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

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• 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:
  - Transformation and eradication of closed institutions (prolonged confinement considered inhumane)
  - Creating individual plans for support and life in less restrictive environments
  - Total abolishment of isolation 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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