



**REPUBLIC OF MACEDONIA
OMBUDSMAN**

**INFORMATION ABOUT THE VISITS TO PSYCHIATRIC HOSPITALS IN THE
REPUBLIC OF MACEDONIA**

SKOPJE, NOVEMBER 2009

Concerning the mentally ill individuals treated in health institutions it is necessary that the basic principles for protection and promotion and betterment of mental health and protection of the human rights and their rights as patients are practiced in accordance with the Law on Protection of Patients Rights.

The protection of mental health is related to the basic human rights, and that is why mentally ill persons besides the basic human rights they are entitled to enjoy the right to a special protection.

Because it is impossible to talk about a healthy population without the existence of mental health, it is necessary that all citizens enjoy their constitutional right to health care and other human freedoms and rights without any obstructions.

Protection of mentally ill persons, according to Article 3 of the Law on Mental Health and Article 2 of the Law on Protection of the Rights of Patients, should be based on securing the best care, treatment and rehabilitation in accordance with the latest accomplishments in the area and in terms of the available funds. This care should be adequate to the individual needs of the person, with absence of any kind of psychological and physical abuse, with full respect to the person's dignity and to be in their best interest.

In the Republic of Macedonia at the moment the health protection of persons with mental illnesses is mostly provided through the three psychiatric hospitals in Skopje, Demir Hisar and Negorci – Gevgelija.

In order to ascertain the condition of fulfillment, respect and protection of the rights of individuals residing in the abovementioned health institutions, according to the Work Program of the Ombudsman for 2009, in the course of the year the three psychiatric health institutions have been visited and inspected.

These activities are undertaken according to Article 29 of the Law on the Ombudsman, that states that the Ombudsman within the parameters of his jurisdiction shall follow the conditions in terms of providing respect and protection of the constitutional rights of citizens, according to Article 28 paragraph 2 of the Law on the Ombudsman, within the parameters of his jurisdiction the Ombudsman can by his own initiative send recommendations, opinions and criticism to the organs under his jurisdiction.

While establishing the situation in terms of providing respect and protection of the constitutional and legal rights of persons residing at the abovementioned health institutions, the Ombudsman except international documents was also guided by the Mental Health Law and the Law on Protection of Rights of Patients.

LEGAL RIGHTS OF THE MENTALLY ILL

The mentally ill should exercise their basic human rights like any other citizen, and because of their mental condition they represent a sensitive category of citizens and have the right to special rights according to their needs.

Above all the personality, dignity and privacy of the mentally should be respected and these individuals should not be humiliated and abused (Article 7 of the Mental Health Law), rather they should be protected from any form of abuse, degradation and molestation and should not be discriminated only because of their mental condition (Article 7, paragraph 2 of the Mental Health Law).

In order to improve the mental health and health in general of the mentally ill, they have the right to be treated equally in terms of care, treatment and rehabilitation as other persons suffering from other illnesses (Article 8 of the Mental Health Law).

The mentally ill, also, have the right to a humane and safe environment.

RIGHTS OF MENTALLY ILL PERSONS RESIDING IN HEALTH INSTITUTIONS

The mentally ill residing in health institutions, in addition to the basic human rights and rights as patients, according to Article 14 of Mental Health Law, have the following special rights:

- Work engagement during the stay at the health institution and compensation for the work engagement if the institution gains profit from their work.
- Accommodation in separate premises from persons of the opposite sex,
- Separation of minors from adults,
- Maintenance of regular personal contacts with persons from the institution or other persons,
- Receiving and sending mail and making telephone calls,
- Listening to the radio and watching television programs,
- Possession of objects for personal use
- Participation in religious activities of one's own choice within the possibilities of the health institution,
- Taking weekend leave and other forms of absence according to the given situation and conditions,
- Provided personal security

At the same time, as patients, according to Article 3 of the Law on Protection of the Rights of Patients, the mentally ill have the right to protection of their rights that should be attained by respecting the principles of humanity and availability.

The principle of humanity is based on:

- Respect of the person's personality,
- Respect of the physical and psychological integrity of the Person and safety of the person,
- Respect of personal self-determination,
- Respect of privacy,
- Establishing humane relations between the patient and health workers based on ethical and deontological principles,
- Right to express pain and relieve unnecessary pain according to the latest knowledge in medicine.

The principle of availability is based on:

- Health services that are constantly available to all patients equally,

- Continuity in health care
- Lawful and fair choice of medical treatment,
- Equal possibility for protection of rights of all patients on the territory of the Republic of Macedonia and other rights.

MODE OF ACCOMODATION OF THE MENTALLY ILL IN A HEALTH INSTITUTION

Under Article 16 of the Mental Health Law, the mentally ill person can be admitted to every health institution in the following cases:

- if the person has agreed to the care, treatment and rehabilitation or to be admitted,
- on the basis of a court order,
- in cases when any kind of postponement of the care, treatment, rehabilitation or admittance because of the current condition of their mental health can lead to death or an irreparable damage to their health, serious self-injury or harm to others, as well as causing serious material damage.

ASCERTAINING THE SITUATIONS BY INSPECTION OF THE PSYCHHIATRIC HOSPITALS IN: SKOPJE, DEMIR HISAR AND NEGORCI

It has been ascertained from the inspections at the abovementioned health institutions the situation with the number of persons residing in the institutions, the conditions of the stay, the care, treatment and rehabilitation, the conditions and obstacles in the realization and respect of the rights of persons residing in the institutions, the conditions for humane and safe environment, as well as conditions for ensuring personal safety of patients and conditions for realization and protection of all the other rights of persons residing on the abovementioned health institution.

PSYCHIATRIC HOSPITAL “SKOPJE” IN SKOPJE

At the time of the inspection there were a total of 1,200 patients residing in the hospital, with 400 persons residing in the premises of the hospital and the rest residing in many different centers in the town.

In the course of 2008, 1,415 patients were residing in the institution, out of which 217 or 19.7 % were forcefully hospitalized. In 2009 on September 28 there were 1,155 patients with a condition, out of which 13 or 11.5% were forcefully hospitalized.

The organizational structure is not changed since the previous period. According to the Law on Protection of Rights of Patients, a new Statute should be brought for whose adopting currently there is an ongoing procedure.

Voluntary commitment

During the inspection it has been ascertained that all patients that have voluntarily checked themselves in for treatment sign a statement, that is to say, the health institution prepares a questionnaire which is filled by the patient. The questionnaire contains all the following data: date of reception, ID number of the person, their name and last name as well as a statement saying they agree voluntarily to treatment. At the same time permission is given for the conditions in the hospital to which the patient is previously introduced, the house rules for which they give statements to respect, as well as a statement saying the patient accepts the therapeutic procedures.

It has been established from the inspection of several randomly selected patients' medical records that the patients have signed the given questionnaire for voluntary placement.

At the same time, it was established that drug or alcohol abusers always check in voluntarily for treatment, except in cases when it is done by court order for compulsory treatment.

The abovementioned questionnaire is signed by the patients and the physician that admitted them while witnesses of the event do not sign it, except for two members of the staff from the hospital.

According to the legislative consent, accepting admission to the health institution is done by giving a written statement in front of an authorized person and two literate adult witnesses that are not employed in the health institution and are not blood relatives with the person in direct descent, indirect descent to the fourth degree and by affinity by the second degree, nor their marital spouse, nor the person that brought them to the health institution (Article 58 of the Law of extrajudicial procedure)

Concerning the question whether or how this legislation is conducted in practice and which persons are called as witnesses it was stated that these legislations are not implemented yet and that there are no practical possibilities for their use.

Consequentially, acting upon the reports and initiative of the Psychiatric Hospital "Skopje" in Skopje, the Ombudsman in 2008 started the initiative for amending the abovementioned legal provisions. The initiative is accepted by the Government of the Republic of Macedonia and by the department ministries, but the stated legal provision is still not amended although it is inapplicable in practice nor is it factually applied.

Involuntary commitment

Under Article 22 paragraph 2 of the Mental Health Law, the person cannot be placed in a health institution without their consent or without a ruling from the competent court that should bring a verdict within 48 hours.

According to the Law involuntary commitment in a health institution is done on the basis of a court order and in cases when any kind of postponement of care, treatment, or rehabilitation or admission due to the current situation with the mental health of the person, could lead to death or irreparable damage to their health, serious self-injury or harm to others, as well as cause serious material damage, but even in such case a court ruling must be issued.

In terms of the way the involuntary commitment is carried out in practice it has been established that it is most often done by the EMS or by police intervention.

This is usually the course of action with the mentally ill who are not in a condition to express the desire to be treated and there is danger to their health and life as well as to other people. So, in practice these persons are often committed involuntarily, and the admission is signed by the physician from the EMS that brought the patient, the police officer that escorted the patient with the ambulance, a family member (if one is present there with them) and two physicians from the Psychiatric hospital as well the director of the hospital.

There is also a separate questionnaire prepared about the involuntary hospitalization, that is submitted to the court and in it the basic personal data of the patient is listed, the day and time of admission, signed by the physician and the police officer that brought the patient to the hospital, and a diagnosis is established. At the end of the form the president of the board that consists of three physicians that established the diagnosis and assessed the need for treatment, the assistant-director and the director of the hospital put their signatures on it.

The court is being notified for every patient within the established legal time limit, which was verified by inspection of several patients' medical records.

However, in terms of the court's proceedings we have been informed that in the procedures so far a timely verdict has not been reached in almost all of the cases, but instead within a longer period, so that a certain number of patients are forcefully hospitalized without a court order, but the health institution has estimated that due to untimely proceedings by the court the patient should not be denied treatment, instead they should be held for treatment despite the fact that the formal conditions have not been met.

Namely, according to information of the health institution the court has formed a special commission for reaching verdicts that assesses all the cases, but sometimes consults the opinion of the Psychiatric Clinic. This opinion is not submitted timely, and consequentially the court is not able to reach a timely verdict.

Therefore, the Ombudsman, as in the previous period, once again has ascertained that the cooperation between the health institution and the court is not improved and this problem is still on-going because the court does not reach verdicts within the established legal time limit and in certain cases the court reaches a verdict after the completion of the treatment and the discharge of the patient from the hospital.

In order to overcome this problem the persons in charge at the health institution suggest that a special team of experts is formed in the court that will be able to act upon these requests and will make decisions immediately instead of waiting for the opinion of the Psychiatric Clinic.

Concerning the question about the number of patients without a court verdict for whom such a verdict was necessary to be reached, we have been informed that the health institution does not have an accurate record, but according to the findings approximately 30 patients per year have been treated and released from the hospital without a verdict being reached.

During the inspection it has been concluded that despite of the treatment of some patients on the basis of an involuntary hospitalization without a court ruling, which is against the legislation, up until now no one has filed a procedure for responsibility against the health institution because they held a person for treatment without their consent and without a court verdict.

It has also been established that the patients which are voluntarily committed are not separated from those involuntarily committed and that the persons for whom a court ruling for compulsory treatment for alcoholism and drugs has been made are placed in the same departments where the voluntarily hospitalized reside, that is, in an open department. This is the way it is done because there are no other possibilities and spatial solutions.

Concerning the persons committed on the basis of a court's ruling as perpetrators of criminal offences, it is characteristic that a great number of them stay in the institution for treatment for a longer period despite the fact that the treatment can be done in domestic conditions. However, the appeals of the institution to the court to change or lift the verdict have mostly been dismissed, so part of the patients remained in the institution after 20, 30 even 40 years, although the institution informed the court every 6 months about the situation of these categories of patients.

Notifying parents and other persons

Under Article 22 of the Mental Health Law, the health institution is obligated to inform the parents, legal representatives or other members of the family or persons that live with the mentally ill individual about their admission.

Concerning this obligation of the health institution it has been established that every time when there is information for the parents or other relatives the health institution informs them about the involuntary hospitalization of the person. If there is no information and the hospitalized person cannot be identified, then the health institution addresses the Department for Missing Persons at the Ministry of Internal affairs in order to determine whether a certain person is reported missing and whether the hospitalized person is that person.

In cases when the person admitted for treatment voluntarily withdraws their approval, and the person in charge in the health institution believes that the hospitalized person should continue being held in the institution, they are obligated to inform the court within 24 hours (Article 62 of the Law on Extrajudicial Procedures).

Concerning this right it has been ascertained that so far there have not been such cases in this health institution, but it was emphasized that if a patient wants to be discharged despite the hospital's evaluation that their treatment should continue, in such a case the relatives are consulted and if they on their own account sign that the person should be discharged then the person is discharged, but not in other cases, except if the team of experts at the hospital decide that there is no need for further treatment.

On the other hand, if the relatives do not accept on their own accord that the person should be discharged from the health institution then the case is reviewed and decided by a team of experts, the physician that treats the patient and the director of the health institution, and the decision to discharge the patient is registered in the medical history that is recorded for every patient.

RIGHTS AND CARE FOR THE MENTALLY ILL

The mentally ill committed in a health institution should be provided with the best care, treatment and rehabilitation in accordance with the latest achievements through individual work and individual work plan for every patient.

Individual and group therapy

Concerning this right it has been established that the patients usually go through group therapy. Thereby, it has been ascertained that individual work plans are not prepared because according to persons in charge in the health institution it was not possible because it could not be planned in advance what kind of measures will be taken, but that it depended on the daily behavior of the patient and the primary goal was their treatment and recovery. Psychological programs are carried out once a month, though as a collective therapy, not individually.

In this health institution there is a so called Mentor's list for every patient, in which data is collected about the patient's hygienic habits, their care for the clothing and footwear, their contacts with their family, the frequency of the activities and the psychological program as well as other data concerning the patient.

Concerning the question whether there is a team of experts working with every patient, whether there are enough experts that can work successfully with every patient individually and if not, how is this legal obligation implemented, it has been ascertained that the first few days after the admission work with the patient is done on daily basis and at every hour the condition and behavior is recorded, and for that purpose there was a sufficient number of professional staff.

In terms of the question whether the work with the patients is based mainly on rehabilitation and therapeutic activities, it has been established that twice a week the patient have group therapy that includes all patients.

During the inspection visits were also made to the facilities for group therapy where there are technical possibilities for all patients to be involved in any kind of activity that suits them (drawing, knitting, sewing, design and craft of jewelry and other). The patients are allowed to work outside the therapy program, that is, to work at a different time in these premises for group therapy.

Recreation

In this health institution all patients are provided with conditions and opportunities for recreation not only in the room for group therapy but also in the premises made for that purpose which can be found in every department. There is also a gymnasium where the patients do sports activities or exercise.

All patients are obligatorily engaged in daily walks within the circle of the health institution, and the patients that are not able to walk by themselves are escorted by competent persons from the hospital.

During the inspection outside persons were encountered, in front of the departments, who were walking alone or resting on the benches or the green.

LIVING CONDITIONS AND STAY

Nutrition

In terms of providing food according to the needs and wishes and depending on the health condition of every patient, during the inspection it was ascertained that for all the patients in the Hospital, the food is prepared in a single kitchen, but no kitchen's menu has been made nor presented.

According to the statements and inspection every patient has the right to choose food depending on their condition, needs and wishes. Special food is provided according to the religious beliefs and wishes of the patients, food for diabetics, diet food, food according to the health condition, vegetarian food. However part of the patients which were contacted stressed that there is sufficient amount of food, but that its quality was not satisfactory which was also confirmed by the officials at the institution.

Heating and cooling

In terms of the heating no problems were stated because the institution has its own district heating which is regulated according to the needs and none of the patients has ever complained in terms of the heating.

In terms of the cooling during the summer, there are air conditioners only in the day room, workshops and in the intensive care units. In the patients' rooms there are no air conditioners or protective shutters, nor are there suitable curtains.

Decoration and renovation of the rooms

In terms of decoration and renovating the rooms in order to achieve visual stimulation in/with patients, it has been established that the patients arrange their rooms by themselves and can put pictures and other decorations. However the institution does not pay special attention to decoration of rooms and creating a pleasant environment and that is why all the rooms are the same and there is no special adjustment of their appearance according to the wishes and needs of the patients.

According to the persons in charge in the institution, this situation is a result of lack of funds for this purpose, but adaptation of several departments is planned by modernizing them with new equipment and adapting them to the patients, in order to make them feel comfortable and at home.

Keeping and storing personal items

In every room there are closets that could be locked if the patients want to, but in some of the rooms in certain departments for the patients' own protection there are no closets.

During the inspection it has been ascertained that most of the closets are old and the patients either are unable to lock them or they lock them with padlocks.

Condition, equipment and hygiene of the sanitary facilities

The sanitary facilities are renovated in almost all the departments but they were damaged, still during the inspection they were found clean and tidy.

There are no separate sanitary facilities for the old and the disabled and they usually use them accompanied by an orderly. The renovation and adaptation program includes building of such special sanitary facilities adjusted to all categories of patients.

The general condition in the institution though, in terms of the living and residence conditions is still not improved, because there are holes in the hallways, dilapidated walls, old bed and old and broken closets although according to the persons in charge, every few years the rooms are being repainted.

It should also be stressed that the situation in the judicial department is alarming because the rooms are overcrowded, that is, in every small room there are 4 to 5 patient residing and there is no free space. In the same department there is no separate dining room and the patients eat in the hallway of the residential facility. In this department there are 30 patients residing and there is only one shower so the patients take turns and make bathing schedules, which is not a very appropriate solution.

The hygiene in the institution, although satisfactory, still, due to the small number of charwomen cannot be maintained at an appropriate level, and that could lead to the spread of infectious and other diseases, but according to the persons in charge there is no right and possibility to employ a larger number of charwomen.

Clothing

During the inspection attention was also paid to the possibility for patients to wear their own clothes in order to strengthen their personal identity and self-esteem as part of the therapeutic process.

It has been noted that most of the patients wear their own clothes, and a small part wear hospital pajamas, but that all patients decide on their own what they will wear. The patients procure their own clothes, but most of it is obtained in the institution through donations.

Accommodation in small groups

Despite the need to accommodate patients in smaller rooms, during the inspection in the health institution it has been ascertained that mainly there are eight patients residing per room, a smaller number of rooms have 6 patients each and very few rooms accommodating three patients. Due to financial and other technical barriers it is not possible to accommodate a smaller number of patients in one room. It is expected that with the renovation and adaptation smaller rooms with three to four beds will be made.

Respecting the dignity and best interest of the patients

Given that there are no registered complaints from patients it can be concluded that the employees respect their dignity and that in practice no health worker has been disciplined due to disrespect of the dignity and best interest of the patient. Patients expressed great satisfaction especially with the staff at the judicial department.

On inspection it was found that in the last period a separate written record has been led of all complaints of patients and that there are two lawyers employed that act upon the complaints of patients and provide legal assistance. At the same time no complaint regarding the conduct of the personnel towards the patients has been registered.

There is also a separate room for addressing patients' complaints, where every patient could come freely to submit their complaint to the person in charge.

Conditions for humane stay and safe environment

In terms of this right it has been ascertained that in order to ensure the safety of patients, there are no sockets in the rooms to plug into the electric network, and the electric lighting is turned on and off centrally.

In departments where patients dangerous to themselves and others reside, there are bars on the windows and other safety devices and there are no objects in the rooms that could be used for self-injury or injury to other persons.

TREATMENT

Provision of the necessary medication

The health institution has all the necessary medicines and no periods of shortage of medicines. In some cases where certain drugs that cannot be purchased in Macedonia are necessary, they are procured from abroad. No patient has remained without the necessary medication, and for some patients very expensive drugs have been used, that is, there has been no limitation to medicine at the expense of patients' health, in fact every patient gets the needed therapy regularly.

Types of therapy

In the health institution the patients are treated with the ampullar and tablet therapy, and the electroconvulsive therapy is no longer practiced because it has been assessed as inhumane. Also, a therapy is not practiced in its unmodified form i.e. without an aesthetic and muscle relaxants.

Physical exam

In order to form a right decision based on sufficient information, it is necessary that regular physical exams are done in order to establish the health condition of patients.

Daily rounds are done for every patient, and once a year a systematic physical exam is done on every patient. Record is kept for all physical exams and rounds and all the data is noted, and so the condition of every patient is regularly and continuously monitored and appropriate measures are being taken.

RESTRAINING DEVICES

Use of restraining devices and inhumane ways of managing patients (restraining to bed, straitjackets, restraining with belts)

During the inspection it has been ascertained that the only way to restrain patients are the restraining belts which are used only as last resort in order to ensure the safety of the patient and other persons, but other ways of restraining are not used. During the inspection no cases involving the use of a restraining device over a patient have been encountered, but it has been ascertained that individuals that are being "fixated" are not placed in a separate room, because there is no room for such purpose, and that is why sometimes the fixation is done in the presence of other patients, which is not in accordance with international standards.

Procedure for taking restraining measures

When using a restraining measure, permission from a physician is necessary and the restraining device should be removed when there is no more need for it.

In terms of this measure it during inspection has been ascertained that a special form is filled by the physician responsible for the patient and the physician decides whether, when and how long should the restriction last.

In practice the restraining lasts up to two hours and there have not been any cases where a patient is "fixated" for a longer period.

Persons in charge in the health institution have noted that most often other measures are taken to calm the patients and for that purpose the health institution has a trained staff to apply non-physical techniques and techniques for manual control. The personnel, especially nurses are trained to take such measures and once a year lectures are held for employees for their professional training and introduction to humane and non-physical techniques to calm the patients.

Regarding the existence of general policy and general rules for taking measures to restrain patients, it has been stressed that the health institution does not have general rules, instead each case is decided separately.

Each occurrence of a physical restraint of patients is necessary to be noted in a special register made for this purpose and the same should be noted in the patient's medical record. On inspection it was found that this obligation is met and that every department in the health institution has a separate register for every restraint i.e. fixation of patients.

OTHER RIGHTS

Right to work

Given that, the mentally ill, depending on their condition, can exercise their right to work, the question arises whether a patient has been treated in the institution just because they have lost their job or cannot find work.

The answer follows that while the persons are residing in the institution for treatment, they cannot be fired and that so far this right has been respected, and the institution does not have information whether some of the patients have lost their jobs or could not find work only because they were treated in that institution.

Non-discrimination

The institution has stressed that there have been no cases of discrimination on any grounds towards a patient and that all patients are equally treated in this health institution.

Also, so far no complaint has been submitted to the Ombudsman by a patient on the account of discrimination during treatment.

It has been ascertained that during the realization of the right for health care in this institution, the patients have no problems no matter if they have a health insurance or not.

However, in terms of treatment of the mentally ill in other health institutions of illnesses not connected to mental health, it has been ascertained that the conduct of other health institutions towards patients of this health institution is not appropriate and so these individuals are not accepted for treatment (although they require it) and most often they are sent back to the Psychiatric hospital. With such treatment these individuals are in a way discriminated against and often their right to health care outside the Psychiatric hospital is limited whereas in that hospital there is no equipment and conditions for treatment of all diseases.

For each patient of the Psychiatric Hospital who is sent for treatment in another health institution, no matter if they are insured or not, it is required that the expenses are covered by the Psychiatric Hospital as private treatments which burdens the budget. At the same time, mentally ill persons that are given outpatient treatment are not free of participation costs, that is why patients often due to lack of funds for the participation fee require to be hospitalized in the institution or terminate further treatment.

Work engagement

The patients residing in this health institution depending on their abilities, as well as their health condition are engaged in work and receive a certain fee for the work.

The patients are engaged in work associated to their profession depending on their working ability and their wishes.

Separation of patients according to their sex

During inspection it was ascertained that the patients are divided into separate rooms depending on their sex, but according to modern trends in the departments the patients are of both sexes as it is considered beneficial for patients. In case of urgency and if the need be, only in the Intensive Care Unit it may happen persons of different sex to be in the same room, but in that case, patients are separated by screens.

In this health institution minors are not placed or held, instead they are referred to the Psychiatric Clinic.

Contacts with persons in the institution and other persons, receiving and sending mail

All patients residing/situated in the health institution have the right and possibility to realize personal contacts with persons from the institution and other persons. The realization of this right is encouraged because according to physicians in the institution, it positively affects the patients.

Patients contact the outside world in many ways, namely by: making telephone calls, realizing personal meetings, sending and receiving mail, watching television.

- **Telephone calls.** In order to exercise this right there are public payphones and part of the patients have mobile phones.
- **Realization of personal meetings** between patients and relatives or other persons is possible at any time, which means that anyone can come to the institution and visit the patients, and the institution makes efforts to ensure that patients have more frequent contacts with the outside world and with relatives as it has a positive influence on them and their health.

Realization of meetings and personal contacts is done in a separate room in order to protect their privacy.

Patients also realize contacts with the outside world by exercising their right **to send and receive mail**. Letters addressed to patients are delivered personally without being opened or checked.

According to persons in charge in the institution, there is no censorship done, nor opening letters or monitoring communication between patients and persons from the outside visiting the institution.

In the health institution there are no conditions or possibilities for patients to use the **internet** because there is no access to the internet in all departments in the institution.

In terms of the right of patients to watch **television** or stay informed in any other way, during the inspection it was ascertained that in every department there is a television set in the living room.

Right to participate in religious activities by choice

In terms of exercising this right it has been ascertained that in the institution there are no special conditions and premises to perform religious practices and prayers, but

according to persons in charge in the institution, if patients want to, they are taken to religious facilities for every holiday.

Right to use a weekend leave

It is in the interest of every patient that as frequently as possible, every weekend if possible to be with their family. It is practiced in cases when the family shows interest and is capable of taking care of the mentally ill individual, whereby the condition of the patient is taken into consideration. Part of the patients due to their serious condition cannot be sent home every weekend, and another part of the patients cannot go home because the relatives do not show any interest and do not want to take them in.

Providing personal security to patients

According to persons in charge in the institution all measures are being taken to provide personal security to every patient, and there are access routes to the hospital's premises for the disabled.

In terms of the conditions for providing the personal security of all patients and the existence of cases of escape from the hospital, attacks from outsiders, self-injuries or similar, the persons being treated from alcoholism can leave whenever they want and move about freely, while the rest must have permission to do so. Escapes rarely occur and in such cases the family is immediately informed and it is checked whether the patient is at home, and if not, the police is notified and provided with a description of the runaway patient. From time to time it happens that patients leave the hospital without permission, but come back again.

On inspection it has been ascertained that there is no fence around the premises of the health institution and that every patient that walks within the circle of the institution could escape outside. Another reason for the inadequate security of the institution is the small number of employees charged with this obligation, which because of the large space that the institution covers, are not able to keep track of every patient. Also, the cameras installed do not provide monitoring of the entire estate of the institution.

In the course of 2009 a person left the institution unnoticed and is still missing for a longer period now, for which the Ombudsman also intervened. Also, in the course of 2009 one of the patients died due to a fall from a tree within the circle of the institution, thereby it can be **concluded that there are no appropriate conditions** for a certain personal security for every patient and for prevention of patients from leaving the institution on their own free will or to harm themselves.

Social security

In terms of social security for the mentally ill, the question has been raised, about the way the social status of mentally ill persons is resolved and whether there are patients that get some kind of social security, as well as whether the competent services in the institution help the patients realize some of their rights defined by law.

Regarding these questions it has been stated that with the help of the social worker the patients realize their social rights, and not only are they shown which rights they can exercise, but also the social worker goes directly to the competent organs and institutions or is escorted by the patient in order to help the patient attain a certain right established by law.

Participation of experts from different fields

In practice, involvement of medical or legal **experts** in the treatment and providing help to patients is rarely used.

The health institution only has contracts with clinics for hiring medical personnel- physicians, which arrive on call in order to give certain medical services to persons residing in this institution. When an opinion from the medical board is needed, the patients most often are taken to clinics because the physicians from other health institutions are not interested in coming to the Psychiatric hospital.

Separate scientific and medical, domestic or international experts are not used nor does the institution have any specific funds for that purpose.

In terms of legal protection some time ago two lawyers have been employed to help the patients with legal problems and act from a legal aspect upon the complaints of patients, whereby every request is recorded in a separate register.

Legal advice and legal assistance

The realization of the right to get legal advice and legal assistance with the realization and protection of the rights of mentally ill persons residing in the health institution is done with the help of lawyers and social workers.

Informing patients and their families

Every department has printed material available for patients and relatives, and brochures have been published, but the institution is not able to provide every patient and every visitor with instructions and brochures.

Right to submit complaints to the director of the institution and right to a response

Patients have the right within a period of eight days from the day of the violation of the right, to submit a complaint to the director, and the director is obligated within a period of 15 days to inform the person about the findings and the measures taken.

It is in the practice of the institution that every patient is allowed to submit a complaint, whereby every complaint is registered in a special register, a response is provided within the legally established time frame and all data about the type of the complaint and about the response are registered in the patient's medical record. This is a recent practice introduced after the Law on Protection of Rights of Patients was passed. The complaints are submitted orally or in writing, but if it is a more serious

matter a written complaint is requested which is noted in the register, it is then processed and the patient is given a reply, and simultaneously appropriate measures are taken if the complaint is assessed as valid.

However ever since this practice was introduced the patients rarely submit complaints, that is, not a single example of a valid and serious complaint has been recorded. During inspection a case was singled out, that had happened recently, whereby a patient has been complaining because he had been forced to bathe, for which he filed a complaint even to the Minister of Health.

There have been a small number of complaints by drug addicts that wanted a stronger and a more frequent therapy from the one prescribed, whereby every separate case has been assessed whether it was in the interest of the patient's health or not.

A written document is prepared about the findings of the director after a complaint has been submitted, whereby the complaint and the findings of the director are placed in the patient's medical record.

Submission of petitions and complaints to the Ministry of Health and to other competent organs

This right of patients is realized in a way that if patients are not pleased with the findings of the director, they can file petitions or complaints to the Ministry of Health or to other organs and institutions.

In practice there are no obstacles in exercising this right and only one complaint to the Minister has been registered, submitted by a patient that refused to bathe.

The Ministry of Health is obligated within a period of 30 days to respond to the complaints of patients, and this deadline so far has been respected.

Measures and actions that are forbidden to be taken towards patients

The following are forbidden by law: torture, inhumane behavior or humiliation and punishment. During inspection it was stressed that so far there have been no such occurrences in this institution, but the Ombudsman stressed that several years ago he received several petitions for molestation of patients by employees in the institution and upon the Ombudsman's intervention disciplinary measures were taken against the employees. However, recently there have been no such petitions submitted to the Ombudsman, and the Ombudsman does not have any information about such occurrences.

Clinical and experimental scientific researches

According to the Law on Protection of Rights of Patients, in order to conduct scientific research on a patient it is required to have the patient's conscious, clear and voluntary consent, which the patient or their relative and guardian can withdraw at any given time, the same way it was submitted.

In terms of this protection, persons in charge in the abovementioned health institution have stated that the institution does not conduct scientific researches on patients.

It has also been stressed that **sterilization of patients** is not done, that is, so far such measures have not been taken nor are they allowed.

Informing patients about their health condition

All patients depending on their ability to grasp and understand the information are informed about their health condition, except if it is harmful to their health. If the patient is not able to understand the information about their health condition, the institution informs the relatives.

Team of experts for treatment and rehabilitation of patients

The team of experts that is formed to work with every patient, has to prepare a separate program for the person in writing.

In this health institution after the person has been admitted a team of experts at the Admission Department is immediately formed consisting of: a psychologist, social worker and a physician. Then the necessary analyses are done and the diagnosis is established, the patient is cleaned and bathed and is dressed in clean clothes. Once a week the chief of the department and the director of the hospital perform an inspection, a daily round is done, and before the patient is released their condition is checked from all aspects and it is determined whether the patient can be released from the institution.

In the institution there is a sufficient number of expert teams although there is a shortage of personnel planned with the systematization, there is especially a shortage of specialist doctors, nurses and charwomen.

Medical check-ups of patients that have left the institution

The institution fulfills its obligation to conduct medical checkups on patients that left the institution a month earlier, by referring the patient to call for a check-up, that is, to either check in the clinic or in the day center. In order for this right and obligation to be exercised, the institution reminds the patients by phone, and it also has a public health nursing service that visits patients in their homes.

Patients respect this obligation, whereby, those that come from Skopje are visited even at their homes and it is ensured they receive their therapy. All these activities are a burden to the institution. If the patient is transferred to another health institution, they are given only the discharge form and the discharge letter which contains all the data for the measures taken, the therapy, etc.

The person involuntarily committed in a health institution can be discharged only on the basis of a court order issued on the basis of the opinion of the expert team.

In the aforementioned health institution if it is established that the patient has no need of further treatment, they are discharged from the institution and the court is notified, but because the court does not reach a timely verdict, the patient is not

detained, but is instead discharged and is given therapy from the hospital for several days.

CONCLUSIONS

- Existence of cases of forceful involuntary commitment of patients to a health institution without a court order because the courts do not act on time upon the requests of the health institution, and such actions violate the legislative.
- There is no individual plan and program for treatment and rehabilitation, and thus, Article 23, paragraph 2 of the Law on Mental Health is not respected.
- Absence of implementation of the provisions of Article 58 of the Law on Extrajudicial Procedures, during the voluntary hospitalization because of their inapplicability in practice from the aspect of providing the established witnesses and the obligation even in such cases the court to be notified.
- Poor quality of the food served to patients.
- Lack of an appropriate cooling system in the rooms of patients, which deteriorates their condition especially in the days when the temperatures are too high.
- Lack of appropriate decoration of rooms of patients for their visual stimulation and pleasant stay.
- Lack of possibility for patients to safely keep personal items.
- Lack of sanitation facilities adjusted to the old, the weak and the disabled individuals, which makes their stay in the institution difficult.
- Accommodation of patients in big bedrooms which does not have a positive influence on their psychosocial condition.
- Unimproved general state in terms of living conditions and stay, holes in hallways and dilapidated walls, old beds and old and broken closets in the rooms.
- Crowdedness in some departments (Judicial Department)
- Absence of appropriate conditions for securing patients from escaping and allowing patients to move within the circle of the hospital without being monitored, which sometimes results in their unnoticed escape from the institution.
- Absence of a developed policy and general rules for taking measures to restrain patients. Use of inappropriate measures has not been established.
- "Fixating" patients in the presence of other patients due to a lack of spatial and other conditions for separation of these individuals.
- Voluntarily and involuntarily hospitalized patients in the same department, especially individuals for whom a court ruling for compulsory treatment has been issued. Placement of alcoholics and drug addicts in the same premises with voluntarily hospitalized individuals.
- No knowledge or any kind of data for possible discrimination of patients.
- Prolonged stay of patients in the institution, placed for treatment on the basis of a court order for committing a felony, despite their improved condition, a result of the rarely reexamined court rulings.
- Discrimination by rejection of patients from this institution in other health institutions for treatment of diseases not related with their mental health.

- Lack of conditions for access of patients to the internet as a result of lack of funds and equipment in the health institution.
- Lack of other (day) centers for mental health despite the positive assessment of their work.
- Lack of spatial and other conditions for performance of religious activities by patients within the institution, according to Article 14 of the Law on Mental Health.
- Exclusion of external experts in providing a higher level of help and protection of patients in the institution.
- Inconsistency in the respect of the right of the patient and members of their family to be informed about the work of the institution through special brochures and other informative material.
- Lack of a certain kind of trained and qualified personnel despite the sufficient number of qualified personnel and experts teams.

PSYCHIATRIC HOSPITAL DEMIR HISAR

This health organization has a regional character i.e. it covers the southwest region of the Republic of Macedonia.

Organizational structure and conditions for stay

The Public Health Organization, Psychiatric Hospital Demir Hisar is organized in several departments/units, and within the Public Health Organization there is a Center for Mental Health located in Prilep.

Such center for mental health was planned to be opened several years ago in Bitola, but until this very day that has not been done with the explanation that a suitable location could not be found. The capacity of the Psychiatric Hospital is 400 beds.

At the time of the inspection, 619 patients were registered in the hospital, out of which 234 were on treatment in the day hospitals, 43 were on a weekend leave, 385 were residing in the hospital.

In the course of 2008 a total of 1163 patients of all groups of diseases have been treated in the hospital, out of which the biggest part were at the age of 41 to 50 years.

In the center for rehabilitation therapists were employed on the subjects: art, music and physical education, as well as therapists for making handicrafts or sewing on a sewing machine. The inspection conducted in the cabinets meant for these activities draws to the conclusion that this way of conducting therapy in the treatment of patients in the hospital by developing their personal abilities and characteristics, gives positive results in the process of patients' recovery. The cabinets are clean, spacious, well lit and well equipped, especially the library book fund, and in the hallways of the Management building the artwork of talented patients is put on display.

The quality of the living and treatment conditions for patients residing in the hospital is inevitably associated with the funds which, unfortunately, are insufficient to ensure a good quality life for patients.

Some of the facilities are in relatively preserved condition, whereas others are not the least bit appropriate to accommodate patients, because these conditions do not meet the minimum hygiene-technical standards for stay. Particularly worrying is the situation in the judicial department and the Department of Accommodation of Persons with Serious Mental Illness, where there is an unbearably unpleasant odor.

In the Judicial Department there are persons residing who on the basis of an issued court ruling have been given a security measure or are serving a detention sentence. Because of the particularity of this category of prisoners and detainees, as well as because of the possibility for their escape, this department should be permanently locked, however during inspection two individuals were noticed walking in the yard in front of the building.

The situation with the equipment and hygiene in this building is alarming. There are 40 persons residing here, and the dining room where they are supposed to eat, has three plain little tables and 5-6 chairs out of which 3 are unusable. The floor in the building shows that many years ago it had been coated with linoleum, 80 % of which is now gone, it is torn and concrete is visible, above which there is a thick layer of greasy, dirty and blackened base. The doors in the accommodation premises are unusable and broken, the walls have not been painted for a long time, the beds do not have mattresses, and are only coated with sponge and covered with old sheets and blankets.

Same or similar is the situation with the department where the persons with more severe forms of mental illnesses reside. This building too is always locked because of the severity of the mental illnesses of patients and for safety reasons. During inspection in the building there was not a single employee- orderly, and one of the patients unlocked the entrance door. The patients that were encountered during inspection were in a poor hygienic condition, i.e. they were messy and dressed in untidy clothes and in need of a hair-cut, shaving and bathing. In one of the rooms for accommodation, two patients were lying in the same bed covered with blankets, and in the bed next to them there was a cat lying, with its head on the pillow covered with a blanket up to its head, which did not react, and continued to lie quietly! For this unacceptable situation the physician merely stated that the cats come in through the open windows, which leads to the conclusion that these and similar situations are possible in other departments as well where mentally ill persons reside.

The situation in the department for men and women, in the Adolescent Department and in the Department for Accommodation of Persons Addicted to Drugs and Alcohol, is relatively good, and the equipment and hygiene is satisfactory. Yet, everywhere there was a shortage of little wardrobe closets for each patient individually to keep clothes and other personal items.

Some patients are allowed to move freely and go out for some fresh air in the hospital's yard, as well as do sports activities on the football field, depending on the patient and the seriousness of the illness to their psychical or mental health.

Within the circle of the hospital there is a grocery shop where patients can buy according to their needs and desires.

Ways of accommodation Voluntary accommodation

Every person that voluntarily accepts to be treated in the "Public Health Organization Psychiatric hospital Demir Hisar, during the admission fills a form that is

signed by two witnesses, of which one is a member of the staff and the other a family member. During the admission, the parents or other members of the family are always notified, and that is done by the patient himself or the social workers in the hospital.

If during the admission, the identity of the person cannot be established the hospital seeks information from the Sector of Internal Affairs Bitola and the Center for Social Work at the place where the person lives.

Data is entered in the patient's medical record about the: day, hour and the admission of the person, their identity, medical reference, reports about their condition, plan and the program for the treatment and rehabilitation, and also other documents about the health condition of the person.

If the necessary data about the health condition of the patient are not provided, they are determined by a physician according to the ascertained actual state through conversation, physical exam and similar.

These data are logged and are kept in a way that secures their secrecy and protection according to the regulations for protection of personal data.

Every patient has a special medical record and all the data in it are kept according to the legal regulations. Access to the medical record is allowed only to the physicians and the medical staff, and other persons can have access only with a court order.

According to the legal regulations the **agreement for admission** at the health institution is done by giving a **written statement in front of a person in charge and two literate witnesses of legal age**, that are not employed by the health organization and are not blood relatives with the person in direct descent, in indirect descent to the fourth degree and by affinity to the second degree, neither their spouse, nor the one who brought the person at the health institution (Article 58 of the Law on Extrajudicial Procedures). Still in the practice of this health institution this legal provision is not applied, because the hospital cannot provide witnesses according to the stated provision, because of which persons from the hospital staff are called as witnesses, the person who brought the patient or the police officer that brought the person, if they were brought against their will.

Involuntary commitment for treatment

Persons are involuntarily committed when their life and health or the life and health of other persons are in danger.

- The involuntary detention is conducted through charges filed by the family of the person or charges filed by the police.
- If the person is aggressive and dangerous, although they can only give a statement, they are involuntarily committed.

Notifying the court

During the involuntary detention, the hospital notifies the court in 24 hours of the admission, and in the next 24 hours the court should act upon the report.

If the court does not act within the legal time limit, on the basis of an evaluation by a team of physicians, it will be decided if the person will be released or committed.

Usually the court acts upon the reports of the hospitals, but sometimes it happens that the hospital make interventions to the court because of an untimely action.

At the time of the inspection five patients were committed at the hospital for which the Court of First Instance in Bitola has not delivered a ruling yet.

Notifying the parents or other persons

During detention of a mentally ill person at the hospital, the family and other persons are always notified by the circle of people that live together with the mentally ill person, and if a close person is not found and the patient is not in the state to give information, the Social Work Center in the place where the person lives is notified.

Until now nobody has filed proceedings against the health institution in cases when the patient is placed at the Institution involuntarily, without a court order being issued.

Limiting the freedom of movement or contact with the outside world

In terms of limitation of movement, the health institution has a duty within 48 hours to file a report to the court. This report is not filed if the person is held on the basis of a ruling for detention or if a criminal procedure is brought against them.

In this health institution the movement is limited only if the persons in question are dangerous to the environment, suicidal, prone to self-injury, whereby the physician who is treating them decides about the limitation of the freedom of movement and contacts with the outside world.

The number of these patients is variable and a concrete response has not been given whether there is a court order, but the psychiatrist who was encountered at the time in the hospital and with whom it was conversed about the professional information, thinks that only the physician that is treating the patient can make that decision. Therefore it can be concluded that most probably a court ruling is sought.

If the person voluntarily admitted, revokes their consent, in such a case if the person in charge thinks that the mentally ill person should be kept longer at the institution, they are obligated to notify the court within 24 hours.

In this health institution such cases have not been registered, but if need be, the physician that is treating the patient makes the decision and can additionally consult with an expert team at a professional conference. The physician that decides on this matter makes a confirmation note for detention of the person and notifies the board of specialists.

Thus, further detention of the person depends on the opinion of the physician that is treating them and eventually on the opinion of the board of specialists. Although in every one of these cases the court should be notified, there are no such cases in the practice of this health institution.

Rights and care for the persons with mental illnesses

Every patient in the institutions is provided, with proper care, medical treatment and rehabilitation, in accordance with current accomplishments, with individual work based on an individual working plan.

Individual and group therapy

In this institution there is a working plan of the board of specialists, prepared for every patient, in which a biological, psychotherapeutic and social therapeutic treatment is included, signed by: a physician psychiatrist, psychologist, social worker and a medical nurse. In the Institution there is an expert team that works with every patient and the expert teams are comprised of: a psychiatrist (neuropsychiatrist), social worker, psychologist and a medical nurse.

In terms of whether the work with the patients is based primarily on rehabilitation and therapeutic activities it is established that an assessment is conducted whether and what kind of treatment shall be used on the patient, depending on the established diagnosis. Thereby it has been established that at the Institution there is no bed by bed therapy, that is, every patient is supposed to go by himself and receive the medication therapy, that is, the medications are not given per bed as in the past.

During the preparation of the plan, the individual needs of the patient are respected, i.e. during the work with the patient it is acted according to their individual needs.

Patients have the possibility for everyday conversations with the physician, and monthly reports are written about the results of the work.

If it is evaluated that a certain way of work does not give positive results, another working plan is adopted and it frequently happens that the working plan is changed, and the change depends of the condition of the patient.

In this institution group therapy is also conducted, and the groups are formed by a physician as small groups of 6 to 12 patients or expanded therapeutic community, which is coordinated by the physician.

Recreation

Mentally ill patients have the right to a regular access to properly equipped rooms for recreation and a possibility for everyday recreation on the open.

The health institution has a sports and music gymnasium, drawing rooms, rooms for making handicrafts, carpenter workshop, library and a sewing room where on inspection patients were found sewing pillow casings and sheets for the hospital beds.

Living conditions and conditions for stay

Nutrition

In terms of providing food, according to the needs and desires and depending on the health condition of every patient during the inspection it has been established that the food is the same for the patients as well as for the staff, and with a referral form by a physician other kinds of food can be prepared for certain patients.

Heating and cooling

Appropriate heating and cooling in every room where patients reside is provided by a central heating system conducted through the whole hospital and with air-conditioning systems placed only in the lounges, but not in the bedrooms.

Decoration and arrangement of the rooms

Decoration and arrangement of the rooms is necessary for patients to have visual stimulation.

In this health institution only in the women's section of the Department where men and women are placed, rooms are decorated and well arranged, whereas in the other departments that is not the case.

Keeping personal belongings

During the inspection it was established that the patients do not have places of their own for keeping and locking personal items because in every room there is only one old locker.

Sanitation facilities

In terms of equipment and hygiene of the sanitation facilities and the existence of appropriate sanitation facilities for the old and the disabled, it has been concluded that the Judicial Department, sanitation facilities are in a very bad condition, with sewerage and a water installation that is leaking because of dilapidation.

Also the institution does not have sanitation facilities adapted for the use for the old and the disabled patients.

Clothing

For the purpose of strengthening the personal identity and self-respect of patients, as part of the therapeutic process it is necessary that the patients are enabled to dress in their own clothes.

In the Psychiatric hospital Demir Hisar the patients are enabled to dress in their own clothes, whose cleanliness in most cases was, regretfully, questionable.

Bedrooms

Concerning the measures taken to decrease the number of large bedrooms and place patients in small groups, it has been noted that the accommodation of the patients in this health institution depends on the construction and conditions that are offered by the buildings that have been built a long ago and have not been adapted.

Respecting the dignity and best interest of the patient

It is necessary for the psychiatric hospitals to provide humane living conditions, safe living environment and a humane attitude towards patients. Concerning the question whether all employees respect the dignity of the patients, whether proper measures are taken against the persons who do not respect it and have any health workers or other employees been sanctioned, it was stated that only in the case of an escape from the institution, disciplinary measures are taken against the employees at the hospital, but the employees have denied that any kind of torture is done on the patients.

Humane living conditions and safe living environment

From the inspection it has been ascertained that there are no humane living conditions at the Judicial Department, whereas at the department where the sicker patients are placed, it is necessary to pay bigger attention in establishing a higher level of hygiene for patients.

TREATMENT

Medication supply

From the conversation with persons in charge at the Institution and with some of the patients, it has been ascertained that the patients regularly receive the proper therapy and there is no shortage of medications.

The medications on the list of positive medications are regularly procured, and sometimes medications that are not on the list are also procured.

Although some of the medications are purchased by family members of the patient, every patient regularly gets the necessary therapy.

Types of therapy that are not used

In this health institution the electro-convulsive therapy is not used for over 20 years now and the same can be used only in the general hospitals in the presence of an anesthesiologist and only in special circumstances.

Also therapy in unmodified form is not used i.e. without an anesthetic and muscle relaxants.

Regularity of physical exams

For the purpose of making the right decision based on sufficient information it is necessary to conduct regular medical exams of the health condition and the subscribed medications for the patients.

In this health institution regular checkups are conducted for every patient and the proper therapeutic measures are taken.

Means of restraint

Use of devices for restraint and inhumane ways of handling patients (tying to the bed, straight jackets, tying with belts and other)

According to the persons in charge at the Institution tying patients to their beds is allowed when there is a danger of self-injury or danger to the surroundings.

At the moment of the inspection this measure was not used on any patient.

Procedure for taking measures of restraint

If measures of restraint are used, permission from the physician should be given and it should be done only in exceptional cases and the restraint should be removed when it is no longer necessary.

At the specified health institution during the application of the measures for restraint, consent from the physician is requested and a report is made in which the duration of the measure is stated. The health institution has a trained staff for application of non-physical techniques and techniques for manual control of patients. Physicians and the other medical staff are trained to take these kinds of measures.

In terms of the necessity for a clearly developed policy about taking measures for restraint at this health institution, it has been ascertained that the agitated patient should be helped primarily by conversing with him, without the use of aggressive measures, and the restraint is to be used as a final measure only when necessary.

Every example of physical restraint of the patients is noted in a special register opened for this purpose, and the same is noted in the patient's medical record.

OTHER RIGHTS

Right to work

The patients have the right to work according to their health condition.

In the Psychiatric hospital Demir Hisar there are no work engaged patients. During the inspection one case was pointed out when a patient from Prilep got fired by their employer because of they were treated at the hospital. The worker then filed a legal complaint to the court which was later dismissed.

Right to non-discrimination

According to persons in charge at the Institution, the mentally ill are treated without any discrimination, that is, in the same way as every other citizen at the health institutions.

In terms of the attitude of other health institutions towards providing certain health service for a mentally ill patient, it has been stated that the collaboration with other health institutions is good, especially with the Clinical hospital in Bitola and until now there has been no case of denying treatment for a patient at the Psychiatric hospital Demir Hisar.

Work engagement

Work engagement of patients is voluntary and is done only in the circle of the institution, without any compensation, as a part of the therapy management.

Patients are especially engaged in arrangement of the yard of the hospital, mowing the lawn, knitting, drawing, sculpting, choir singing and similar. But all of these work engagements are without any money compensation.

Separation according to sex

In terms of respecting this right it has been established that at the health institution there are spatial and other conditions for uninterrupted realization of this right. There is a mixed section at the health institution, of men and women, which are divided in separate parts of the building at night. Concerning the question whether there has been an occurrence where persons of both sexes have been placed in the same room during an emergency or due to lack of space, it was responded that there have been no such cases and that in emergency cases an additional bed was brought in the appropriate section where the patient is placed.

Accommodation of minors

In this health institution only persons over 16 years old are accepted. The older minors are placed in the Adolescent section and there is no special expert team working with minors, but the same expert teams that work with the other patients too.

At the time of the inspection at the adolescent section of the health institution there were 30 minors residing there at the age of 16 to 18.

Personal contacts inside and out of the institution Sending and receiving mail

Every patient is allowed to have regular contacts with the persons at the institution and with outsiders, whereby communication with outsiders can also be realized by sending and receiving postal packages.

Maintaining personal contacts with persons in the institution is always possible and without any obstructions for every patient.

The personal contacts of the patients with persons that come from the outside of the institution are done in a special room, for the protection of their privacy without the presence of another person.

The patients are not limited in the right to receive and send mail and that is executed through the management of the hospital. The shipments are not read by employees, except in cases where the patient is not capable of reading them.

The patients do not use the **internet** because the hospital cannot establish such a connection. The patients can use cell phones, if they are able to manage them.

In terms of the patients' right to watch television it has been established that they have that possibility. The departments where patients are placed who do not have their business ability taken away – the Department for Adolescents, the Department for Persons Addicted to Drugs and Alcohol, the Judicial Department and the mixed section, all have televisions in the dining rooms.

This health institution has cabinets for: music, painting, sculpting and carpenter activities, a sports gymnasium and a library.

Patients in this health institution have the right to participate in **religious activities** at their choice, but it has not been clarified how and when this right is exercised.

Use of weekend leave

Every patient has the right to a weekend leave (except the detained persons), of course if the health condition of the patient allows it and if the patient has an interest and possibility to stay with their family during the weekend.

Providing personal security to patients

In terms of the conditions for personal safety of patients and the existence of cases of escape, attacks from outsiders, self-injury and similar, it has been ascertained that all the departments at the health institution are monitored by a security agency.

In the cases of escape, which according to persons in charge at the Institution were in a very small number, the police station in Demir Hisar is immediately notified.

Health and social care

All of patients admitted in this institution, health insured or not, get an equal treatment for their stay and medical treatment established for them.

In terms of the social care, at the moment of the inspection in the period of January- June, 9 patients have been registered as social security beneficiaries.

The social workers give the patients legal help in exercising some right that is legally theirs by law.

Participation of experts

In practice the Institution rarely uses expert medical or legal help because there are no funds for this purpose.

Legal advice and legal help

For the purpose of exercising or protection of a right, the patients at the Institution can seek legal help from two layers employed at the Institution which has also hired an attorney at law. So the patients always get the legal help they need.

Informing about patients' rights

For the purpose of informing the patients or members of their family about the Institution's actions and the rights that patients have, this health institution has not prepared a brochure about its work and about the patients' rights, but has put the Law on Rights of Patients on display.

Also in every department the house rules of the hospital is displayed in a visible spot.

Right to a complaint and right to a response

The complaints of patients on any basis are primarily submitted to the chief nurse of the department, and then to the physician that is treating the patient, and if the problem is not solvable it is decided by the director of the institution.

The complaints are mostly related to the mutual relations of patients, and in practice the filed complaints, which are usually oral, are not submitted to the director.

Submitting petitions and complaints to the Ministry of Health and other organs in charge

In terms of the exercising this right of patients, according to the data and understanding of persons in charge at the Institution up until now there have been no complaints filed to the Ministry of Health or other organs.

MEASURES AND ACTIONS THAT CANNOT BE TAKEN TOWARDS PATIENTS

The Law, among other things, forbids torture, inhumane behavior or humiliation and punishment.

According to persons in charge, so far there have been no such cases of abuse in the Institution, that is, these legal restrictions are respected completely.

Clinical and experimental scientific research

According to the Law on Protection of Rights of Patients, in order for scientific research to be conducted on a patient it is necessary that a conscious, clear and voluntary consent is given by the patient, which can be revoked at any time by the patient or their parent and legal guardian the same way the consent was given.

In terms of this protection, persons in charge stated that no such research is done on patients in this health institution. Also it has been underlined that **sterilization of patients** is not done, that is, so far such measures have not been taken.

Informing patients about their health condition

Every patient depending on their ability is informed about their health, except if it is harmful to their health.

Expert team for treatment and rehabilitation of patients

The expert team should prepare an individual program for the person in written form.

There are such expert teams at the Health Institution and one expert team works with about 35 patients.

The expert team consists of: a physician, nurse practitioner, psychologist and a social worker.

For every patient there is a written program for each department.

Medical check-ups

The obligation for scheduling a medical check-up for a patient one month after they have left the institution is performed in a way that in the discharge list the physician gives advice about the medical check-up. Still the medical check-up does not represent an obligation to the patient, and the physicians at the Institution do not have the insight whether the patient respects the medical check-ups because the check-ups can be done at the day centers in Prilep and Demir Hisar.

For further treatment the physicians direct the patients to continue the treatment in their family circle and at the day centers.

If the patient is transferred to another health institution, their medical record is not given to the other institution, instead it is given only if the patient is transferred for treatment in the Day Hospital in the circle of the hospital, and other institutions are only given the discharge list from the hospital.

Discharge of involuntarily committed patients

The person committed in the health institution involuntarily, can be discharged only on the basis of a court decision based on the opinion of the expert team.

In terms of whether a timely court order is received in such cases and what if the same is not received on time or not received at all, whether the person is detained until the court order is received, it has been stated that there are no involuntary discharges from the institution.

If the court has not decided yet about the discharge of a patient involuntarily committed, the hospital keeps this person on the expense of the hospital, if they want that or if the person has nowhere else to go.

CONCLUSIONS

- Despite the estimated need and plans to open a center for mental health in Bitola, it has not been done yet;
- Bad and inadequate conditions for the stay of the patients in certain sections of the departments at the Institution;
- Lack of certain technical and hygienic conditions at the Judicial Department at the Institution;
- Inappropriate maintenance of hygiene of the clothes of patients with serious mental illnesses and insufficient care for this category of patients;
- No implementation of the provisions of article 58 from the Law on Extrajudicial Department during a voluntary hospitalization;
- Existence of cases of involuntary committed patients for which there is no timely delivered court order;
- Lack of a appropriate cooling in the rooms where patients sleep;
- Lack of decorations in the rooms and lack of conditions and possibilities for patients to keep their personal items;
- The patients are still accommodated in big bedrooms that are old and not adapted to their needs;
- There is no data recorded and no information whether or how many health workers respect the dignity and best interest of the patients;
- Absence of humane conditions of stay at the Judicial Department and in the Department for Persons with Serious Mental Illnesses;
- There is no developed policy and general regulations for taking restraining measures, but cases of taking of inappropriate measures have not been established;
- There is no appropriate record, knowledge and any kind of data for an eventual discrimination against some patients;
- There are no problems concerning rejection of the patients from the Institution to be treated in other health institutions from diseases not connected with their mental health;
- There are no conditions for establishing internet access because of the lack of means and equipment by the health institution;
- There are no spatial and other conditions for performance of religious activities by patients in the Institution;
- Because of lack of funds there is no inclusion of outside experts for the purpose of giving a higher level of assistance and protection for patients at the Institution;

- Inconsistency in respecting the right of patients and members of their family to be informed about the work of the institution by submitting special brochures and other materials;
- There are no recorded complaints from patients, that is, there is no developed system for submitting and acting upon complaints;
- Cases of escapes and suicides of patients, despite the taken measures of safety for keeping patients from escaping, from injury or self-injury.
- Absence of record for cases of torture, inhumane behavior or punishment of patients, because of which the existence or non-existence of this kind of treatment cannot be established;
- Sufficient number of expert personnel and expert teams in terms of staffing.

PSYCHIATRIC HOSPITAL “Negorci” - GEVGELIJA

MODE OF ACCOMODATION

Voluntary commitment

During inspection it has been ascertained that every patient who voluntarily applied for treatment signs a statement, that is, the health institution has prepared a form that is filled by the patient.

In this institution 60% of the admitted patients are brought escorted by medical personnel and a police officer, and 40% are brought by members of the family.

According to the legal regulations, consent for admission in the health institution is done by giving a written statement in front of an official and two literate witnesses of age that are not employed at the health institution and are not blood relatives with the person by direct descent, by indirect descent to the fourth degree and by affinity to the second degree, nor their marital spouse, or the person who brought him at the health institution (Article 58 of the Law on Extrajudicial Procedure)

Concerning the question whether and how this legal regulation is implemented in practice and which persons are called as witnesses it is stated that these legal regulations are not always applied, that is, if these witnesses are found then they are signed as such, but most frequently persons from the Institution, an orderly and a nurse practitioner sign as witnesses.

Involuntary commitment

Involuntary commitment at the health institution is done on the basis of a court ruling and in cases when any kind of delay of care, treatment, rehabilitation or admission because of the current mental state of the person, can lead to death or irreparable damage to their health, serious self-injury or injury to others, as well as causing serious material damage, but in that case a court ruling is still necessary.

It is obligatory that the court is notified about every patient within the legal time limit and every request to the court results in issuing a court ruling. In the practice of

this health institution, the requirements to the court for involuntary hospitalization are decided upon within the legally provided deadline.

In this health institution there are no persons that are held for treatment without their written consent or without a court order.

In terms of the possibility for limitation of the right for movement of patients in this health institution, it has been established that it is decided by the psychiatrist whose decision is confirmed by the board of specialists.

For each of these cases, reports have been filed to the court and court decisions have been made.

At this health institution there are no cases of a person voluntarily admitted to withdraw their consent, but in such cases the physician and the board of specialists decide and the court is notified, and if a court ruling is not made the patient is not discharged from the institution.

Notifying the parents and other persons

In terms of the legal obligation of the health institution to immediately notify the parents, legal representatives, other members of the family or persons that live together with the mentally ill person about their admittance at the institution, during the inspection it has been established that it is regularly performed.

If there is no sufficient data then it is obligatory that the center for social work is notified according to the place of residence of the patient.

Rights and care for the mentally ill patients

In this health institution all the possible measures are taken to provide the mentally ill persons accommodated at the health institution, with the best care, treatment and rehabilitation in accordance with the latest achievements through individual work, and to provide a separate working plan for every patient.

Individual and group therapy

In terms of this right it has been established that an individual plan is prepared for the patients and implemented by an expert team comprised of: a physician, social worker and a psychologist.

Concerning the question if there is an expert team that works with every patient and whether there is a sufficient number of experts that can successfully work with every patient individually, and if not how is this legal obligation implemented; it has been ascertained that there is a sufficient number of experts and expert teams, but it is stressed that there is lack of therapists.

In terms of the question if the work with the patients is primarily based on rehabilitation and therapeutic activities, it has been ascertained that two times a week patients have group therapy, during which all patients are included. In this institution patients can use: music, gym and carpenter workshops, but there are insufficient spatial possibilities to include all the patients.

At this institution a special emphasis is put on the rehabilitation activities of patients.

When preparing the individual working plans for every patient primarily the focus is on their individual needs because without respecting them the results of the treatment would be omissible. If it is estimated that a certain work with the patient does not give good results, the working plan is amended.

Also, patients also have group therapy i.e. psychosocial therapy that is conducted once a week, during which the opinion and needs of the patient are taken into consideration. A special expert team is working with patients, comprised of: a physician, social worker and a psychologist.

Possibility for recreation

At this health institution all the conditions and possibilities for recreation are provided for all patients in the gymnasium, on the tennis court and in the rooms for occupational therapy where the patients paint, write or practice other activities.

Also, all patients take obligatorily walks every day within the circle of the health institution.

LIVING AND STAY CONDITIONS

General condition

The general condition of the institution in terms of living conditions and conditions of stay unlike last visits made by the Ombudsman is rather improved in relation to the conditions of stay of the patients. During the inspection it has been ascertained that the existing rooms for accommodation and the rooms for preparing and serving food have been renovated. Also, the building of new accommodation rooms and a special room for surveillance of patients is in its final phase, and is with the purpose to ensure closer communication with the expert teams, regular monitoring of the situation and giving the necessary medical and therapeutic service at any given moment.

At the moment of the visit around 220 patients were placed at the Institution grouped depending on the degree and type of illness, as well as depending on their sex.

According to persons in charge, there are certain problems at the Institution in the Judicial Department because of the indifference of the judicial organs after delivering the verdict and pronouncing the security measure Compulsory Treatment, to monitor the execution of the measure and to be concerned about the way of treatment and the opinions given by the medical board of the hospital for the purpose of changing the measure that can also be realized in the family circle. For that purpose, the Ombudsman has been asked to deliver letters of correspondence to the competent courts that pronounce these measures and refer citizens to hospital treatment in such institutions, and especially to the judge competent for execution of sanctions, to visit these institutions more frequently, and on the basis of conversations with the medical board and the given history, to voice his opinion about further re-socialization of the patient.

At this hospital there are patients that are there for a longer period of time and nobody shows any interest in them, that is, only the employees show interest for their

life and health condition because their families show no interest at all and do not visit them.

Nutrition

In terms of providing food according to the needs and desires of patients and depending on the health condition of every patient, at the Institution all patients are given with three meals per day and if a patient has the need for additional food, an additional meal is provided.

Heating and cooling

In terms of heating there are no problems because the institution has its own heating system.

Concerning the cooling system, for the summer period there are air conditioning systems in every department, but not in the patients' rooms.

Decoration and arrangement of the rooms

This institution is in a renovation phase, whereby patients will be able to decorate their own rooms by hanging pictures and other decorations. This way the patients will be able to achieve visual stimulation.

Places for keeping personal belonging

In every room there are common closets and lockers and there is the possibility for patients to lock them, but the keys are guarded by employees at the institution because patients steal objects one from another.

Equipment and hygiene in the sanitation rooms

There are no separate sanitation rooms for the old and the disabled.

Clothes

The institution allows patients to dress in their own clothes for the purpose of strengthening their personal identity and self-respect as part of the therapy process.

Accommodation of patients in smaller rooms

Despite the need to accommodate patients in smaller groups, concerning the measures taken to decrease the number of large bedrooms, during the inspection of the health institution it has been ascertained that there are 5 or 6 patients

accommodated in each room, while a smaller number of rooms accommodate four or three patients.

Respecting the dignity and best interest of the patient

In terms of providing humane conditions for stay, safe living environment and humane treatment, according to persons in charge of the institution, in general the employees respect the dignity of the patient, but there have been cases of health workers sanctioned because they did not respect these rights of the patients, which is established through the video surveillance.

TREATMENT

Provision of the necessary medications

The health institution has all the appropriate medications and there are no periods of shortage of medications, no patient is left without the necessary medications, i.e. all patients take their necessary therapy regularly and timely.

Types of treatment

At the health institution ampullar and tablet therapy is used on patients, and the electroconvulsive therapy is no longer used. Also, therapy in unmodified form is not used i.e. without anesthetics and muscle relaxants.

Regular check-ups

For the purpose of making the right decision based on sufficient information related to the health condition of the patients, there are daily morning rounds for every patient, and also individual medical exams of patients depending on their needs and conditions.

MEANS FOR RESTRAINT

Use of devices for restraint and inhumane ways of dealing with patients (restraining to the bed, strait jackets, restraining with belts, etc)

At the health institution restraining devices are used only in exceptional cases. Physical immobilization is used as a restraint method i.e. patients are fixated with cloth to prevent them from hurting themselves.

Procedure for taking measures of restraint

When a restraining measure is used, the physician's consent is always sought and the restraint is removed only when it is no longer necessary.

Every department has a special register in which every example of physical restraint of patients is noted.

For the implementation of restraining measures there are trained teams i.e. the medical personnel and the orderlies are trained for this purpose.

Protection of the right to non-discrimination

Persons in charge at the Institution stressed that there have been no cases of a patient being discriminated against on any basis and that all the patients are treated equally during the treatment at this health institution.

Work engagement

In terms of the work engagement in the period while the patient is residing at the health institution, and in terms of receiving compensation for the work engagement, it has been stated that the patients accommodated at this health institution are work engaged depending on their possibilities and abilities and, of course, depending on their health condition.

Separation of patients according to their sex

During the inspection it has been ascertained that the patients at this institution are divided in separate rooms according to their sex and that there are no cases where persons of different sex are placed in the same room even temporarily.

Also at this health institution **minors are not held or accommodated.**

Personal contacts within and outside of the institution

Sending and receiving mail

All patients accommodated in the health institution have the right and possibility to realize personal contacts with persons in the institution and other persons.

The patients communicate with the outside world in multiple ways:

- By **telephone** – For the purpose of exercising this right there are public payphones.

- **Realization of personal meetings** with the relatives. The realization of the meetings and the personal contacts is done in a special room for protection of their privacy.

- **Sending and receiving mail.** The letters addressed to patients are delivered personally to the patients without previously being opened and checked.

- **Using the internet.** In this health institution patients are allowed to use electronic communication if they have the need for it.

- Watching **television**. In terms of the right of patients to get information in other ways, during the inspection it has been ascertained that every department has a TV set.

Using weekend leave

It is in the interest of every patient to spend every weekend with their family as often as possible, so it is practiced in cases where the family shows such interest and is able to take care of the mentally ill patient, whereby the state of the patient is taken into account. So, some of the patients because of the seriousness of their condition cannot be released home every weekend, and other patients are not released because their relatives do not have the interest and do not want to take them in.

Providing personal security for patients

Although, according to the statements of persons in charge at the institution, all measures for personal security of every patient have been taken, it has been ascertained that there are no appropriate conditions for securing the personal safety of every patient, because there is a significant number of escapes, and there is also a smaller number of patients' suicides.

Social and health care

No matter if the patients are insured or not, all of them are treated for free in this institution.

In terms of social care, the persons in charge at the Institution have been asked how the social status of mentally ill patients is resolved and whether there are any patients on social welfare, as well as, whether the professional services at the Institution help the patients to realize a right that is theirs by law.

These questions were given the answer that the patients realize their social rights through the social worker.

Participation of experts from different disciplines

In practice the participation of medical and legal experts is rarely used in the treatment and help given to patients because funds are not provided for this purpose.

Legal advice and legal help

For realization and protection of the rights of mentally ill persons residing at the health institution, the patients are helped by lawyers and social workers employed at the Institution and up until now no problems have been noted in the realization of this right.

Information about patients' rights

In this health institution there is no printed material and brochures about the work of the institution and the rights of patients, for the purpose of informing the patients and their families.

Right to a complaint and right to a response

It is in the practice of the Institution that every patient can file a complaint, but that is mostly done by the seriously ill patients. Up until now there have been no complaints submitted to the Ministry of Health.

Measures and actions that cannot be taken against the patients

Actions prohibited by law, like the ban against: torture, inhumane behavior, humiliation or punishment, according to people in charge at the institution, are respected and in case of their violation a disciplinary and even a criminal procedure is filed.

Informing patients about their health condition

Every patient, depending on their ability to grasp and understand the information, is informed about their health status, except if it is harmful to their health.

An expert team for treatment and rehabilitation of patients

The expert team that is intended to work with every patient should prepare an individual program for the patients in a written form.

In this health institution there is a sufficient number of expert teams that include a physician, a social worker, an orderly, and for every patient an individual program is prepared.

Medical check-ups

In the realization of the right for a medical check-up a month later, on a patient that has left the Institution, it has been ascertained that the Institution instructs every patient where to appear for a check-up, i.e. whether the patients should visit their family physician or a psychiatrist residing in their place of living or in the nearest place, and respect of this obligation is monitored by a social worker. If the patient should be transferred to another health institution the whole medical record is not submitted, only the discharge note.

CONCLUSIONS

- Absence of cases of untimely delivered court decisions about involuntarily committed patients;
- Improvement of the conditions for accommodation of patients with the renovation of the existing premises and building new ones;
- Absence of implementation of the provisions of Article 58 of the Law on Extrajudicial Procedures during voluntary hospitalization;
- Absence of a proper cooling system in patients' rooms;
- Absence of decoration of rooms, which is expected to improve after the renovation and adaptation of the institution;
- Lack of safe conditions and possibilities for patients to keep personal belongings;
- Accommodation of smaller number of patients in large bedrooms;
- Unregistered data and information that show whether and how much the health workers respect the dignity and best interest of the patients; but monitoring the respect of these rights with video surveillance and taking measures against the health workers that do not respect them;
- Absence of a policy and general rules about the use of restraining measures, restraining done with cloth instead of belts and absence of use of inappropriate measures;
- Absence of an appropriate record, knowledge and any data for a possible discrimination of some patients;
- No problems in terms of denying patients from the Institution to get treatment at other health institutions for diseases that are not connected with their mental health;
- Existence of internet access for patients;
- Lack of spatial and other conditions for patients to perform religious activities;
- Exclusion of outside experts in providing a higher level of help and protection for patients at the Institution due to lack of funds for this purpose;
- Inconsistent respect of the right of the patient and members of the family, to be informed about the work of the Institution, absence of brochures and other informative material for the patients;
- No registered complaints from patients and a working policy for filing and acting upon complaints;
- Cases of escapes and suicides of patients, despite the safety measures for preventing patients from escaping and from injury or self-injury;
- No registered cases of torture, inhumane behavior or punishment of patients;
- Sufficient number of qualified personnel and expert teams in terms of staffing.

RECOMMENDATIONS FOR IMPROVEMENT OF THE CONDITIONS AT THE GIVEN PSYCHIATRIC HOSPITALS

- Specific measures to be taken for the purpose of delivering a timely court ruling, i.e. within the legally provided timeline (with appropriate changes in the organization of the work of courts) or other ways to be found for establishing mutual collaboration between the health institution and the court in terms of

patients that are involuntary committed for treatment at the psychiatric institution.

- An individual plan for treatment and rehabilitation to be prepared for all patients, according to their condition and individual needs.
- The announced changes of Article 58 of the Law on Extrajudicial Procedures in terms of voluntary hospitalization, to be executed.
- To readapt the large bedrooms into smaller ones because of the positive influence on the psychosocial condition of the patients.
- To create conditions for proper cooling in the summer period in the patients rooms, to decorate them for the purpose of visual stimulation for patients and to create conditions for safe and appropriate keeping of the personal belongings of patients.
- To improve the quality of the food for patients.
- To build or adjust the sanitation rooms for their appropriate use by the helpless and disabled patients.
- To improve the general condition in terms of the spatial conditions, their orderliness and maintaining hygiene and to create better and more humane conditions for residence and living.
- To create appropriate conditions for the reduction and elimination of the escapes and suicides of the patients.
- To work out general rules and basic policies for taking restraining ("fixating") measures towards patients.
- To establish and develop an appropriate system for informing and filing complaints by patients inside the institutions and against other authorities and institutions.
- To create conditions, i.e. to prepare enough materials and brochures for the purpose of informing all patient and members of the family about the work of the institution and the rights and obligations of the patients and health workers.
- To create conditions for the realization of the right of patients to perform religious activities.
- To secure material conditions and include outside experts that can help in the improvement of the quality of treatment and rehabilitation of the patients with the application of new, contemporary methods for action and treatment.
- To take measures against all of the health institutions that refuse to admit a mentally ill patient for treatment of a disease that is not connected with the mental health and the compensation for the means for the health service to be charged or not to be charged according to the legislation, and not to indebt the psychiatric hospital in every case.
- To open multiple centers for mental health in the Republic of Macedonia for the purpose of conducting deinstitutionalization and inclusion of the mentally ill persons in the community, and also to create conditions for training and help for the families to accept these persons, but also to secure a housing solution for the persons which do not have a place to stay, and are covered by the process of deinstitutionalization.

THE OMBUDSMAN