NPM and closed institutions of social care: experience and co-operation with the civil society in Serbia

South-East Europe NPM Network Salzburg, April 2016

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NPM of the Republic of Serbia

- Tasks of NPM performed by State Ombudsman (separate budget and staff)
- Close co-operation with human rights CSOs
- 100s of visits (announced, unannounced, follow-up)
- 1000s of recommendations to institutions, governmental bodies and public actors
- Largest number of visits to criminal sanctions facilities





NPM and closed institutions of social care

- Number of visits increasing
- Focus on closed institutions for children and adults with disabilities
- Focus on homes for elderly is lacking, due to lack of capacities and prioritizing
- However, *necessity recognized* to include homes for elderly, especially due to:
- the *closed nature* of many of them;
- diverse structure of residents (persons with disabilities, the elderly, adults without disabilities);
- cases of legal capacity deprivation of the residents





NPM and closed institutions of social care: most serious problems

- Example: "Dom Veternik" near the second largest city of Novi Sad
- Visited by the NPM, Provincial Ombudsman, CoE Commissioner for Human Rights
- Latest visit in February 2016 follow-up visit after numerous recommendations

- 538 residents children and adults with disabilities (non-compliance with recommendations)
- Common and frequent use of isolation (non-compliance with recommendations)
- Common and frequent use of *restraint methods* (non-compliance with recommendations)
- Flawed and irregular documentation on use of isolation/restraint/medication





NPM and closed institutions of social care: most serious problems

- Recommendations and stances of NPM focus on:
- <u>Transformation</u> and <u>eradication</u> of closed institutions (prolonged confinement considered inhumane)
- Creating individual plans for support and life in less restrictive environments
- <u>Total abolishment of isolation</u> as treatment or punishment
- Restrictive and regulated use of restraints as a last resort
- Prevention of violence and abuse
- Healthcare in closed social care institutions (separate focus during visits): timely and regular access
 to elementary/specialist healthcare; right to consent; involuntary medical treatment; quality of care;
 controlled and regulated use of medico-therapy





Thank you. Vielen Dank.

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