vis-à-vis mentally ill or mentally handicapped persons (paragraph 176).

5. Safeguards

recommendations

- steps to be taken to introduce a right for persons involuntarily placed in homes for persons with mental deficiencies and/or disorders to have the lawfulness of that placement decided speedily by a court. Further, persons placed involuntarily in such a home to be immediately informed of their right to bring proceedings to have the lawfulness of their placement decided by a court. In addition, a system should be developed under which the need for continuing the placement in a home for persons with mental deficiencies and/or disorders is automatically reviewed at regular intervals (paragraph 178);
- an introductory brochure setting out the Home's routine and residents' rights to be issued on admission to residents and their families. Residents unable to understand this brochure should receive appropriate assistance (paragraph 181);
- special arrangements to be made enabling residents to lodge formal complaints with a clearly designated body and to communicate on a confidential basis with an appropriate authority outside the establishment (paragraph 181).

comments

- the Bulgarian authorities are invited to consider the introduction of a mechanism of regular visits to establishments like the Home in Razdol by an independent body, authorised to talk privately with residents, receive their complaints and, if necessary, make recommendations (paragraph 179);
- the Bulgarian authorities are encouraged to pursue their efforts to improve contact with the outside world for residents of the Home in Razdol (paragraph 180).

requests for information

- the procedure for consent to treatment in respect of persons admitted to homes for persons with mental disorders and/or mental retardation (paragraph 178).

E. **Establishments under the authority of the Ministry of Education**

recommendations

- priority to be given to the refurbishment of the premises of the Correctional boarding school in Yagoda and, in particular, the children's sleeping areas, which should be properly furnished, well-decorated, clean and personalised (paragraph 188);
- steps to be taken to provide appropriate heating and improve the sanitation (paragraph 188);

- efforts to be made to develop the range of vocational training and recreational activities offered to the children, and to ensure that they are engaged in structured activities under the supervision of adequate staff throughout the day (paragraph 188);
 - steps to be taken at the Correctional boarding school in Yagoda to:
 - ensure that all new arrivals at school as well as children returned to the school after an escape or a transfer elsewhere are medically screened; provision should also be made for regular attendance by a paediatrician;
 - compile a personal medical file for each child, containing diagnostic information as well as an ongoing record of his development and of any special examinations he has undergone. In the event of transfer, this file should be forwarded to the doctors in the receiving establishment
- (paragraph 189).

comments

- the CPT trusts that the new management of the Correctional boarding school in Yagoda will remain vigilant and ensure that staff are kept fully aware that both physical ill-treatment and verbal abuse of children is not acceptable and will be dealt with severely (paragraph 184);
- the Bulgarian authorities are invited to verify that the children are receiving sufficient food, in terms of both quantity and quality, and are provided with appropriate clothing (paragraph 188).

requests for information

- the professional composition of the local commissions for combating anti-social behaviour, and the procedure for reviewing placements in correctional boarding schools (paragraph 190).

F. Establishments under the authority of the Ministry of Defence

recommendations

- at the army disciplinary units ("arrests") in Pleven and Gorna Banya:
 - the permissible cell occupancy to be set at such level as to offer at least 4 m² per detainee;
 - detainees to be provided with clean mattresses and blankets at night; if necessary, the relevant statutory provisions to be amended;
 - all cells to be equipped with adequate means for sitting (fixed to the floor if necessary) and a table;
 - the state of repair and hygiene of the common sanitary facilities to be improved;

- all detainees to be offered outdoor exercise for at least one hour per day (paragraph 196);
- the metal plates covering the windows at the "arrest" of the Central Training Centre for junior officers and new recruits in Pleven to be removed (paragraph 196);
- the recommendation already made in paragraph 39 of the report in respect of police cells to apply equally to cells in military detention facilities (paragraph 199);
the keeping of custody records at the detention facility of the Regional Army Security Service in Sofia to be improved (paragraph 200).

comments

- the Bulgarian authorities are invited to remedy the shortcoming highlighted in paragraph 199 of the report (paragraph 199).

requests for information

- more information on the cellular confinement of conscripts as a disciplinary sanction (e.g. types of infringements which warrant disciplinary confinement of over 10 days; maximum possible term) (paragraph 192);
- whether detention facilities under the authority of the Ministry of the Defence are visited on a regular basis by an outside inspection body (such as a military prosecutor or NGO's) (paragraph 201).

APPENDIX II

LIST OF THE NATIONAL AUTHORITIES AND NON- GOVERNMENTAL AND INTERNATIONAL ORGANISATONS WITH WHICH THE DELEGATION HELD CONSULTATIONS

National authorities

Ministry of Justice

Mr Anton STANKOV	Minister of Justice
Mr Petar VASSILEV	Director of the Main Directorate for the Execution of Punishments
Mr Valentin ZAHARIEV	Deputy Director of the Main Directorate for the Execution of Punishments
Mrs Galina VASSILEVA	Expert

Ministry of Health

Mr Stoyan ALEXANDROV	Director, Directorate “Diagnostic and treatment activities”
Mr Mihail ABRASHEV	Head of Department “International co-operation”
Mrs Anna VARSANOVA	Head of Department “Out-patient treatment”
Mr Dimitar DJONEV	Head of Department “Control over medical activities, specialisation and qualifications”

Ministry of Internal Affairs

Mr Pavlin DIMITROV	Deputy Director, National Police Service
Mr Petar ILIEV	Deputy Director, National Border Police Service
Mr Svetozar TANEV	Head of Sector, National Border Police Service
Mrs Anastasia MARKOVA	Chief Inspector, Human Resources Management
Mr Milcho ENEV	National Police Service Department

Ministry of Education

Mrs Yulian NAKOV	Deputy Minister
Mrs Peshka KORKINOVA	Head of Department “Integration of children with special needs”
Mrs Venka VUCHKOVA	Chief Expert, Department “Integration of children with special needs”
Mrs EVLOGIEVA	Expert, Department “Integration of children with special needs”

Ministry of Labour and Social Policy

Mrs Margarita MIHALCHEVA	Head of the National Service “Social assistance”
Mrs Tsvetanka GORCHEVA	Director
Ms Rostislava IGNATOVA	Legal expert
Mr Ivailo DIMITROV	Chief Expert, Department “Social care”
Mr Angel PETKOV	Expert
Mrs Tatiana TODOROVA	Expert

Ministry of Defence

Mr Ginyo TONEV	First Deputy Chief of the General Staff
Mr Ivan IVANOV	Chief Operational Directorate of the General Staff of the Bulgarian Army
Mr Vasya TSVETANOV	Department “Security, military police and VKR”
Mr SHISHKOV	Head of Department

Chief Cassation Prosecutor’s Office

Mr Ivan PETKOV	Head of Department “Supervision over the legality of imprisonment”
Mr Petyo PETKOV	Head of Department “Organised criminality and corruption”
Mr Assen ARSOV	Prosecutor

Non-governmental organisations

Bulgarian Helsinki Committee

Bulgarian Psychiatric Association

Human Rights Project