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**Remarks of the Danish Ministry of Health with reference to the preliminary observations presented on psychiatry by the CPT on 13 February 2014.**

Regarding the staffing situation and the incidents with the police at Psykiatrisk Center Amager and Psykiatrisk Center Sct. Hans, Region Hovedstadens Psykiatri (The Capital Region of Denmark – Psychiatry) has informed the Ministry of Health that calling the police only happens in very rare situations as staff is educated in managing patients acting violently. But the police are of course contacted in situations with high risks for other patients and/or staff. At Sct. Hans this on average happens once every second month and at Amager, every third month. Situations where the police use force only happens once every second or third year.

Regarding the Secure Department of Nykøbing Sjælland Psychiatric Hospital, the description in the sentence "Staff were under constant time pressure which, as they themselves admitted, could at times lead them to resort to the use of means of restraint, notably locking-up of patients, when such a measure might not have been necessary" gives rise to the following comments: Region Sjælland (Region Zealand) specifies that according to the law, patients at this hospital can be locked-up in their rooms because of danger to him/herself or staff or to secure the patient against too many stimuli. The decision of locking-up a patient in his/her room has to be taken by a doctor and on the basis of a concrete situation or incident. It also happens that patients themselves ask to be locked in their room, e.g. in situations where they become paranoid.

- . / . Regarding the staffing situation at the Secure Department of Nykøbing Sjælland Psychiatric Hospital we can inform, that staff counts approximately 100 persons. These persons are healthcare staff (doctors, nurses etc) and social workers. The hospital in addition has a contract with a security company providing a certain amount of security personnel. Doctors are in charge of the Secure Department at all times. For reasons of security a more detailed account of staff and their work schedules can not be provided.

Regarding the "walking restraint", the Danish Health and Medicines Authority has recently send a report to the Ministry of Health. In this report it is recommended that the possibility of using walking restraint is made permanent, as the experiences for the patients, who have been involved, are very good.

In this connection it should be mentioned that in autumn 2014 the Government will introduce a bill to change the Mental Health Act in order to ensure better rights for psychiatric patients, who are subject to detention or coercion, including measures to reduce mechanical restraint. This bill is expected to contain permanent rules regarding the use of walking restraint. Further it should be mentioned that the Ministry of Health collaborates with the Danish Institute for Human Rights to ensure that the bill will be consistent with the international conventions on human rights.

As noted in the text of the CPT preliminary observations, several measures designed to tackle the problem of frequent and prolonged use of restraint are undertaken by the authorities and the hospitals in order to reduce the use of coercion.

The Government has declared the goal to improve conditions for people with mental illness, including a reduction in the use of coercion. On 15 May 2014 the Government presented a comprehensive long-term action plan for the future development and expansion of the services to people with mental illness. This plan includes e.g. targets for reducing coercion in psychiatry, including mechanical restraint, and will support the new framework and direction for psychiatry that has been recommended by the Commission on mental health. The keyword for the plan is "equal effort". Psychiatric patients must receive the same effort, have the same rights and get the same high quality in treatment and rehabilitation as patients with physical illness. Expectedly 1.6 billion Danish kroner will be reserved for an increase of capacity in psychiatry, e.g. in outpatient psychiatry and closed wards.

Link to the action plan (in Danish):

[http://www.sum.dk/Aktuelt/Nyheder/Psykiatri/2014/Maj/~-/media/Filer%20-%20Publikationer\\_i\\_pdf/2014/Ligevaerd-psykiatriplan-maj-2014/Psykiatri\\_handlingsplan-netudgave.ashx](http://www.sum.dk/Aktuelt/Nyheder/Psykiatri/2014/Maj/~-/media/Filer%20-%20Publikationer_i_pdf/2014/Ligevaerd-psykiatriplan-maj-2014/Psykiatri_handlingsplan-netudgave.ashx)

Currently the Government enters partnerships with the regions responsible for progression on the reduction of coercion in psychiatry. The Government has permanently allocated 50 million Danish Kroner per year to these partnerships. There has been allocated 74 million Danish kroner over four years (2014-2017) to experiment with force-free units in psychiatry and 100 million Danish Kroner in 2014 to create a better physical environment at hospitals to support a reduction of coercion.

Med venlig hilsen

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/ Louise Filt