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Summary O1: Work order 4

Database of data on the social security system

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I. Intellectual Output O1 Germany "Database Social Security System"

I.1 Social security system in Germany ¹

Due to the currently valid legislation, the standard in social protection should be maintained as a priority. The entire social law is summarized in the Social Code, the SGB. The legal areas of social security have gradually been transferred to this Social Code.

Books of the Social Code (SGB)

General part:

The SGB I of 11.12.1975 contains general information on social benefits and service providers as well as common rules and principles for all social service sectors.

Basic security for jobseekers:

SGB II does not concern social security, but here one finds explanations on the social security system, since there are numerous links to various branches of social security.

Employment promotion:

The SGB III was only with the law for the reform of the work promotion from the 24.03.1997 furnished and stepped on 01.01.1998 into force.

Common rules for social security:

SGB IV has existed since 1976. It contains general rules for all social insurance branches.

Statutory health insurance:

The SGB V was established by the health reform law of 20.12.1988. On 01.01.1989 it came into force.

Statutory pension insurance:

With the Pension Reform Act of 18.12.1989 the right of the statutory pension insurance with effect from 01.01.1992 as sixth book (SGB VI) was put into the SGB

Statutory accident insurance:

SGB VII has been set up for accident insurance with the Accident Insurance Classification Act of 20.08.1996. It came into force on 01.01.1997.

Child and Youth Services:

The SGB VIII has been incorporated into the Social Security Code by the Act on the Reorganization of the Child and Youth Welfare Act of 26.09.1990 and came into force on 01.01.1991. In SGB VIII there are no references to the social security system, therefore there are no corresponding explanations in SGB VII.

¹ (Deutsche Rentenversicherung Bund Geschäftsbereich Presse- und Öffentlichkeitsarbeit, Kommunikation, 2018). S. 16 - 18

Rehabilitation and participation of disabled people:

The SGB IX came into force on 01.07.2001. and has reorganized the services for rehabilitation and the participation of people with disabilities for all social service providers.

Social administrative procedures and social data protection:

The SGB X was summarized in 1980, the administrative procedure for the social security institutions and partly revised. In 1982, the legislature amended the SGB X with regulations on data protection and cooperation between service providers.

Social care insurance:

The SGB XI was at the introduction of social care insurance by the Nursing Insurance Act from 26.05. 1994 furnished. It came into force on 01.01.1995.

Social care:

The SGB XII was included in the Social Code of 27.12.2003 by the law for the classification of social assistance law. From 01.01.2005 it replaces in essential parts the so far valid Federal Social Assistance Act. In SGB XII there are no references to the social security system, therefore there are no corresponding explanations in SGB XII.

Social legislation is constantly adapted to the changing conditions of the social and economic environment. Many legal regulations have recently influenced social legislation.

I.2 Relevant legal regulations for occupational therapy in Germany

The legal position of the occupational therapist in Germany is determined by the social codes. Here they are summarized together with three other job profiles under the collective term health care providers or remedy providers.

The SGB V contains 12 paragraphs that regulate the provision of services, the approval and the areas of application of occupational therapists. These are supplemented by a paragraph in SGB VI and VII as well as 13 paragraphs in SGB IX.

SGB V

By the § 124 SGB V is the education as well as the condition for the admission to the service provider of remedies for Germany defined, as well as the places of application of the Heilmittelerbringer. The conditions for the loss of admission to the service provider are also included in this paragraph.

By the § 125 SGB V of the top federation federation of the health insurance companies in Germany is obligated, together with the interest representatives of the service providers to set up framework recommendations of the remedies, in order to ensure a uniform supply. Here are the remedies defined, which are later prescribed in practices or clinics by doctors and should be performed by the therapist.

The § 302 SGB V regulates the obligations of the service providers to the health insurance companies. On this basis, settlements between the health insurance funds and the service providers are handled. The amount of the remuneration depends on

the agreements between the Central Association of Health Insurance Funds and the representatives of the service providers. The § 303 contains additions to this point. Paragraphs 2, 20 and 20a SGB V describe the benefits provided by the health insurance funds for the insured persons.

In § 32 SGB V the claim is regulated by insured persons for remedies. Here, the joint federal committee is appointed for the determination of the guidelines. These are described in § 92 SGB V again in particular.

Paragraphs 40, 43a and 119 SGB V describe possible uses of occupational therapists in medical rehabilitation and in the social pediatric area.

SGB VI and SGB VII

In § 9 SGB VI and § 1 SGB VII, the pension insurance and the accident insurance are also listed as carriers for preventive measures and for medical rehabilitation. These are comparable with § 20, § 20a and § 40 SGB V.

SGB IX

The SGB IX regulates the rehabilitation and participation of disabled people. In 13 paragraphs the occupational therapy is named directly or tasks of occupational therapy are described.

I.2.1 Legal regulation

From the side of the professional associations there is no listing of paragraphs in Germany, which regulates the work of the ergotherapists exactly.

SGB V²

In this section, all the paragraphs from the SGB V are listed, which regulate the work of the Remedies bringer in Germany following the recommendation of the ZVK (German Association of Physiotherapy).³

§ 2 SGB V Services

(1) The health insurance companies provide the insured persons with the benefits referred to in the third chapter in compliance with the economic efficiency requirement (§ 12), insofar as these benefits are not attributed to the individual responsibility of the insured. Treatment methods, medicines and remedies of special therapeutic directions are not excluded. The quality and effectiveness of the services must be in line with the generally recognized state of medical knowledge and medical progress.

[...]

§ 20 SGB V Primary prevention and health promotion

(1) The health insurance fund provides for benefits for the prevention and reduction of disease risks (primary prevention) as well as for promoting the self-determined health-oriented behavior of the insured (health promotion). In particular, the benefits will help to reduce socioeconomic and gender inequality in health care. The health insurance company will base the action fields and criteria according to paragraph 2 on this.

[...]

² (Becker & Kingreen, 2016)

³ (Physiotherapie in Deutschland, 2019)

(4) Services pursuant to paragraph 1 shall be provided as

1. Behavioral prevention services according to paragraph 5,
2. Benefits for health promotion and prevention in living environments for those insured in the statutory health insurance according to § 20a,
3. Benefits for health promotion in companies (occupational health promotion) according to § 20b.

(5) The health insurance fund may provide a behavioral prevention service in accordance with paragraph 4 (1) if, in accordance with paragraph 2 sentence 2, it is certified by a health insurance fund or by a third party entrusted with the task of performing this task on its behalf. When deciding on a benefit for behavioral prevention, the health insurance company takes into account a recommendation for prevention pursuant to § 25 (1) sentence 2, § 26 (1) sentence 3 or a written recommendation in the context of occupational medical care or other medical examination. The health insurance may collect, process and use the personal data resulting from the prevention recommendation only with written consent and after prior written information of the insured. The consent can be revoked at any time in writing. The health insurances may transfer their duties under this provision to other health insurance funds, their associations or consortiums. For services for behavioral prevention, which the health insurance company provides remotely because of special occupational or family circumstances, § 23 (2) sentence 2 applies accordingly.

[...]

§ 20a SGB V Services for health promotion and prevention in life worlds

[...]

(2) The health insurance fund may provide health promotion services and prevention in lifestyles if the willingness of those responsible for the lifeworld to implement proposals to improve the health situation and to strengthen the health resources and skills and with an appropriate personal contribution to the implementation of the Framework agreements under § 20f.

[...]

§ 32 SGB V remedies

(1) Insured persons are entitled to medical treatment unless they are excluded in accordance with § 34. For remedies not excluded under sentence 1, § 92 remains unaffected.

(1a) By 30 June 2016, the Joint Federal Committee, in its guideline pursuant to § 92 (1) sentence 2 point 6, provides more details on the treatment of insured persons with long-term treatment needs. In particular, it must determine when a long-term need for remedies exists and determine whether and to what extent an authorization procedure should be carried out. If an authorization procedure is foreseen in the directive, the applications must be decided upon within four weeks; otherwise the permit will be deemed to have been granted after the deadline. If additional information of the applicant is required for the decision, the period of time until the receipt of this information is interrupted.

(2) Insured persons, who have completed the age of eighteen, have to pay the costs of the remedies as an additional payment to the issuing agency in accordance with § 61 sentence 3. This also applies if massages, baths and physiotherapy are provided as part of the medical treatment (§ 27 sentence 2 no. 1) or in outpatient treatment in hospitals, rehabilitation or other facilities. The additional payment for the remedies mentioned in sentence 2, which are given as part of the medical treatment, is calculated according to the prices agreed for the health insurance of the insured person according to § 125 for the area of the registered office of the insurer. Insofar as there are different price agreements, the health insurance company has to calculate an average price. The health insurance company communicates the applicable prices to the associations of statutory health insurance physicians who inform the contract doctors about it.

§ 40 SGB V medical rehabilitation services

(1) If insured persons do not qualify for outpatient treatment in order to achieve the objectives described in § 11 (2), the health insurance company will provide necessary outpatient rehabilitation services in rehabilitation facilities for medical reasons, for which there is a care contract pursuant to § 111c; this includes mobile rehabilitation services provided by residential facilities. Benefits according to sentence 1 are also to be provided in inpatient care institutions in accordance with § 72 para. 1 of the Eleventh Book.

[...]

§ 43a SGB V Non-medical social pediatric services

(1) Insured children are entitled to non-medical social-pediatric benefits, in particular psychological, curative and psychosocial services, provided that they are under medical responsibility and are required to identify a disease at the earliest opportunity and to draw up a treatment plan; § 46 of the Ninth Book remains untouched.

[...]

§ 92 SGB V Guidelines of the Federal Joint Committee

(1) The Federal Joint Committee shall decide on the guidelines necessary for securing medical care regarding the guarantee of adequate, expedient and economic provision of the insured persons; account must be taken of the particular needs of the care of the disabled, those with disabilities, and the mentally ill, especially in the field of stress testing and occupational therapy; in doing so, he may limit or exclude the provision and prescription of services or measures if, according to a generally recognized state of medical knowledge, the diagnostic or therapeutic benefit, the medical necessity or the economic efficiency have not been established; it may restrict or exclude the prescription of medicinal products where the inadequacy is proven or another, more economical treatment option with comparable diagnostic or therapeutic benefits is available. He should in particular decide on the guidelines:

1. medical treatment,
2. dental treatment including denture restoration and orthodontic treatment,
3. Measures for the early detection of diseases and for the quality assurance of early detection examinations and for the implementation of organized cancer

- screening programs according to § 25a including the systematic recording, monitoring and improvement of the quality of these programs,
4. medical care during pregnancy and maternity,
 5. Introduction of new examination and treatment methods,
 6. Prescription of medicines, dressings, remedies and aids, hospital treatment, home nursing and sociotherapy,
 7. Judgment on incapacity for work including incapacity to work according to § 44a sentence 1 as well as the employable person in need of protection according to § 2 Abs. 1 Nr. 2a within the meaning of the Second Book,
 8. Prescription of individualized medical rehabilitation services and advice on medical rehabilitation services, work participation services and supplementary rehabilitation services;
 9. MRP,
 10. medical measures to induce pregnancy according to § 27a para 1,
 11. Measures according to §§ 24a and 24b,
 12. Regulation of patient transport,
 13. Quality control,
 14. specialized outpatient palliative care,
 15. Vaccinations.

[...]

(6) The guidelines under paragraph 1 sentence 2 no. 6 shall be governed in particular

1. the catalog of prescribable remedies,
2. the assignment of remedies to indications,
3. the peculiarities of repeat orders,
4. Content and scope of the prescribing doctor's collaboration with the respective provider of the medicinal product.

Prior to the Federal Committee's decision on the guidelines for the prescription of medicinal products pursuant to subsection (1) sentence 2 no. 6, the organizations of the service providers referred to in section 125 (1) sentence 1 shall be given the opportunity to comment; the opinions are to be included in the decision.

(7a) Prior to the decision of the Joint Federal Committee on the guidelines for the regulation of aids pursuant to paragraph 1 sentence 2 no. 6, the organizations of the service providers and the top organizations of the aid manufacturers concerned referred to in § 127 (6) sentence 1 shall have the opportunity to comment at federal level ; the opinions are to be included in the decision.

[...]

§ 119 SGB V Social pediatric centers

[...]

(2) Treatment by social pediatric centers shall be aimed at those children who, because of the nature, severity or duration of their illness or threatened illness, can not be treated by appropriate doctors or in suitable early intervention centers. The centers should work closely with doctors and early childhood care centers.

§ 124 SGB V approval

(1) Remedies that are provided as services, in particular physical therapy, speech therapy or occupational therapy, may only be given to insured persons by licensed service providers.

(2) To be admitted is who

1. has the training required for the provision of the service as well as a corresponding authorization to carry out the job title,
2. has a practical equipment which ensures an appropriate and economic service provision,
3. recognizes the arrangements applicable to the care of the insured.

A licensed healthcare provider must be licensed in another area of treatment, provided that he fulfills the conditions of sentence 1, points 2 and 3 and employs one or more persons who demonstrate the conditions of sentence 1, point 1.

(3) Hospitals, rehabilitation centers and similar establishments may hand over the remedies referred to in paragraph 1 to persons who fulfill the conditions laid down in paragraph 2 (1); Paragraph 2 Nos. 2 and 3 shall apply mutatis mutandis.

[...]

(6) The authorization may be withdrawn if, after the authorization has been granted, the service provider no longer fulfills the conditions laid down in paragraph 2 (1), (2) or (3). The authorization may also be revoked if the service provider does not provide the further training within the grace period pursuant to § 125 (2) sentence 4. Paragraph 5 sentence 1 applies accordingly.

[...]

§ 125 SGB V contracts

Last modified by Art. 12 G v. 09/08/2019

(1) The federation of the health insurance funds concludes with binding effect for the health insurance companies with the leading organizations responsible for the perception of the interests of the welfare providers on federal level for each area of the cure a contract over the details of the supply with the respective remedy. The relevant leading organizations responsible for the area of the remedy have to conclude the contract together. The contracts are to be concluded with effect from 1 July 2020. The Guidelines of the Joint Federal Committee pursuant to § 92 (1) sentence 2 point 6 must be taken into account. The central association federation of the health insurance companies has to publish the contracts as well as the applicable price lists.

(2) The following shall be specified in the contracts referred to in paragraph 1::

1. the prices of the individual service items and uniform rules for their billing,
2. the obligation of the service providers to further training,
3. [...]
4. the content of the individual measures of the particular remedy, including the benefit period, which consists of the implementation of the individual measure and the preparation and post-processing including the required documentation,
5. Measures to ensure the quality of treatment, care and treatment outcomes,

6. the content and scope of the cooperation between the service providers and the prescribing panel doctor;
7. the necessary information on the Therapeutic Products Ordinance by the service provider,
8. Measures of efficiency of service provision and their testing,
9. Remuneration structures for employees taking into account the actual remuneration paid; In order to prove the actually paid wages, the Berufsgenossenschaft für Krankendienst und Wohlfahrtspflege has to send to the Federation of Sickness Funds statistical information on its request, including the number of employees, their hours worked, and the number of hours worked in accordance with § 165 of the Seventh Book fees paid, as well as
10. personal, geographical and material conditions which ensure a purposeful and economic provision of services within the meaning of section 124 (1) (2), whereby, in particular with regard to the spatial conditions, guide values can be agreed.

(3) The contracting parties must be aware that the prices to be negotiated allow a fair and economic supply. In particular, when agreeing prices for the individual service items on the basis of an economically leading practice, they must take the following into account:

1. the development of staff costs,
2. the development of material costs for the provision of services as well as
3. the average running costs of operating the remedy practice.

[...]

(4) The contracting parties referred to in paragraph 1 shall make a joint recommendation on the design of a barrier-free practice.

(5) If a contract pursuant to paragraph 1 does not come into effect in full or in part by 1 July 2020 or until the expiry of a contract period agreed by the contracting parties, or if the contracting parties can not agree on the prices for the individual service items or one until the expiry of these periods If the agreed prices are adjusted, the content of the contract or the prices shall be fixed by the Arbitration Board in accordance with paragraph 6 within three months. If the arbitration board does not make its decision until after three months have elapsed, then in addition to the fixing of the prices, payment amounts must be settled which compensate for compensation losses incurred by the service providers as a result of the delayed decision of the arbitration board. The previous contract or prices are valid until decided by the arbitration board.

[...]

(7) The national associations of health insurance funds and the alternative health insurance funds may conclude contracts with the service providers, their associations or other associations about the details of the supply of health-specific remedies. Paragraphs 2 and 3 apply mutatis mutandis.

(8) The health insurance funds or their associations may conclude agreements with the authorities responsible for the respective therapeutic area for the interests of the providers of medicines at provincial level to further develop the quality and structure of the care of the insured with remedies, as far as the contracts according to paragraph 1 do not conflict.

(9) The contracting parties pursuant to subsection (1) sentence 1 conclude a contract for a central and nationwide examination and listing of training providers, further training centers and subject teachers with regard to the fulfillment of the requirements for the implementation of special measures of physiotherapy, taking into account the guidelines pursuant to § 92 paragraph 1 sentence 2 number 6.

§ 302 SGB V Billing of other service providers

(1) The service providers in the field of remedies and aids and the other service providers are obliged to the health insurance companies by means of electronic data transfer or machine usable on data carriers, the services they provide by type, quantity and price to denote and the day of service provision and the Physician number of the prescribing physician to indicate the prescription of the doctor with the diagnosis and the required information on the finding and the information referred to in § 291 (2) (1) to (10); When invoicing for the supply of aids, the designations of the list of aids according to § 139 are to be used and the amount of the additional costs charged to the insured according to § 33 (1) sentence 6 must be stated. For the settlement of services of home nursing according to § 37, the time of performance must be stated in addition to the information according to sentence 1.

(2) The details of the form and content of the settlement procedure shall be determined by the Spitzenverband Bund der Krankenkassen in guidelines to be observed in the service or supply contracts. The service providers referred to in paragraph 1 may use data centers to fulfill their obligations. The data centers may process and use the data for purposes specified in the Social Code and only in a manner designed for this purpose, insofar as they have been commissioned by an authorized body; Anonymised data may also be processed and used for other purposes. The data centers may transmit the data according to paragraph 1 to the Kassenärztlichen associations, as far as these data are necessary for the fulfillment of their tasks according to § 73 Abs. 8, § 84 and § 305a.

[...]

(4) Insofar as the Federation of National Health Insurance Funds and the top organizations at the federal level responsible for the exercise of the interests of the service providers have made provision for the settlement of benefits deviating from the guidelines pursuant to Paragraphs 2 and 3 in framework recommendations, the framework recommendations shall prevail.

(5) For the first time until 30 June 2018 and thereafter annually, the Federation of Health Insurance Funds publishes a report, which is differentiated according to product group, on the development of additional cost arrangements for supplies of auxiliary services. In particular, without reference to the insured or institution, the report informs of the number of additional cost arrangements concluded and the average amount of the insured persons' associated payments. For this purpose, the Central Association of Health Insurance Funds determines the statistical information to be provided by its members as well as the type and scope of the transfer.

§ 303 SGB V Supplementary regulations

(1) The national associations of health insurance companies and associations of alternative health insurance funds may agree with the service providers or their associations that:

1. the scope of the billing documents to be transferred is restricted,
2. in the billing of services from individual information in whole or in part

if this does not jeopardize proper billing and the fulfillment of the statutory duties of the health insurance funds.

[...]

(3) Be the data to be transmitted to the health insurance funds pursuant to § 291 (2) Nos. 1 to 10, § 295 (1) and (2), § 300 (1), § 301 (1), §§ 301a and 302 (1) not transmitted by electronic data transmission or mechanically usable on data carriers, the health insurance companies have to retrace the data. If the non-machine-usable data transmission for reasons for which the service provider is responsible, the health insurance companies have to charge the costs associated with the subsequent registration of the affected service providers by a flat bill reduction of up to 5 per cent of the invoice amount. For the indication of the diagnoses according to § 295 Abs. 1 sentence 1 applies from the date of the entry into force of the revised tenth version of the key according to § 295 Abs. 1 Satz 3.

[...]

SGB VI⁴

According to the occupational definition, occupational therapists are responsible for ensuring and improving participation, and this is also included in SGB VI.

§ 9 SGB VI Task of the services for participation

(1) The pension insurance institutions provide services for prevention, medical rehabilitation services, work participation benefits, aftercare services and supplementary benefits

1. to prevent, counteract or overcome the effects of illness or physical, mental or emotional disability on the ability of the insured to work;
2. To prevent thereby impairments of the insured persons' ability to work or their premature departure from the working life or to reintegrate them as permanently as possible into the working life.

Benefits for participation take precedence over pension benefits that are not to be provided in the case of successful benefits for participation or are expected to be provided at a later date.

(2) The benefits under paragraph 1 shall be provided if the personal and insurance requirements for this are met.

SGB VII

In § 20 SGB V according to the German Association for Physiotherapy (ZVK) the remedy providers are included.

§ 1 SGB VII Prevention, Rehabilitation, Compensation

The job of the accident insurance is, in accordance with the provisions of this book

1. to prevent occupational accidents and diseases and work-related health hazards by all appropriate means,

⁴ (Bachmann, et al., 2017)

2. to re-establish the health and well-being of insured persons by any appropriate means and to reimburse them or their survivors with cash benefits following the occurrence of occupational accidents or diseases.

SGB IX⁵

SGB IX contains the legal requirements for the rehabilitation and participation of persons with disabilities.

§ 1 SGB IX Self-determination and participation in life in society

People with disabilities or persons at risk of disability receive benefits under this book and the benefit laws applicable to the rehabilitation agencies in order to promote their self-determination and their full, effective and equal participation in life in society, to avoid or counteract discrimination. It will take into account the particular needs of women and children with disabilities and the disabilities of women and children at risk, as well as those with mental disabilities or people at risk of such disability.

§ 3 SGB IX priority of prevention

[...]

(2) The rehabilitation agencies according to § 6 paragraph 1 numbers 1 to 4 and 6 and their associations participate in the development and implementation of the National Prevention Strategy according to the provisions of §§ 20d to 20g of the Fifth Book, especially with the objective of avoiding impairments in the participation in life in society.

[...]

§ 4 SGB IX Services for participation

(1) Participation benefits include the necessary social benefits, regardless of the cause of the disability

1. to avert, eliminate, reduce, prevent or aggravate their disability,
2. to avoid, overcome, reduce or prevent disability or long-term disability or to prevent early social benefits or to reduce current social benefits,
3. to permanently secure participation in working life according to inclinations and abilities,
4. to promote personal development holistically and to facilitate or facilitate the participation in life in society as well as the most independent and self-determined lifestyle possible.

(2) Participation Benefits shall be provided, in addition to other social benefits, for attaining the objectives referred to in paragraph 1 in accordance with this book and the special provisions applicable to the competent service providers. The service providers shall provide the services within the framework of the legislation applicable to them as completely, comprehensively and in the same quality as the situation of the individual case so that services provided by another carrier are not required as far as possible.

[...]

⁵ (Dr. h. c. Masuch , et al., 2017)

§ 9 SGB IX Priority examination of benefits for participation

(1) If a rehabilitation institution applies for or provides social benefits due to or in the event of a disability or imminent disability, the latter shall, irrespective of the decision on these benefits, assess whether participation services are likely to be successful in achieving the objectives set out in §§ 1 and 4 can. He also examines whether other rehabilitation agencies are to be involved in this task as part of their responsibility for coordinating the services. If benefits for participation according to the benefit laws are only provided on request, the rehabilitation providers act in accordance with § 12 on an application.

(2) Participation benefits take precedence over pension benefits that would not be available for successful participation services or would probably only be available at a later date. This applies accordingly during the receipt of a pension.

(3) Paragraph 1 shall also apply in order to avoid, overcome, mitigate or exacerbate the need for long-term care benefits. The tasks of the long-term care funds as carriers of social long-term care insurance in securing the primacy of rehabilitation before care according to §§ 18a and 31 of the Eleventh Book remain unaffected.

(4) Paragraph 1 shall also apply to the Job Centers within the scope of their responsibilities for professional participation according to § 6 (3), with the proviso that they recognize possible rehabilitation needs and should work towards applying for the presumably responsible rehabilitation institution.

§ 13 SGB IX Instruments for determining rehabilitation needs

[...]

(2) The instruments referred to in the first sentence of paragraph 1 ensure an individual and function-related assessment of needs and ensure the documentation and verifiability of the needs assessment, in particular by recording them,

1. whether a disability exists or threatens to occur
2. what effect the disability has on the participation of the beneficiaries,
3. which goals should be achieved with participation services,
4. which services are likely to be successful in the context of a forecast to achieve the goals.

[...]

§ 42 SGB IX Services for medical rehabilitation

[...]

(2) Medical rehabilitation services include in particular

1. Treatment by doctors, dentists and other health professionals, as far as their services are performed under medical supervision or on a medical order, including the instruction to develop their own healing powers,
2. Early detection and early intervention for children with disabilities and children at risk of disability,
3. Medicines and dressings,
4. Remedies including physical, speech and occupational therapy,
5. Psychotherapy as a medical and psychotherapeutic treatment,

6. aids,
7. Exercise testing and work therapy.

[...]

§ 46 SGB IX Early detection and early intervention

(1) The medical services for early detection and early intervention for children with disabilities and children at risk of disability under § 42 (2) (2) also include

1. the medical services of interdisciplinary services and facilities as well
2. non-medical social-pediatric, psychological, curative, psychosocial services and counseling of guardians, including in multidisciplinary services and facilities, when provided under medical responsibility and necessary to detect impending or past disability at the earliest possible stage and an individual treatment plan set up.

(2) Early detection and early intervention services for children with disabilities and children at risk of disability continue to include non-medical therapeutic, psychological, curative, special educational and psychosocial services and counseling of guardians through interdisciplinary early intervention centers or institutions approved under state law with comparable interdisciplinary funding and treatment and consulting spectrum. The benefits are necessary if they help to detect impending or already occurring disability at the earliest possible date or to offset or mitigate the disability that has occurred through targeted support and treatment measures.

[...]

(4) The following framework conditions are laid down in the Land Master Agreements between the participating rehabilitation providers and the associations of the service providers:

1. the requirements for interdisciplinary early intervention centers, institutions approved under state law with a comparable interdisciplinary range of funding, treatment and counseling and social pediatric centers for minimum standards, occupational groups, staffing, material and spatial equipment,
2. the documentation and quality assurance,
3. the place of performance,
4. the agreement and settlement of the fees for the services rendered as a complex service in accordance with paragraph 3, taking into account the contributions of third parties, in particular the Länder, for services under the Early Childhood Recognition and Early Childhood Intervention Scheme.

[...]

§ 49 SGB IX Benefits for participation in working life, prescription authorization

(1) Participation in working life shall provide the necessary services to maintain, improve, produce or restore the capacity of persons with disabilities or those threatened with disabilities to function as effectively as possible, and to safeguard their participation in working life as long as possible.

(2) Women with disabilities are guaranteed equal opportunities in employment, in particular by providing occupational, community-based and part-time employment.

(3) Benefits for participation in working life include in particular

1. Assistance to maintain or obtain employment, including activation and professional integration benefits,
2. vocational preparation including basic education required for the disability,
3. the individual company qualification in the context of supported employment,
4. professional adaptation and further education, including as far as the benefits include a school-leaving certificate required for participation,
5. Vocational training, also in so far as the services are provided in a non-predominant section of school,
6. the promotion of self-employment by the rehabilitation agencies in accordance with § 6 (1) (2) to (5),
7. other assistance to promote participation in working life to enable and provide persons with disabilities with appropriate and appropriate employment or self-employment.

[...]

(6) Benefits also include medical, psychological and educational assistance, to the extent that those benefits are necessary on a case-by-case basis in order to achieve or safeguard the objectives referred to in paragraph 1 and to prevent, overcome, mitigate or prevent their worsening effects. Benefits are in particular

1. Assistance in Disease and Disability Processing,
2. Aids for activating self-help potentials,
3. informing and advising partners and relatives, as well as superiors and colleagues, if the beneficiaries agree
4. the mediation of contacts to local self-help and counseling possibilities,
5. Aids for mental stabilization and promotion of social competence, inter alia by training social and communication skills and dealing with crisis situations,
6. the training of practical life skills,
7. the training of motor skills,
8. the guidance and motivation to use services for participation in working life,
9. the participation of integration specialist services within the scope of their task (§ 193).

(7) The services also include the acquisition

1. the costs of accommodation and food required, if the execution of a service requires accommodation outside the home or parental household because of the nature or severity of the disability or to ensure the success of participation in working life,
2. the necessary costs directly related to the performance of a service, in particular for course costs, examination fees, learning aids, activation and professional integration services.

(Services according to paragraph 3 numbers 1 and 7 also include

1. the motor vehicle assistance according to the motor vehicle regulation,
2. the compensation for unavoidable loss of earnings of the person entitled to benefits or of a necessary escort for journeys to and from an educational activity and for presentation to an employer, to a provider or body for persons with disabilities, by the rehabilitation institution pursuant to § 6 (1) (2) to (i) 5,
3. the cost of a necessary work assistance for severely disabled people as an aid to obtaining a job,

4. the cost of aids required by the nature or severity of the disability
 - a. to practice the profession,
 - b. to participate in a work-sharing benefit or to increase safety on the way to and from the workplace and at the workplace itself, unless there is an obligation on the part of the employer or such benefits can be provided as a medical benefit,
5. the cost of technical work aids required to practice the profession because of the nature or severity of the disability,
6. the costs of obtaining, equipping and maintaining a disability-friendly dwelling to an appropriate extent.

The performance according to sentence 1 number 3 is granted for a period of up to three years and, in coordination with the rehabilitation institution, in accordance with § 6 (1) points 1 to 5 by the Integration Office in accordance with § 185 (4). The rehabilitation agency reimburses the integration office for its expenses. The claim under § 185 (4) remains unaffected.

(9) The Federal Government may, by means of an ordinance with the consent of the Bundesrat, clarify the requirements, subject matter and scope of the services of motor vehicle aid for participation in working life.

§ 56 SGB IX Services in workshops for disabled people

Services in recognized workshops for disabled people (§ 219) are provided to maintain, develop, improve or restore the ability or ability to work of persons with disabilities, to further develop their personalities and to facilitate or secure their employment.

§ 76 SGB IX Benefits for Social Participation

(1) Social participation benefits are provided to facilitate or facilitate equal participation in life in the Community, unless provided for in Chapters 9 to 12. This includes enabling beneficiaries to lead a self-determined and self-responsible lifestyle in their own living space and in their social space or to support them in this. Decisive are the investigations and findings according to chapters 3 and 4.

(2) Benefits for social participation are in particular

1. Services for housing,
2. Assistance services,
3. curative educational services,
4. Care services in a foster family,
5. Achievement and acquisition of practical knowledge and skills,
6. Services to promote understanding,
7. Services for mobility and
8. Aids.

§ 84 SGB IX aid

(1) Benefits shall include resources necessary to remedy a restriction of equal participation in the life of the Community resulting from the disability. These include, in particular, barrier-free computers.

(2) The services also include a necessary instruction in the use of the aids and their necessary maintenance or modification.

[...]

§ 219 SGB IX Concept and tasks of the workshop for disabled people

(1) The workshop for disabled people is a facility for the participation of disabled people in working life within the meaning of Chapter 10 of Part 1 and for integration into working life. It does not, or can not, get back into the general labor market for those disabled people who are not, because of the nature or severity of the disability, not yet or not yet able to get back into employment,

1. to offer adequate vocational training and employment at a pay commensurate with the performance of the work; and
2. to maintain, to develop, to increase or to regain their ability to work or to improve their personality.

It promotes the transition of suitable persons to the general labor market by appropriate measures. It has the widest possible range of VET and job opportunities, as well as qualified staff and an accompanying service. Vocational training and job opportunities include outsourced places in the general labor market. The outsourced jobs are offered for the purpose of transition and as permanently outsourced places.

[...]

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Von physio.de: <https://www.physio.de/zulassung/index.php> abgerufen

II. Intellectual Output O1 Bulgaria "Database Social Security System"

II.1 Social security system in Bulgaria

Introduktion

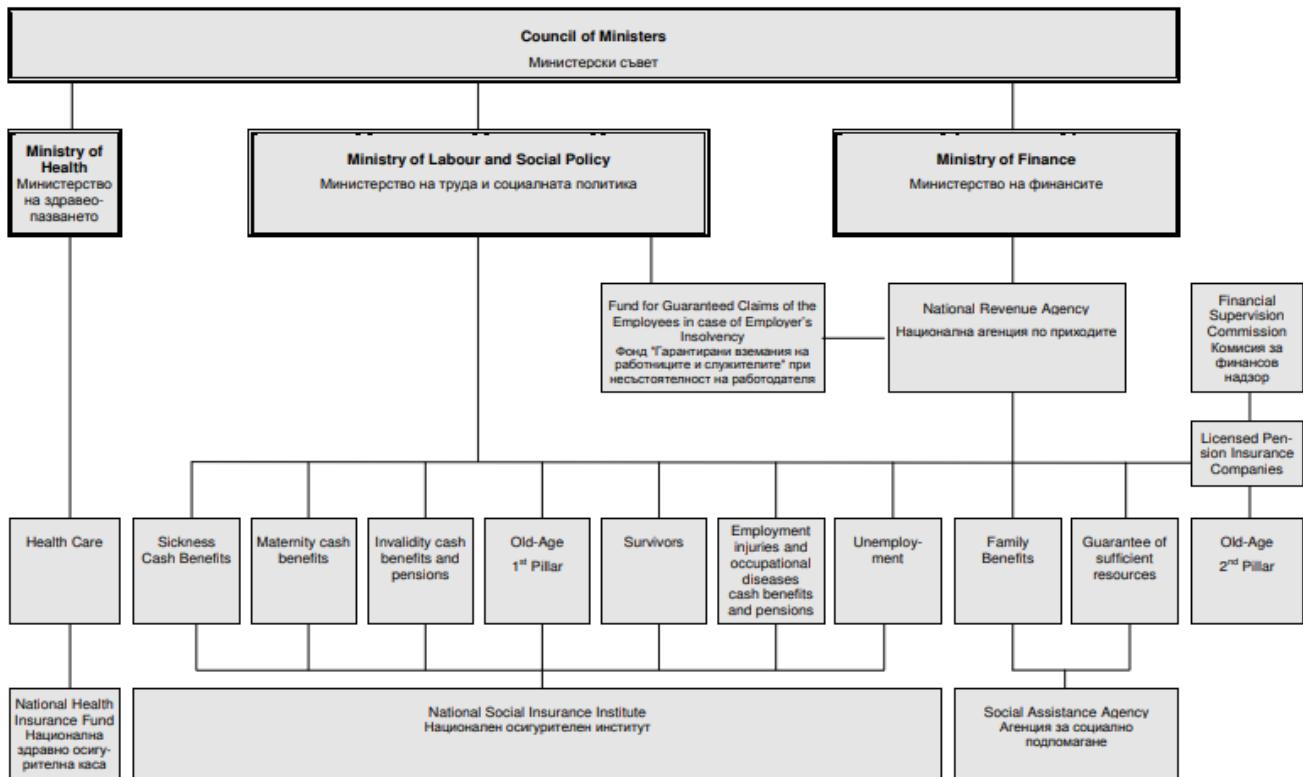
The social security system in Bulgaria covers the nine standard risks as in ILO Convention 102. The institutions and the activities of social security are subject to statutory supervision, which is implemented by the three branches of the Central Government: the Parliament, the Cabinet of Ministers and the Judiciary in cooperation with the representative organisations of workers and employers and other organisations of the public society, e.g. organisations for protection of patients. The **National Revenue Agency** established in 2005, is responsible for the establishment and control of both taxes and social insurance obligations and their collection. The National Social Insurance Institute, established in 1995 organises the membership of the public insurance schemes for cash benefits. The **National Health Insurance Fund** has operated since 1999 and began contracting health services with providers on July 1, 2000. The **Employment Agency** (established in 1990) implements proactive measures for the employment of job seekers regardless of their insurance affiliation. The Social Assistance Agency manages activities, related to the provision of sufficient funds, social care and family benefits. In 2005 the **Agency for people with disabilities** was created that implements different activities in the field of integration of people with disabilities.

MISSOC – www.missoc.org

Organisation of social protection

Bulgaria

1/1/2013



II.1.1 Historical overview of the social security system in Bulgaria

The social security system in Bulgaria has a long history that goes through different periods of development and maturity, overcomes crises and changes considerably its organization and content.

The beginning of the pension insurance lies back more than a century ago, in the time of the Third Bulgarian Kingdom when in 1886 the first pension insurance law (concerning military disabled persons) was created. The beginnings of the pension insurance lie more than a century ago, in the time of the Third Bulgarian Kingdom - in 1886, with the creation of the first pension insurance law concerning military disabled persons.

With the "Law for Public Insurance" as of year 1924, Bulgaria was the first country on the Balkan peninsula to have created an overall social insurance system, covering all categories of hired laborers and all kinds of public insurances: accident-at-work and professional disease; illness and motherhood; disability, old age and death.

In 1941 the National Assembly passed the "Law on the Public Insurance Institute". By the adoption of this Law, the social insurance benefits and allowances in Bulgaria received their own independent and autonomous governing body. The Public Insurance Institute was a government-autonomous institution with a Head office and regional offices.

With the "Labor Code" (1951), the budget of the social security was included in the State Budget, so that the State assumed the obligation to cover the eventual shortage of incomes from the insurance payments and to pay benefits and pensions. According to the Code, the functions on the social insurance of the workers and employers were transferred to the Central Council of the Labor Unions, which had the right to represent them on all the questions referring to labor and social insurance.

Next step in the development of the social security administration was in 1984 when by an Ordinance of the Council of Ministers to the Committee of Labor and Social Affairs the Head office "Social Security" was created. It was a governmental-public body, a legal entity, carrying out a unified policy of short-term social insurance and pension affairs. The Head, who was a vice-president of the Committee of Labor and Social Affairs with the rank of Deputy-Minister, managed it. The regional directorates "Pension Insurance" at the Ministry of Finance and the departments "State Public Insurance" at the regional councils of the Bulgarian Professional Unions became regional bodies of the Head office of "Social Security". Thus, the regional social security offices, which function till now were created.

The next stage of the social security administration development in Bulgaria began after the democratic changes. This stage had begun in 1995 with the adoption of the "Fund Social Security" Law. For the management of the fund the National Social Security Institute was created as a successor of the Head office "Social security".

In 1999 the Law for "Additional Voluntary Pension Insurance" was adopted, regulating the third pillar of the pension system which legalizes the activities of the private pension funds. The "Code for the Obligatory Pension Insurance" as of 2000 (now Social Insurance Code (SIC)) settles the pension insurance in the first and second pillars and the following social risks: disease, disability, old age, death and as of 2002 – unemployment was added.

Although legislatively and institutionally the social security system is already reformed, the process of its improvement and adaptation continues simultaneously with the needs of flexibility and the international development.

II.1.2 Principles, scope and parameters of the social security system

The right of social security is one of the fundamental rights of the citizens of the Republic of Bulgaria, stipulated in article 51, paragraph 1 of the Constitution of the Republic of Bulgaria.

The state social security provides cash benefits, allowances and pensions for: temporary incapacity for work;

- temporarily reduced capacity for work (job readjustment);
- maternity;
- unemployment;
- disability;
- old age
- and death.

The scope of the social protection in Bulgaria includes the classic social security based on social security contributions. The social security schemes are financed through the budgets of the social security funds. Health insurance and healthcare are financed by the budget of the National Health Insurance Fund and the state budget as well. In 2000, a pension reform was conducted in Bulgaria, as a result of which the three-pillar pension insurance system was introduced. The selected model combines the pay-as-you-go (solidary) and the capital principles of social security, i.e. the social function of the state and the individual contribution of the insured people.

In order to improve the pension scheme and develop the pension system, key changes were introduced in 2015 which are related to people's right to freely choose to participate or not in the second pillar of the pension system as follows:

- The people born after 31st December 1959 have the opportunity to choose whether to be insured for an additional pension in a universal pension fund or only for a lifelong pension in the state social security. It has been stipulated that this choice will not be single but it can be made no later than five years prior to the required age of acquiring the right to retire for insurance periods and old age under article 68, paragraph 1 of the Social Insurance Code even if they have not been granted a pension for insurance and old age.
- The people working in the conditions of first and second categories of labour can change their insurance from a professional pension fund to the state social security only once. This right can be exercised if the people are not granted a pension for insurance periods and old age or a professional pension for early retirement. The advantage of the existing three pillar model is that each pillar is relatively independent – it depends on factors which are not related to one another and this contributes to the long-term stability of the system. Social security payments administered by the NSSI The National Social Security Institute, in its capacity as the major executive authority of the social security legislation, establishes the right to and pays social benefits and allowances under the Social Insurance Code.

The pensions granted and paid by the local offices of the NSSI are divided into two main groups:

- 1) The contributory earnings-related pensions are: for insurance periods and old age, for invalidity due to a general disease and for invalidity due to a work-related accident or an occupational disease. They can be personal and survivors' pensions. The basic condition for each of them is for the person to have been insured for the respective risk;
- 2) The non-contributory pensions are: social old-age and invalidity pensions, civil and military invalidity pensions and personal pensions. They do not depend on the individual's contributions and do not become inherited pensions, with the exception of the military disability pensions. They are funded by the state budget.

The insurance rights of the people are financially secured through the accumulated contributions in case of:

- 1) Temporary incapacity for work due to a general disease, a work-related accident and an occupational disease, for rehabilitation and in case of a medical examination or testing, quarantine, removal from work based on a prescription of the health bodies, taking care of a sick family member or a family member under quarantine, accompanying of a sick family member for a medical examination, testing or treatment as well as for raising a healthy child who has been returned by a child-care establishment because of a quarantine at the establishment or quarantine of the child;
- 2) Pregnancy and childbirth, raising a child up to 2 years of age and adopting a child up to 5 years of age;
- 3) Job readjustment in case of temporarily reduced capacity for work due to a general disease, a work-related accident and an occupational disease, pregnancy or breastfeeding or an advanced stage of an in-vitro treatment;
- 4) Unemployment In 2017, the local offices of the NSSI received a total of 3 297 692 primary documents for paying benefits for temporary incapacity for work, pregnancy and birth and also for job readjustment. The number of the registered applications for unemployment benefits is 167 286. The people insured in the state social security funds (in case the required conditions are met) are paid benefits for prophylaxis and rehabilitation, a single benefit in case of death of the insured person and disability due to a general disease when there are no grounds for granting a pension. Factors like the ageing of the population, morbidity and traumatism require the active involvement of the state social security for the purpose of preventing the risk within the social security system. The benefits provided under the programme for prophylaxis and rehabilitation of the NSSI also include funds for the accommodation, up to 4 basic diagnostic and therapeutic procedures per day and partially cover the food. The insured people who need rehabilitation can take part in this programme once during the calendar year for a period of 10 days.

The National Social Security Institute is the single owner of the capital of the trading partnership "Prophylaxis, rehabilitation and recreation" EAD which, through its own 19 SPA hotels located in almost all national resorts, is the main executor of the programme for prophylaxis and rehabilitation of the insured people. In 2017, the local offices of the NSSI paid benefits for prophylaxis and rehabilitation amounting to 17 911,7 thousand BGN for 43 214 people.

II.1.3 The National Social Security Institute – The Institution managing the State Social Security in the Republic of Bulgaria

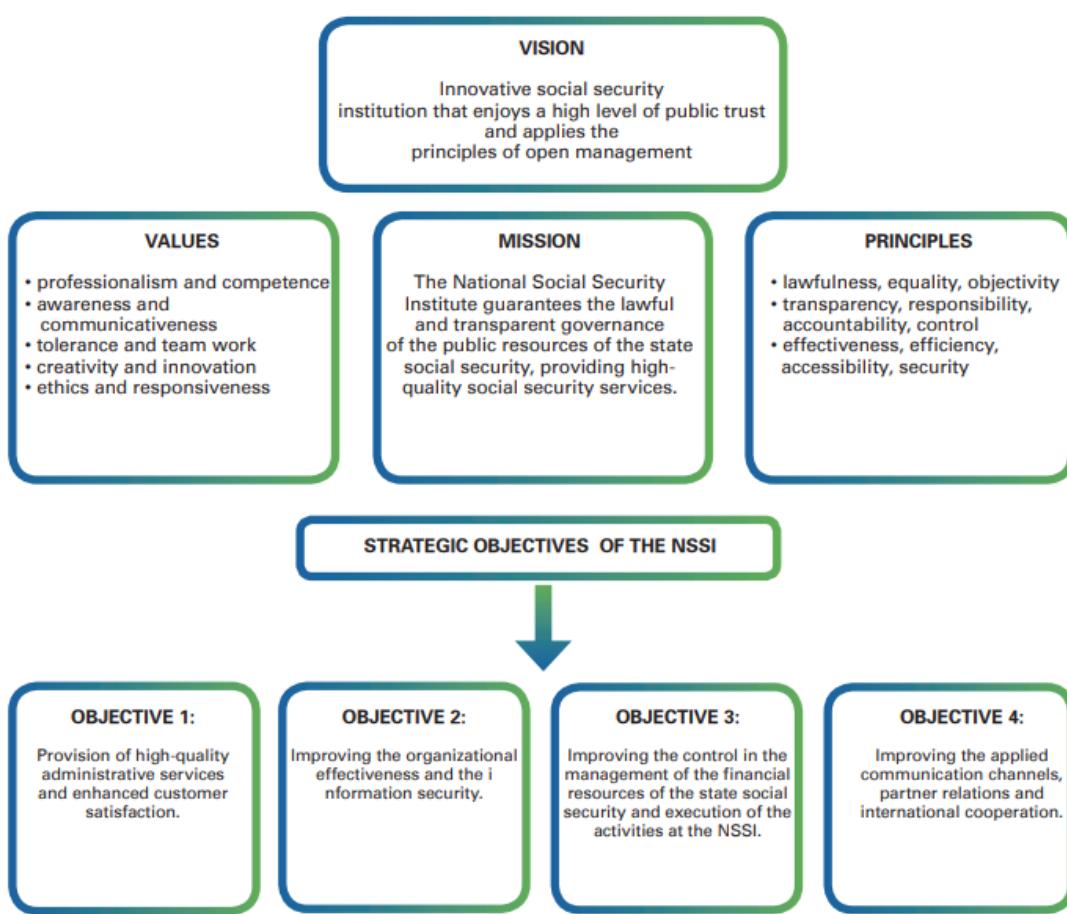
The foundations of the social security administration in Bulgaria were laid in 1941 with the establishment of the Social Security Institute, which is an autonomous institution with central management and local authorities governed by a Managing Board. The National Social Security Institute (NSSI) was founded as a successor of the Social Insurance Head Office. It has developed new functional directions and activities both on a central level and within its territorial structures. The first separate budget of the state social security was adopted with the Social Security Fund Budget Act for the year 1997. Today, the NSSI pays the pensions and the pension bonuses to about 2,2 million pensioners per year, assesses the rights and pays benefits and allowances to about 1,1 million beneficiaries a year and manages a budget of over 11 billion levs. Over 300.000 applications are submitted annually to the local offices of the NSSI regarding the assessment of the pension rights and more than 3 million basic documents are accepted for paying benefits and allowances from the state social insurance budget. The number of the paid benefits and allowances exceeds 4,5 million. The NSSI practically services the entire population of the country.

NSSI STATUS AND GOVERNING BODIES

The national social security institute is a specialized public body which, in accordance with the Social Insurance Code (SIC) manages the state social security in the Republic of Bulgaria and guarantees the right of pensions and benefits of the citizens. The state policy of the state social security is developed, coordinated and implemented by the Minister of Labour and Social Policy. The national social security institute is an autonomous organization with its own budget, which reports its activity to the National Assembly of the Republic of Bulgaria. The governing bodies of the institute are the Supervisory Board, the Governor and the Deputy Governor.

MISSION, VISION AND STRATEGIC OBJECTIVES OF THE NATIONAL SOCIAL SECURITY INSTITUTE (2018-2021)

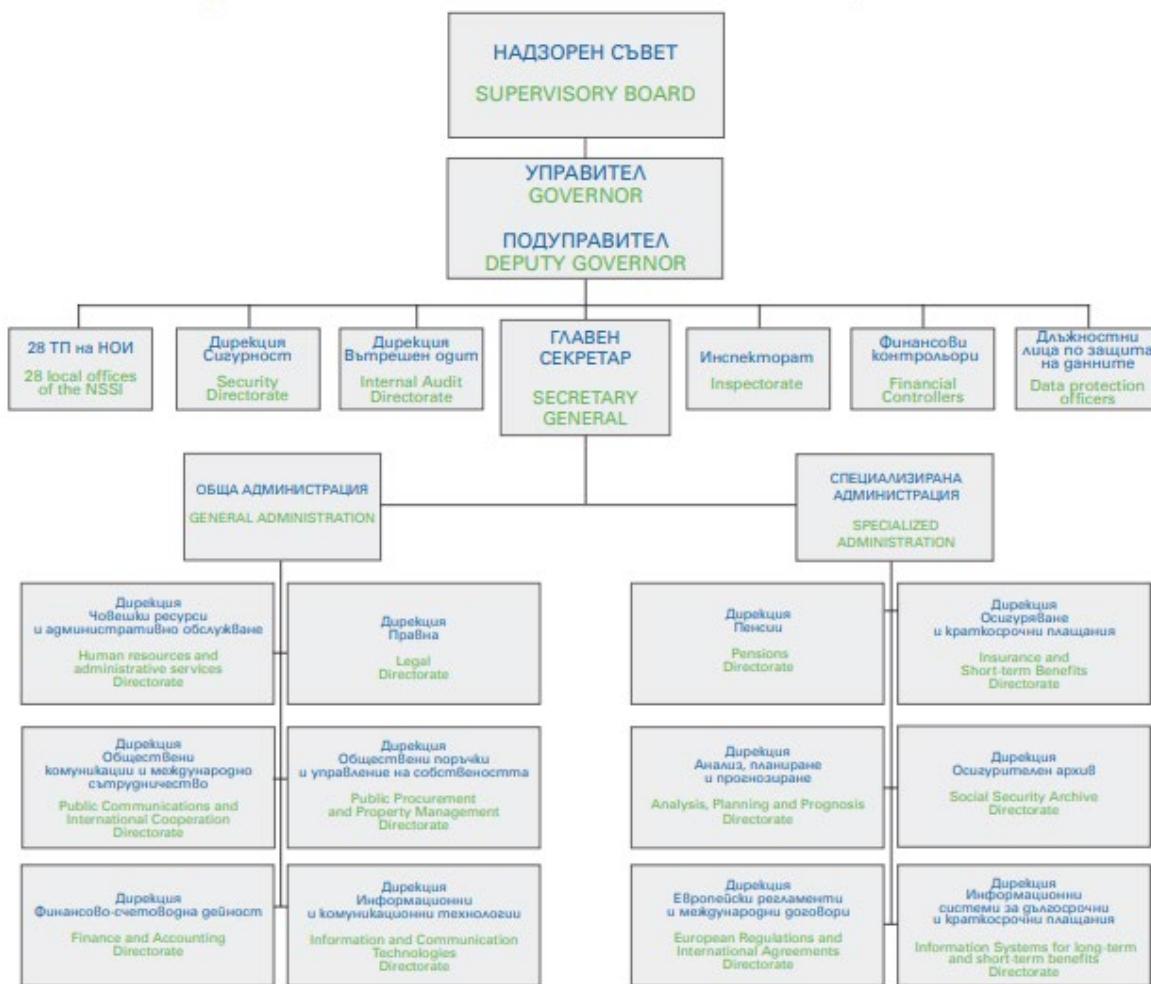
The strategy of the National Social Security Institute for the period 2018-2021 determines the common trends in the development of its activity and reflects the strategic objectives and intentions of the institute.



STRUCTURE, FUNCTIONS AND STAFF OF THE NSSI

The National Social Security Institute governs the state social security in the Republic of Bulgaria and administers the compulsory social security in case of general diseases and maternity, unemployment, work-related accidents and occupational diseases, disability, old age and death. The NSSI is the competent Bulgarian institution and liaison office for applying the provisions of the European regulations for coordination of the social security systems and the bilateral international agreements in the sphere of social security and social protection signed by the Republic of Bulgaria.

Организационна схема на Националния осигурителен институт¹
Organizational scheme of the National Social Security Institute¹



¹ В сила от 01.08.2018 г.

¹ In force since 01.08.2018

The National Social Security Institute is the Bulgarian competent institution and liaison body concerning the application of the Regulation (EC) № 883/2004 on the coordination of social security systems; Regulation (EC) № 987/2009 laying down the procedure for implementing Regulation (EC) № 883/2004 on the coordination of social security systems and the Bulgarian international agreements in the field of social security concerning:

- Sickness, maternity (paternity) cash benefits and death grants;
- Unemployment cash benefits;
- Old-age, Invalidity and Survivors' pensions.

II.2 Relevant legal regulations for occupational therapy in Bulgaria

II.2.1 Invalidity benefits

Invalidity pension

Insured persons are entitled to an invalidity pension when they have wholly or partially lost their working capacity for a long period of time or permanently. Insured persons acquire the entitlement to an invalidity pension according to the following contribution requirements:

- up to 20 years of age: no period of insurance is required;
- up to 25 years of age: one year of insurance is required;
- up to 30 years of age: 3 years of insurance is required;
- over 30 years of age: 5 years of insurance is required;

Those who are disabled at birth or who become disabled before starting work will acquire the entitlement to an invalidity pension after a one year period of insurance. An invalidity pension is granted to persons with permanently reduced working capacity of 50% or more. Entitlement to the pension arises from the date the invalidity occurred. Insured persons are entitled to an invalidity allowance due to general sickness, when they have not acquired the necessary period of insurance for the granting of an invalidity pension.

The amount of the general sickness invalidity pension is determined by multiplying the income on the basis of which the pension is calculated by the total sum of 1.1% for each year of the period of insurance. In addition, the time counting as a period of insurance is multiplied by a coefficient which depends on the degree of invalidity as follows:

- degree of invalidity over 90%: 0.9;
- degree of invalidity between 71% and 90%: 0.7;
- degree of invalidity between 50% and 70.99%: 0.5.

Pensioners who have lost over 90% of their working capacity and who are constantly in need of external assistance, receive a pension supplement of 75% on the social old-age pension. The supplements are added to every pension regardless of the type. Supplements are paid to the retired person and not to the person providing the assistance.

Social Invalidity Pension

The right to a social pension for disability is granted to persons who have reached 16 years of age and have a permanently reduced capacity to work/type and degree of inability of more than 71%.

The amount of the social pension for disability for persons with a permanently reduced ability to work/type and degree of inability over 90% is 120%. Persons with a permanently reduced ability to work of between 71 to 90% receive 110% of the social pension for old age. The social pension for old age in the moment is BGN 110 (since 1 April 2013).

Invalidity allowance

The amount of the allowance for invalidity due to general sickness, when the insured person does not have the necessary periods of insurance to be granted an invalidity pension due to general sickness, is calculated by multiplying the daily amount of the allowance for temporary invalidity by 60.

Similarly to the invalidity pension, an external assistance supplement is granted for the duration of the incapacity, as assessed by the Territorial Expert Medical Board (TEMB) or by the National Expert Medical Board (NEMB), if the person has not reached retirement age in that year. When, within the period specified in the expert decision, the person reaches retirement age, the external assistance supplement is paid for life. The payment of the external assistance supplement ends when the grounds for the entitlement no longer exist, e.g. death of the pensioner, change of the invalidity group, etc.

How are invalidity benefits accessed?

Invalidity pension

The invalidity pension is granted upon an application to the NSII. The application shall be accompanied by an expert decision by the TEMB (NEMB), determining the degree of incapacity.

Invalidity allowance

When the insured person does not have the required periods of insurance for the granting of a general-sickness invalidity pension, the invalidity allowance shall be granted on the grounds of an application to the territorial unit of the National Social Insurance Institute (NSII). The following documents should be enclosed with the application:

- documents for the contributory (employment) service up to the date of invalidity;
- documents about the gross wage or income on which insurance contributions have been paid;
- an expert decision of the Territorial Expert Medical Board TEMB or the National Expert Medical Board (NEMB).

(http://ec.europa.eu/employment_social/empl_portal/SSRinEU/Your%20social%20security%20rights%20in%20Bulgaria_en.pdf)

Amount of invalidity pensions

The average amount of invalidity pensions varies by the cause of disablement: general sickness or employment injury and occupational disease. The average amount of employment-injury and

occupational-disease pensions is substantially larger, owing to the occupational nature of these risks.

According to the National Social Security Institute (NSSI), annual expenditure on disability pensions financed by the National Social Security (NSS) have risen from BGN 182.2 million in 2000 to BGN 1 142.7 million in 2010. Overall disability pension expenditures financed by Social Security and the state budget represent 20.3 percent of total pension expenditures in 2010.

(About more information: <http://ime.bg/en/articles/people-with-disabilities-in-bulgaria-a-new->

Amount of money provided for wheelchairs

The money for wheelchairs in Bulgaria is provided by the Social Assistance Directorate. The amount is as follows:

- A wheelchair for adults – 1 per every 6 years – BGN 486;
- A wheelchair for children under 18 years – 1 per every 3 years – BGN 486;

- A power wheelchair /or scooter/ – 1 per every 10 years – BGN 3019;
- A table for wheelchair – 1 per every 5 years – BGN 48.

The people with disabilities receive also money for the purchase of **additional medical devices**:

- A combined toilet seat and bath chair – for adults – 1 per every 6 years – BGN 331;
- A combined toilet seat and bath chair – for children under 18 years – 1 per every 3 years – BGN 331;
- A bath chair – 1 piece every 6 years /for children 3 years/ – BGN 126;
- A toilet chair – 1 piece every 6 years /for children 3 years/ – BGN 205;
- An anti-decubitus mattress – 1 per every 3 years – BGN 372;
- An anti-decubitus cushion – 1 per every 3 years – BGN 65;
- A walker – 1 per every 3 years – BGN 72;
- Armpit crutches – 2 per every 3 years – BGN 22;
- Canadian /elbow/ crutches – 2 per every 3 years – BGN 28;
- A cane – 1 per every 3 years – from BGN 11 to BGN 48 (depends from the kind of the cane).

Other financial benefits for persons with disabilities:

- Allowance for balneological treatment – BGN 195 once per year, but not more than the cost actually made according to the submitted documents;
- Monthly allowance for transportation – BGN 9.75
- Allowance is paid monthly. Required documents to be submitted in the "Social Assistance" in address - Application-declaration, ID and TEMP;
- Allowance for 2 trips per year (two-way trips) to the Railways;
- Monthly allowance for phone – BGN 13;
- Monthly allowance for medications – BGN 9.75;
- A free vignette (only if the car is at the name of the disabled person);
- Target assistance for reconstruction of the housing – BGN 600. Especially for wheelchair users, but only if the average monthly income per family member for the last 12 months is equal to or lower than BGN 130.

For all social benefits, please see the Appendix: "Your social security rights in Bulgaria" 2018

OT is included in the choice and recommendation of assistive devices, but not officially.

Social services are activities that support and broaden the ability of individuals to lead independent living and are provided in specialized institutions and in the community. Social services are based on social work and are aimed at supporting individuals to carry out their day-to-day activities and achieve social inclusion. They are provided according to the desire and personal choice of the persons who need them. Social services can be provided short-term (up to 3 months) and/or long-term (over 3 months). Social services are provided in the community and in specialized institutions. Social services in the community are services provided in a family environment or close to the family environment. Social services in the resident-type community are services that provide the opportunity to live in an environment close to the family.

Specialized institutions are boarding-house homes where people are separated from their home environment. Social services in specialized institutions are provided after the availability of services in the community has been exhausted.

The place of the occupational therapist in the social services is defined in a paper "Methodology for determining the number of staff in the social services". Even that in some of the services it is defined that there obligatory OT must be present, it is in one line with the physiotherapist. So the employers could hire OT or PT for that position.

II.2.2 Home-based social services

Home-based social services support the social inclusion of persons / children with disabilities, elderly people living alone and other vulnerable groups. Home-based social services are: personal assistant; social assistant; home assistant; home care. These services provide care to meet the everyday needs at home. Depending on the specifics, they are aimed at: social work and counselling, assistance for the organization of leisure time and making contacts; hygiene, shopping, cooking, laundry and other public utility activities; delivery of food, assistance for obtaining the necessary aids, devices and equipment for people with disabilities and medical devices; utilities and others. The services are provided under the National Programme "Assistants for People with Disabilities" and EU-funded projects.

II.2.3 Community-based Social Services

Community-based social services are central to effective social inclusion, fighting poverty and participation in society of all vulnerable groups. In recent years, policy in the sphere of social services is aimed at developing community-based and home-based services to replace the institutional care model. Community-based social services include:

- Community-based social services – day care centre (day care centre for children and/or elderly people with disabilities; day centre for elderly people with disabilities – weekly care; day centre for children with disabilities – weekly care; day care centre for old people); centre for social rehabilitation and integration; social educational and professional centre; "Mother and Baby" Unit; centre for social support; centre for work with street children; foster care; public canteens.
- Community-based social services of residential type – family-type accommodation centre (family-type accommodation centre for children / young people without disabilities; family-type accommodation centre for children / young people; family-type accommodation centre for elderly people with mental disorders or dementias; family-type accommodation centre for elderly people with physical disabilities; family-type accommodation centre for elderly people with mental retardation; family-type accommodation centre for old people); temporary accommodation centre; crisis centre; transitional home; sheltered home (sheltered home for people with mental disorders; sheltered home for people with mental retardation; sheltered home for people with physical disabilities); supervised home; shelter.

II.2.4 Social Services in Specialised Institutions

The specialized institutions provide a set of social services for persons / children with disabilities, elderly people and children deprived of parental care. An important feature of these institutions is the fact that this is a form of care in which users are permanently separated from their domestic / family environment. Social services in the specialized institutions shall be provided after the opportunities to use community-based services are exhausted. Specialized institutions include:

- Specialised institutions for children – homes for children deprived of parental care; homes for children with physical disabilities; homes for children with mental retardation. Specialised institutions are also the homes for medical and social care for children managed by the Ministry of Health which provide care for children aged 0-3;
- Specialised institutions for adults – homes for elderly people with mental retardation; homes for elderly people with mental disorders; homes for elderly people with physical disabilities; homes for elderly people with sensory disorders; homes for old people.

Role of occupational therapists in the social services (According to Methodology for defining the staff members in the social services)

Service name	OT is obligatory staff member	OT is recommended staff member	OT is not included
Services for children and youths			
Daily center for children with disabilities/intellectual disabilities,	X		
Daily center for street children		X	
Family type homes			X
Mother and baby service			X
Protected homes, Crisis centers			X
Home for children with intellectual disabilities	X		
Centers for social rehabilitation and integration	X		
Services for adults and elderly			
Daily centers for elderly			X
Center for community support		X	
Services at home for personal assistance			X
Homes for adults with physical disabilities, intellectual disabilities, mental disorders	X		
Daily centers for adults with physical disabilities			

Health care in Bulgaria includes:

- health insurance rights;
- European health insurance card;
- healthcare which does not depend on social insurance;
- Fund for Treatment of Children.

<http://www.en.nhif.bg/page/about-nhif>

The system of health insurance in Bulgaria is socially oriented and is one of the layers of social protection of the population. It is represented by The National Health Insurance Fund (NHIF). The NHIF is regulated by the Health Insurance Act (1998), which introduced the mandatory health insurance and regulates the supplementary health insurance in Bulgaria. It was founded on 15th March 1999 as an independent public institution separated from the structure of the social healthcare system and has its own bodies of management. The NHIF budget is separated from the state budget. The mandatory health insurance system is designed as a state monopoly. It has the exclusive right to grant mandatory health insurance and to guarantee the observance of the insurance rights in respect of all nationals.

II.2.5 Obligatory health insured citizens

Obligatory health insured with the National Health Insurance Fund are:

- All Bulgarian citizens who are not citizens of another state;
- Bulgarian citizens who are also citizens of another state and live permanently within the territory of the Republic of Bulgaria;
- Foreign citizens or people without citizenship who have been allowed a long-term stay in the Republic of Bulgaria, unless otherwise provided by an international agreement to which Bulgaria is a party;
- The people with granted refugee status, humanitarian status or with a granted right to refuge.

The National Health Insurance Fund guarantees the following to the health insured patients:

- Free choice of a GP who has signed a contract with RHIF;
- Accessible, timely and good-quality medical and dental care included in a basic package guaranteed by the RHIF budget;
- Solution to problems within the competency of the institution;

The National Health Insurance Fund requires from the health insured citizens:

- To pay the health insurance contributions due;
- To be responsible for their own health;
- To follow the physicians and dentists' instructions;
- To respect the professional and human dignity of physicians and dentists.

The National Health Insurance Fund works in co-operation with all institutions engaged in the process of mandatory health insurance, with the professional organisations of physicians, dentists and pharmacists, with stakeholders such as non-government organisations in the country and abroad, with a view to implementing projects of common interest in favour of the health insured citizens.

Health insurance contributions due:

For 2019, the assigned health insurance tax is 8 % from the income. Self-insured persons pay 8% from the minimal salary for the country. For the hired persons - the employees pay 3, 2 % from their salary and the employer pays 4, 8 %.

The medical rehabilitation is an important element of the policy for people with disabilities and it is a priority of the Health Systems in Europe and worldwide. The rehabilitation is at a leading position in the National Strategy for Equal Opportunities for People with Disabilities in the Republic of Bulgaria, 2008-2015, where it is emphasized that "the provision of comprehensive rehabilitation for the people with disabilities is a prerequisite for their full inclusion in the life of the society. The strategy is clearly focused on the existing problems and among them is the limited access of disabled people to medical rehabilitation.

According to Art. 15 of the Act for Integration of People with disabilities, they have the right to medical and social rehabilitation. The medical rehabilitation is a treatment activity carried out by a multidisciplinary team under the terms and procedures of the hospitals and the Health Insurance Act, and includes: supporting medication, physical therapy, speech and visual therapy, physical therapy, occupational therapy, psychotherapy, assistive devices and equipment and also medical devices for people with disabilities.

During 2012 the ombudsman of Republic of Bulgaria Konstantin Penchev carried out a research about the accessibility of the medical rehabilitation for the people with disabilities. The main target group is the group of the people with severe spinal cord injuries, most often with paraplegia and quadriplegia. According to the specialists their rehabilitation must be sustained

and supported. Most often they are handicapped, risk patients, dependent on their social environment by performing the daily activities, usually with severe concomitant pathology. This requires that they have to be rehabilitated primarily in hospital settings. Experience shows that the most effective is the medical service that combines the natural healing factors (hydrotherapy, mineral water, mud, etc.) with physiotherapy and physical therapy performed by well-trained professionals in the use of modern medical methods in specialized rehabilitation hospitals.

Under the current regulations in Bulgaria, patients with paraplegia and quadriplegia can use the following medical rehabilitation services: a clinical pathway (CP) for physical therapy and rehabilitation twice per year for seven days (CP 237 and CP 244), a programme of the National Insurance Institute for prevention, rehabilitation and comprehensive health service; a rehabilitation under the Law of Integration of People with Disabilities – in total about 30 days per year. In most cases these days can not be used consistently due to lack of places in the hospitals and the long waiting lists. In the opinion of the specialists this rehabilitation period is extremely insufficient for their recovery and to achieve sustainable and visible results. The lack of adequate rehabilitation leads to lifelong disability.

The medical rehabilitation services in Bulgaria are mainly conducted in the **Specialized Hospitals for Rehabilitation – National Complex EAD**. The hospitals start to work in 1966 as an organizational structure Sanatorium Control of the Ministry of Health. In 2000, the Sanatorium management is transformed into commercial

company in accordance with the adopted Law of the Hospitals. The Company has no analogue within the system of health care of the Republic of Bulgaria, composed of 13 specialized rehabilitation hospitals located on the territory of the whole country at recognized balneotherapy resorts.

Other opportunities for medical rehabilitation are:

- Procedures in hospitals and medical centers against payment;
- Rehabilitation centers without a contract with the National Health Insurance Fund;
- NGO's centres for rehabilitation;
- Centres for social rehabilitation and integration to the relevant municipality or NGO;
- Private practice therapists.

Unfortunately OT is not included in the health care system, because it is required medical education in order to work in hospital. Here OT is in the Public health domain. The rehabilitation is provided only in daily centers and other social services.

II.3 Bibliography

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2. <http://ime.bg/en/articles/people-with-disabilities-in-bulgaria-a-new->
3. http://ec.europa.eu/employment_social/empl_portal/SSRinEU/Your%20social%20security%20rights%20in%20Bulgaria_en.pdf
4. National statistic institute, Statistical reference book, 2018 (Appendix)
5. CODE OF SOCIAL INSURANCE (TITLE AMEND. - SG 67/03), Appendix

III. Intellectual Output O1 Poland "Database Social Security System"

III.1 Social security system in Poland

III.1.1 Provisions of the social security system

Organization of the Social Security System - Legislative Act

- Law on the Social Security System⁶
- Social Employment Law⁷
- Law on vocational and social rehabilitation and employment of persons with disabilities⁸
- Solidarity Fund Act to assist persons with disabilities⁹
- Law on family benefits¹⁰
- Apartment premiums Act¹¹
- Law on veterans and certain victims of war and post-war¹²
- repression¹³
- Law for the protection of mental health¹⁴
- Law on proceedings against debtors and maintenance advance payments¹⁵
- Law on education in sobriety and combating alcoholism¹⁶
- Law on Charitable Activities and Voluntary Work¹⁷
- Law on the fight against drug addiction¹⁸
- Law for the prevention of domestic violence¹⁹
- Social Employment Law

⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2004), nr 64, Warszawa, 2004 r. Poz. 593, USTAWA z dnia 12 marca 2004 r. o pomocy społecznej

⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2003), Nr 122 poz. 1143, USTAWA z dnia 13 czerwca 2003r. o zatrudnieniu socjalnym

⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (1997), nr 123, Warszawa, 1997 r. Poz. 776, USTAWA z dnia 27 sierpnia 1997 r. o rehabilitacji zawodowej i społecznej oraz zatrudnianiu osób niepełnosprawnych

⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 23 listopada 2018 r. Poz. 2192, USTAWA z dnia 23 października 2018 r. o Solidarnościowym Funduszu Wsparcia Osób Niepełnosprawnych

¹⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2003), nr 228, Warszawa, 2003 r. Poz. 2255 Ustawa z dnia 28 listopada 2003 r. o świadczeniach rodzinnych

¹¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (1991), nr 17, Warszawa, 1991 r. Poz. 75 Ustawa z dnia 24 stycznia 1991 r. o kombatantach oraz niektórych osobach będących ofiarami represji wojennych i okresu powojennego

¹² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2001), nr 71, Warszawa, 2001 r. Poz. 734 Ustawa z dnia z dnia 21 czerwca 2001 r. o dodatkach mieszkaniowych

¹³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2000), nr 106, Warszawa, 2000 r. Poz. 1118 Ustawa z dnia 9 listopada 2000 r. o repatriacji

¹⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 19.08.1994, Nr 111, Poz. 535, USTAWA z 19 sierpnia 1994 r. o ochronie zdrowia psychicznego.

¹⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 17.05.2005, Nr 86, Poz. 732, USTAWA z dnia 22 kwietnia 2005 r. o postępowaniu wobec dłużników alimentacyjnych oraz zaliczce alimentacyjnej.

¹⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 12.11.1982, Nr 35, Poz. 230, USTAWA z dnia 26 października 1982 r. o wychowaniu w trzeźwości i przeciwdziałaniu alkoholizmowi.

¹⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 29.05.2003, Nr 96, Poz. 873, USTAWA z dnia 24 kwietnia 2003 r. o działalności pożytku publicznego i o wolontariacie.

¹⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 19.09.2005, Nr 179, Poz. 1485, USTAWA z dnia 29 lipca 2005 r. o przeciwdziałaniu narkomanii.

¹⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 20.09.2005, Nr 180, Poz. 1493, USTAWA z dnia 29 lipca 2005 r. o przeciwdziałaniu przemocy w rodzinie.

Organization of the social security system

Law on the Social Security System²⁰

- Regulation on community-based self-help homes²¹
- Regulation on granting assistance to foreigners²²
- Regulation on the verified income criteria and the amount of social assistance cash benefits²³
- Regulation on minimum standards for night shelters, housing for the homeless, housing for the homeless with care services and heating rooms for the homeless²⁴
- Regulation on the protection of housing²⁵
- Regulation on Social Homes²⁶
- Regulation on the precise purpose, conditions and procedure for the granting of payments by the Agency for the Agricultural Market in the framework of the implementation of the Food Aid Operational Program 2014-2020²⁷
- Regulation on the supervision of social work²⁸
- Regulation to the family environmental interview²⁹
- Regulation on special conditions for the implementation of the government program to assist caregivers³⁰
- Regulation on specialization in the field of social assistance organizations³¹

²⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2004), nr 64, Warszawa, 2004 r. Poz. 593, USTAWA z dnia 12 marca 2004 r. o pomocy społecznej

²¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ nr 238, Warszawa, 2010 r. Poz. 1586, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 9 grudnia 2010 r. w sprawie środowiskowych domów samopomocy

²² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 13 kwietnia 2015 r., Poz. 515, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 7 kwietnia 2015 r. w sprawie udzielania pomocy cudzoziemcom

²³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ Warszawa, dnia 13 lipca 2018 r., Poz. 1358, ROZPORZĄDZENIE RADY MINISTRÓW z dnia 11 lipca 2018 r. w sprawie zweryfikowanych kryteriów dochodowych oraz kwot świadczeń pieniężnych z pomocy społecznej

²⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ Warszawa, dnia 14 maja 2018 r., Poz. 896, ROZPORZĄDZENIE MINISTRA RODZINY, PRACY I POLITYKI SPOŁECZNEJ z dnia 27 kwietnia 2018 r. w sprawie minimalnych standardów noclegowni, schronisk dla osób bezdomnych, schronisk dla osób bezdomnych z usługami opiekuńczymi i ogrzewalni

²⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 30 kwietnia 2018 r., Poz. 822, ROZPORZĄDZENIE MINISTRA RODZINY, PRACY I POLITYKI SPOŁECZNEJ z dnia 26 kwietnia 2018 r. w sprawie mieszkań chronionych

²⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 27 sierpnia 2012 r., Poz. 964, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 23 sierpnia 2012 r. w sprawie domów pomocy społecznej

²⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 20 grudnia 2016 r., Poz. 2087, ROZPORZĄDZENIE MINISTRA RODZINY, PRACY I POLITYKI SPOŁECZNEJ z dnia 2 grudnia 2016 r. w sprawie superwizji pracy socjalnej

²⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 6 września 2016 r., Poz. 1406, ROZPORZĄDZENIE MINISTRA RODZINY, PRACY I POLITYKI SPOŁECZNEJ z dnia 25 września 2016 r. w sprawie rodzinnego wywiadu środowiskowego

²⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 31 grudnia 2013 r., Poz. 1741, ROZPORZĄDZENIE RADY MINISTRÓW z dnia 24 grudnia 2013 r. w sprawie szczególnych warunków realizacji rządowego programu wspierania osób uprawnionych do świadczenia pielęgnacyjnego

³⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 28 września 2012 r., Poz. 1081, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 26 września 2012 r. w sprawie specjalizacji z zakresu organizacji pomocy społecznej

³¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 23 sierpnia 2012 r., Poz. 954, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 3 sierpnia 2012 r. w sprawie udzielania pomocy na usamodzielnienie, kontynuowanie nauki oraz zagospodarowanie

- Regulation on the granting of support for independence, training and administration³²
- Regulation on family support homes³³
- Regulation on specialization in the profession of a social worker³⁴
- Regulation laying down detailed conditions for the implementation of the aid scheme for agricultural families on their farms or special parts of agricultural production resulting from hurricane, heavy rain or spring frost in 2011³⁵
- Regulation on the framework program for Polish courses for foreigners³⁶
- Regulation on the social contract template³⁷
- Regulation laying down detailed rules for the application of the scheme for agricultural families in which agricultural holdings or specific parts of agricultural production were damaged in 2010 by floods, landslides or hurricanes³⁸
- Regulation laying down detailed rules for the implementation of the aid scheme for agricultural families on whose holdings or special sections of agricultural production have been damaged by floods in 2009³⁹
- Regulation laying down detailed rules for the application of the system of aid for agricultural families in which agricultural holdings or specialized departments of agricultural production were damaged in 2008 by drought or storm⁴⁰
- Regulation on specialization in the profession of social worker at universities
- Regulation on ICT systems in organizational units of social assistance⁴¹

³² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ Warszawa, dnia 26 czerwca 2012 r., Poz. 719, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 31 maja 2012 r. w sprawie rodzinnych domów pomocy

³³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 8 maja 2012 r., Poz. 486, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 17 kwietnia 2012 r. w sprawie specjalizacji w zawodzie pracownik socjalny

³⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2011), nr 167, Warszawa, 2011 r. Poz. 996 ROZPORZĄDZENIE RADY MINISTRÓW z dnia 26 lipca 2011 r. w sprawie szczególnych warunków realizacji programu pomocy dla rodzin rolniczych, w których gospodarstwach rolnych lub działach specjalnych produkcji rolnej powstały szkody spowodowane wystąpieniem w 2011 r. huraganu, deszczu nawalnego lub przymrozków wiosennych

³⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2011), nr 61, Warszawa, 2011 r., Poz. 306, ROZPORZĄDZENIE MINISTRA EDUKACJI NARODOWEJ z dnia 18 lutego 2011 r. w sprawie ramowego programu kursów nauki języka polskiego dla cudzoziemców

³⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2010), nr 218, Warszawa, 2010 r., Poz. 1439, Rozporządzenie Ministra Pracy i Polityki Społecznej z dnia 8 listopada 2010 r. w sprawie wzoru kontraktu socjalnego

³⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2010), nr 132, Warszawa, 2010 r., Poz. 889, Rozporządzenie Rady Ministrów z dnia 13 lipca 2010 r. w sprawie szczególnych warunków realizacji programu pomocy dla rodzin rolniczych, Rozporządzenie Rady Ministrów z dnia 13 lipca 2010 r. w sprawie szczególnych warunków realizacji programu pomocy dla rodzin rolniczych,

³⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2009), nr 167, Warszawa, 2009 r., Poz. 1319, ROZPORZĄDZENIE RADY MINISTRÓW z dnia 5 października 2009 r. w sprawie szczególnych warunków realizacji programu pomocy dla rodzin rolniczych, w których gospodarstwach rolnych i działach specjalnych produkcji rolnej powstały szkody spowodowane przez powódź w 2009 r.

³⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2008), nr 173, Warszawa, 2008 r., Poz. 1070, ROZPORZĄDZENIE RADY MINISTRÓW z dnia 26 września 2008 r. w sprawie szczególnych warunków realizacji programu pomocy dla rodzin rolniczych, w których gospodarstwach rolnych powstały szkody spowodowane przez suszę lub huragan w 2008 r.

⁴⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2008), nr 27, Warszawa, 2008 r., Poz. 158, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 25 stycznia 2008r., w sprawie specjalności przygotowującej do zawodu pracownika socjalnego realizowanej w szkołach wyższych

⁴¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2007), nr 216, Warszawa, 2007 r., Poz. 1609, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ ROZPORZĄDZENIE MINISTRA PRACY I

- Ordinance on the Implementation of the "Government Program to Support Polish Citizens and Their Families" evacuated by the invasion of the Republic of Poland by the Republic of Poland⁴²
- Regulation laying down the specific conditions for the implementation of the agricultural support program to reduce the consequences of drought⁴³
- Regulation on specialized care services⁴⁴
- Regulation on the social intervention threshold⁴⁵
- Regulation on the supervision and control of social assistance (welfare)⁴⁶
- Regulation on the issue and withdrawal of operating licenses within the framework of the statutory activity of the 24-hour care facility⁴⁷
- Regulation on the granting of special bonuses in the field of social assistance⁴⁸
- Regulation on Maternity Homes for Mothers with Minors and Pregnant Women⁴⁹
- Regulation of the Social Council⁵⁰
- Regulation on Implementing Provisions for the Government Program "Meals for the Needy" of 2005⁵¹

POLITYKI SPOŁECZNEJ z dnia 2 listopada 2007 r. w sprawie systemów teleinformatycznych stosowanych w jednostkach organizacyjnych pomocy społecznej

⁴² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2007), nr 141, Warszawa, 2007 r., Poz. 998, ROZPORZĄDZENIE RADY MINISTRÓW z dnia 1 sierpnia 2007 r. w sprawie realizacji „Rządowego Programu pomocy obywatelom polskim i ich rodzinom wakuowanym przez Rząd Rzeczypospolitej Polskiej z Republiką Iraku”

⁴³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2006), nr 155, Warszawa, 2006 r., Poz. 1109, ROZPORZĄDZENIE RADY MINISTRÓW z dnia 29 sierpnia 2006 r. w sprawie szczególnych warunków realizacji programu pomocy dla gospodarstw rolnych w celu złagodzenia skutków suszy

⁴⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2005), nr 189, Warszawa, 2005 r., Poz. 1598, ROZPORZĄDZENIE MINISTRA POLITYKI SPOŁECZNEJ z dnia 22 września 2005 r. w sprawie specjalistycznych usług opiekuńczych

⁴⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2005), nr 211, Warszawa, 2005 r., Poz. 1762, ROZPORZĄDZENIE MINISTRA POLITYKI SPOŁECZNEJ z dnia 7 października 2005 r. w sprawie progu interwencji socjalnej

⁴⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2005), nr 61, Warszawa, 2005 r., Poz. 543, ROZPORZĄDZENIE MINISTRA POLITYKI SPOŁECZNEJ z dnia 23 marca 2005 r. w sprawie nadzoru i kontroli w pomocy społecznej

⁴⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2005), nr 86, Warszawa, 2005 r., Poz. 740, ROZPORZĄDZENIE MINISTRA POLITYKI SPOŁECZNEJ z dnia 28 kwietnia 2005 r. w sprawie wydawania i cofania zezwoleń na prowadzenie w ramach działalności statutowej placówki zapewniającej całodobową opiekę

⁴⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2005), nr 74, Warszawa, 2005 r., Poz. 658, ROZPORZĄDZENIE MINISTRA POLITYKI SPOŁECZNEJ z dnia 7 kwietnia 2005 r. w sprawie przyznawania nagród specjalnych w zakresie pomocy społecznej

⁴⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2005), nr 43, Warszawa, 2005 r., Poz. 418, ROZPORZĄDZENIE MINISTRA POLITYKI SPOŁECZNEJ z dnia 8 marca 2005 r. w sprawie domów dla matek z małoletnimi dziećmi i kobiet w ciąży

⁵⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2004), nr 285, Warszawa, 2004 r., Poz. 2859, ROZPORZĄDZENIE MINISTRA POLITYKI SPOŁECZNEJ z dnia 17 grudnia 2004 r. w sprawie Rady Pomocy Społecznej

⁵¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2004), nr 236, Warszawa, 2004 r., Poz. 2363, ROZPORZĄDZENIE MINISTRA POLITYKI SPOŁECZNEJ z dnia 19 października 2004 r. w sprawie szczególnych warunków realizacji w 2005r. Rządowego Programu „Posiłek dla potrzebujących”

Social Employment Law⁵²

- Regulation on the model application form for the register of social inclusion clubs⁵³
- Regulation on the definition of a model report of the Center for Social Inclusion⁵⁴
- Regulation of the Minister for Family, Labor and Social Policy of 18 May 2016 on the Social Employment Council⁵⁵

Solidarity Fund Act to assist people with disabilities⁵⁶

- Regulation on the financial management of the Solidarity Fund to assist persons with disabilities⁵⁷

Law on family benefits⁵⁸

- Regulation on the procedures for the submission of documents relating to family, care and parental benefits and unduly paid family benefits⁵⁹
- Regulation on the method of setting the threshold for support of family income⁶⁰
- Regulation on teleinformatic systems for the performance of family benefits tasks in public administration offices⁶¹
- Regulation on the form of medical care for a pregnant woman entitled to childbirth allowance and a model certificate of care⁶²

⁵² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2003), Nr 122 poz. 1143, USTAWA z dnia 13 czerwca 2003r. o zatrudnieniu socjalnym

⁵³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ Warszawa, dnia 14 maja 2012 r., Poz. 513, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 30 kwietnia 2012 r. w sprawie wzoru formularza zgłoszenia do rejestru klubów integracji społecznej

⁵⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ Warszawa, dnia 16 stycznia 2017 r., Poz. 97, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 30 grudnia 2016 r. w sprawie określenia wzoru sprawozdania centrum integracji społecznej

⁵⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ Warszawa, dnia 31 maja 2016 r., Poz. 733, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 18 maja 2016 r. w sprawie Rady Zatrudnienia Socjalnego

⁵⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 23 listopada 2018 r. Poz. 2192, USTAWA z dnia 23 października 2018 r. o Solidarnościowym Funduszu Wsparcia Osób Niepełnosprawnych

⁵⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ Warszawa, dnia 8 kwietnia 2019 r., Poz. 646, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 28 marca 2019 r. w sprawie gospodarki finansowej Solidarnościowego Funduszu Wsparcia Osób Niepełnosprawnych

⁵⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2003), nr 228, Warszawa, 2003 r. Poz. 2255 Ustawa z dnia 28 listopada 2003 r. o świadczeniach rodzinnych

⁵⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2004), nr 89, Warszawa, 2004 r. Poz. 854 ROZPORZĄDZENIE MINISTRA GOSPODARKI, PRACY I POLITYKI SPOŁECZNEJ z dnia 20 kwietnia 2004 r. w sprawie trybu przekazywania dokumentacji dotyczącej nienależnie pobranych zasiłków rodzinnych, pielegnacyjnych i wychowawczych oraz świadczeń rodzinnych

⁶⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2005), nr 80, Warszawa, 2005 r. Poz. 700 ROZPORZĄDZENIE MINISTRA POLITYKI SPOŁECZNEJ z dnia 25 kwietnia 2005 r. w sprawie sposobu ustalania progu wsparcia dochodowego rodzin

⁶¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2007), nr 216, Warszawa, 2007 r. Poz. 1610 ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 2 listopada 2007 r. w sprawie systemów teleinformatycznych stosowanych do realizacji zadań w zakresie świadczeń rodzinnych w urzędach administracji publicznej

⁶² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2010), nr 183, Warszawa, 2010 r. Poz. 1234 ROZPORZĄDZENIE MINISTRA ZDROWIA z dnia 14 września 2010 r. w sprawie formy opieki medycznej nad kobietą w ciąży, uprawniającej do dodatku z tytułu urodzenia dziecka oraz wzoru zaświadczenie potwierdzającego pozostawanie pod tą opieką

- Regulation on the manner and procedures for granting family benefits and the scope of the information to be included in applications, certificates and declarations determining the right to family benefits⁶³
- Regulation on physical and financial reports on the performance of family benefits⁶⁴
- To regulate the amount of family income or income of a student as a basis for applying for family allowance and care allowance, the amount of family benefits and the amount of cash flows for a caregiver⁶⁵

Apartment premiums Act⁶⁶

- Regulation on housing allowance⁶⁷
- Regulation on the manner in which Community interviews are conducted, interview questionnaire forms and statements on the financial capacity of the applicant and other household members, and identity cards of an employee authorized to conduct the interview⁶⁸

Law against veterans and certain victims of war and post-war oppression⁶⁹

- Order on the payment of a one-off monetary benefit in 1994 to participants in the Silesian Uprising and the uprising in Greater Poland⁷⁰
- Ordinance on the Payment of a One-Time Payment in 1995 to Participants in the 1918-1921 War⁷¹

⁶³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 31 lipca 2017 r., Poz. 1466, ROZPORZĄDZENIE MINISTRA RODZINY, PRACY I POLITYKI SPOŁECZNEJ z dnia 27 lipca 2017 r. w sprawie sposobu i trybu postępowania w sprawach o przyznanie świadczeń rodzinnych oraz zakresu informacji, jakie mają być zawarte we wniosku, zaświadczeniach i oświadczeniach o ustalenie prawa do świadczeń rodzinnych

⁶⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 29 września 2017 r., Poz. 1811, ROZPORZĄDZENIE MINISTRA RODZINY, PRACY I POLITYKI SPOŁECZNEJ z dnia 28 września 2017 r. w sprawie sprawozdań rzeczowo-finansowych z wykonywania zadań z zakresu świadczeń rodzinnych

⁶⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 7 sierpnia 2018 r., Poz. 1497, ROZPORZĄDZENIE RADY MINISTRÓW z dnia 31 lipca 2018 r. w sprawie wysokości dochodu rodziny albo dochodu osoby uczącej się stanowiących podstawę ubiegania się o zasiłek rodzinny i specjalny zasiłek opiekuńczy, wysokości świadczeń rodzinnych oraz wysokości zasiłku dla opiekuna

⁶⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2001), nr 71, Warszawa, 2001 r. Poz. 734 Ustawa z dnia z dnia 21 czerwca 2001 r. o dodatkach mieszkaniowych

⁶⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2001), nr 156, Warszawa, 2001 r. Poz. 1817 Rozporządzenie Rady Ministrów z dnia 28 grudnia 2001 r. w sprawie dodatków mieszkaniowych

⁶⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 22 maja 2013 r., Poz. 589, ROZPORZĄDZENIE MINISTRA TRANSPORTU, BUDOWNICTWA I GOSPODARKI MORSKIEJ z dnia 26 kwietnia 2013 r. w sprawie sposobu przeprowadzania wywiadu środowiskowego, wzoru kwestionariusza wywiadu oraz oświadczenia o stanie majątkowym wnioskodawcy i innych członków gospodarstwa domowego, a także wzoru legitymacji pracownika upoważnionego do przeprowadzenia wywiadu

⁶⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (1991), nr 17, Warszawa, 1991 r. , Poz. 75, Ustawa z dnia 24 stycznia 1991 r. o kombatantach oraz niektórych osobach będących ofiarami represji wojennych i okresu powojennego

⁷⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (1994), nr 92, Warszawa, 1994 r., Poz. 431 Rozporządzenie Rady Ministrów z dnia 24 sierpnia 1994 r. w sprawie wypłaty w 1994 r. jednorazowego świadczenia pieniężnego uczestnikom Powstań Śląskich i Powstania Wielkopolskiego

⁷¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (1995), nr 100, Warszawa, 1995 r., Poz. 497, Rozporządzenie Rady Ministrów z dnia 18 sierpnia 1995 r. w sprawie wypłaty w 1995 r. jednorazowego świadczenia pieniężnego uczestnikom wojny w latach 1918-1921

- Regulation on the procedure for issuing and deleting the card of the repressive person, the documents required for their issuance and the specimen card of the repressive person's card⁷²
- Decree on the legitimacy of a member of the Veteran Corps of the struggle for independence of the Republic of Poland⁷³
- Regulation on the types of documents certifying the rights of veterans and other persons entitled to use reduced fares in public transport⁷⁴
- Regulation on the granting of veteran and retirement pensions granted on an exceptional basis⁷⁵
- Regulation on the Provision of Benefits to Veterans and Other Beneficiaries in the Amount of Veteran's Allowance, Compensation and Energy Flat Rate⁷⁶
- Regulation of the Minister of Labor and Social Policy of 24 July 2014 on the detailed scope of work, the way in which tasks are performed and the organization of the Office of Fighters and Repressed Persons⁷⁷
- Regulation of detention places where Polish nationals or Polish nationals of other nationalities were detained⁷⁸
- Decree on uniformed clothes of a member of the veteran corps of the fight for independence of the Republic of Poland⁷⁹
- Ordinance on the organization and functioning of veteran councils of the voivodeship (Polish administrative district)⁸⁰

⁷² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2003), nr 61, Warszawa, 2003 r., Poz. 539, Rozporządzenie Ministra Gospodarki, Pracy i Polityki Społecznej z dnia 11 marca 2003 r. w sprawie trybu wydawania i anulowania legitymacji osoby represjonowanej, dokumentów wymaganych do jej wydania oraz zoru legitymacji osoby represjonowanej

⁷³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 15 maja 2014 r., Poz. 620, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 14 maja 2014 r. w sprawie legitymacji członka Korpusu Veteranów Walk o Niepodległość Rzeczypospolitej Polskiej

⁷⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 21 lipca 2014 r., Poz. 953, ROZPORZĄDZENIE MINISTRA INFRASTRUKTURY I ROZWOJU z dnia 15 lipca 2014 r. w sprawie rodzajów dokumentów poświadczających uprawnienia kombatantów oraz innych osób uprawnionych do korzystania z ulgowych przejazdów środkami publicznego transportu zbiorowego

⁷⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 29 lipca 2014 r., Poz. 997, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 23 lipca 2014 r. w sprawie przyznawania dodatku kombatanckiego oraz emerytury i renty przyznawanych w drodze wyjątku

⁷⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 29 lipca 2014 r., Poz. 999, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 23 lipca 2014 r. w sprawie przyznawania kombatantom i innym osobom uprawnionym świadczenia w wysokości dodatku ombatańckiego, dodatku kompensacyjnego oraz ryczału energetycznego

⁷⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 31 lipca 2014 r., Poz. 1022, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 24 lipca 2014 r. w sprawie szczególnego zakresu działania, sposobu wykonywania zadań i organizacji Urzędu do Spraw Kombatantów i Osób Represjonowanych

⁷⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 13 listopada 2014 r., Poz. 1564, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 6 listopada 2014 r. w sprawie miejsc odosobnienia, w których były osadzone osoby narodowości polskiej lub obywatele polscy innych narodowości

⁷⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 9 maja 2017 r., Poz. 895, ROZPORZĄDZENIE MINISTRA OBRONY NARODOWEJ z dnia 25 kwietnia 2017 r. w sprawie ubioru mundurowego członka Korpusu Veteranów Walk o Niepodległość Rzeczypospolitej Polskiej

⁸⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 24 sierpnia 2017 r., Poz. 1576, ROZPORZĄDZENIE MINISTRA RODZINY, PRACY I POLITYKI SPOŁECZNEJ z dnia 16 sierpnia 2017 r. w sprawie organizacji i trybu pracy wojewódzkich rad kombatantów

recycling law ⁸¹

- Regulation on the minimum level of equipment required for repatriation service centers⁸²
- Regulation on the model application form for national visa applications for return and the attached photographs⁸³
- Regulation fixing the remuneration of members of the return authority⁸⁴
- Regulation of types of Polish language courses and adaptation courses for returnees and returnees candidates as well as their organization.⁸⁵
- Regulation on the model application form for repatriation and the requirements for documents attached to the application⁸⁶
- Regulation on the Rules of Organization and Order of the Adaptation Center for Returnees⁸⁷
- Regulation on the standard form for an application form for the repayment of housing subsidies⁸⁸
- Regulation on the model application form for the granting of a grant to a repatriate for the renovation, adaptation or installation of a dwelling⁸⁹
- Ordinance on the allocation of the special-purpose reserve of the national budget "Return aid"⁹⁰

⁸¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2000), nr 106, Warszawa, 2000 r. Poz. 1118 Ustawa z dnia 9 listopada 2000 r. o repatriacji

⁸² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 16 maja 2017 r., Poz. 956, ROZPORZĄDZENIE MINISTRA SPRAW WEWNĘTRZNYCH I ADMINISTRACJI z dnia 8 maja 2017 r. w sprawie minimalnych wymagań dotyczących wyposażenia ośrodków adaptacyjnych dla repatriantów

⁸³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 22 maja 2017 r., Poz. 994, ROZPORZĄDZENIE MINISTRA SPRAW ZAGRANICZNYCH z dnia 15 maja 2017 r. w sprawie wzoru formularza wniosku o wydanie wizy krajowej w celu repatriacji oraz fotografii dołączanych do wniosku

⁸⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 5 czerwca 2017 r., Poz. 1085, ROZPORZĄDZENIE PREZESA RADY MINISTRÓW z dnia 2 czerwca 2017 r. w sprawie określenia wysokości wynagrodzenia przysługującego członkom Rady do Spraw Repatriacji

⁸⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 7 czerwca 2018 r., Poz. 1100, ROZPORZĄDZENIE RADY MINISTRÓW z dnia 22 maja 2018 r. w sprawie rodzajów kursów języka polskiego i adaptacyjnych dla repatrianta i kandydata na repatrianta oraz sposobu ich organizacji

⁸⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 22 czerwca 2018 r., Poz. 1199, ROZPORZĄDZENIE MINISTRA SPRAW WEWNĘTRZNYCH I ADMINISTRACJI z dnia 19 czerwca 2018 r. w sprawie wzoru formularza wniosku o uznanie za repatrianta oraz wymogów dotyczących dokumentów dołączanych do wniosku

⁸⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 22 czerwca 2018 r., Poz. 1200, ROZPORZĄDZENIE MINISTRA SPRAW WEWNĘTRZNYCH I ADMINISTRACJI z dnia 19 czerwca 2018 r. w sprawie regulaminu organizacyjno-porządkowego ośrodka adaptacyjnego dla repatriantów

⁸⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 22 czerwca 2018 r., Poz. 1203, ROZPORZĄDZENIE MINISTRA SPRAW WEWNĘTRZNYCH I ADMINISTRACJI z dnia 19 czerwca 2018 r. w sprawie wzoru formularza wniosku o przyznanie repatriantowi pomocy finansowej na zaspokojenie potrzeb mieszkaniowych

⁸⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 22 czerwca 2018 r., Poz. 1204, ROZPORZĄDZENIE MINISTRA SPRAW WEWNĘTRZNYCH I ADMINISTRACJI z dnia 14 czerwca 2018 r. w sprawie wzoru formularza wniosku o przyznanie repatriantowi pomocy finansowej z tytułu remontu, adaptacji lub wyposażenia lokalu mieszkalnego

⁹⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 13 lipca 2018 r., Poz. 1352, ROZPORZĄDZENIE RADY MINISTRÓW z dnia 21 czerwca 2018 r. w sprawie podziału rezerwy celowej budżetu państwa "Pomoc dla repatriantów"

Mental health protection law ⁹¹

- Regulation on the detailed procedure and functioning of the patient ombudsman of the psychiatric clinic⁹²
- Regulation on the list of health services that present a higher risk to the patient whose consent requires authorization⁹³
- Regulation on the conditions and methods for the organization of revalidation and educational courses for children and young people with severe mental disabilities⁹⁴
- Regulation on social rehabilitation courses in social housing for people with mental disorders⁹⁵
- Regulation on Rehabilitation Measures in Psychiatric Hospitals⁹⁶
- Ordinance on the National Program for the Protection of Mental Health 2017-2022⁹⁷
- Regulation on the procedure for admission and discharge from a mental hospital⁹⁸

Law on the assistance of dependents ⁹⁹

- Related to benefits from maintenance allowances in public administration offices¹⁰⁰
- Ordinance on the form of the maintenance questionnaire and the form of the asset declaration of a maintenance debtor¹⁰¹

⁹¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 19.08.1994, Nr 111, Poz. 535, USTAWA z 19 sierpnia 1994 r. o ochronie zdrowia psychicznego.

⁹² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2006), nr 16, Warszawa, 2006 r., Poz. 126, Rozporządzenie Ministra Zdrowia z dnia 13 stycznia 2006 r. w sprawie szczególnego trybu i sposobu działania Rzecznika Praw Pacjenta Szpitala Psychiatrycznego

⁹³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 10 maja 2012 r., Poz. 494, ROZPORZĄDZENIE MINISTRA ZDROWIA1 Rozporządzenie Ministra Zdrowia z dnia 24 kwietnia 2012 r. w sprawie wykazu świadczeń zdrowotnych stwarzających podwyższone ryzyko dla pacjenta, których udzielenie wymaga zgody

⁹⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 7 maja 2013 r., Poz. 529, ROZPORZĄDZENIE MINISTRA EDUKACJI NARODOWEJ z dnia 23 kwietnia 2013 r. w sprawie warunków i sposobu organizowania zajęć rewalidacyjno-wychowawczych dla dzieci i młodzieży z upośledzeniem umysłowym w stopniu głębokim

⁹⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 27 lutego 2014 r., Poz. 250, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 14 stycznia 2014 r. w sprawie zajęć rehabilitacji społecznej w domach pomocy społecznej dla osób z zaburzeniami psychicznymi

⁹⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 24 kwietnia 2014 r., Poz. 522, ROZPORZĄDZENIE MINISTRA ZDROWIA z dnia 8 kwietnia 2014 r. w sprawie zajęć rehabilitacyjnych organizowanych w szpitalach psychiatrycznych

⁹⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 2 marca 2017 r., Poz. 458, Rozporządzenie Rady Ministrów z dnia 8 lutego 2017 r. w sprawie Narodowego Programu Ochrony Zdrowia Psychicznego na lata 2017-2022

⁹⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 29 grudnia 2018 r., Poz. 2475, Rozporządzenie Ministra Zdrowia z dnia 21 grudnia 2018 r. w sprawie postępowania w sprawach przyjęcia oraz wypisania ze szpitala psychiatrycznego

⁹⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2007), nr 192, Warszawa, 2007 r., Poz. 1378, Ustawa z dnia 7 września 2007 r. o pomocy osobom uprawnionym do alimentów

¹⁰⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2010), nr 118, Warszawa, 2010 r., Poz. 789, Rozporządzenie Ministra Pracy i Polityki Społecznej z dnia 22 czerwca 2010 r. w sprawie systemów teleinformatycznych stosowanych do realizacji zadań w zakresie świadczeń z funduszu alimentacyjnego w urzędach administracji publicznej

¹⁰¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2011), nr 73, Warszawa, 2011 r., Poz. 395, Rozporządzenie Ministra Pracy i Polityki Społecznej z dnia 23 marca 2011 r. w sprawie wzoru kwestionariusza wywiadu alimentacyjnego oraz wzoru oświadczenia majątkowego dłużnika alimentacyjnego

- Regulation on the nature of the procedure, the way in which income is determined and the amount of information that must be included in the application, certificates and declarations relating to the determination of entitlement to benefits under a maintenance fund¹⁰²
- Regulation on substantive and financial reports on the implementation of the tasks provided for in the Law on the Assistance to Persons with Entitlement to Maintenance¹⁰³

Law on sobriety education and combating alcoholism¹⁰⁴

- Rules governing the content, size, layout and nature of the placement of beer advertisements informing of the harmfulness of alcohol consumption or of the sale of alcohol to minors¹⁰⁵
- Provision for circumstances permitting the administration and consumption of a small quantity of alcoholic beverages as a result of international practice¹⁰⁶
- Regulation on experts on alcohol dependence¹⁰⁷
- Regulation on a model of a collective monthly statement of the fee payable by service providers promoting alcoholic beverages¹⁰⁸
- Regulation on sobering centers and facilities designated or built by a local administrative unit¹⁰⁹
- Regulation on the transfer of funds from the Sports Activity Fund for students¹¹⁰

¹⁰² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 31 lipca 2017 r., Poz. 1467, ROZPORZĄDZENIE MINISTRA RODZINY, PRACY I POLITYKI SPOŁECZNEJ z dnia 27 lipca 2017 r. w sprawie sposobu i trybu postępowania, sposobu ustalania dochodu oraz zakresu informacji, jakie mają być zawarte we wniosku, zaświadczeniach i oświadczeniach w sprawach o ustalenie prawa do świadczenia z funduszu alimentacyjnego

¹⁰³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 29 września 2017 r., Poz. 1812, ROZPORZĄDZENIE MINISTRA RODZINY, PRACY I POLITYKI SPOŁECZNEJ z dnia 28 września 2017 r. w sprawie sprawozdań rzeczowo-finansowych z realizacji zadań przewidzianych w ustawie o pomocy osobom uprawnionym do alimentów

¹⁰⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 12.11.1982, Nr 35, Poz. 230, USTAWA z dnia 26 października 1982 r. o wychowaniu w trzeźwości i przeciwdziałaniu alkoholizmowi.

¹⁰⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2003), nr 199, Warszawa, 2003 r., Poz. 1950, Rozporządzenie Ministra Zdrowia z dnia 6 listopada 2003 r. w sprawie treści, wielkości, wzoru i sposobu umieszczania na reklamach piwa napisów informujących o szkodliwości spożywania alkoholu lub o zakazie sprzedaży alkoholu małoletnim

¹⁰⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2004), nr 262, Warszawa, 2004 r., Poz. 2617, Rozporządzenie Ministra Spraw Zagranicznych z dnia 29 listopada 2004 r. w sprawie wypadków i okoliczności, w których ze względu na zwyczaje międzynarodowe dopuszczalne jest podawanie i spożywanie nieznacznej ilości napojów alkoholowych

¹⁰⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2007), nr 250, Warszawa, 2007 r., Poz. 1883, Rozporządzenie Ministra Zdrowia z dnia 27 grudnia 2007 r. w sprawie biegłych w przedmiocie uzależnienia od alkoholu

¹⁰⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2011), nr 61, Warszawa, 2011 r., Poz. 311, Rozporządzenie Ministra Sportu i Turystyki z dnia 1 marca 2011 r. w sprawie wzoru zbiorczej deklaracji miesięcznej dotyczącej opłaty wnoszonej przez podmioty świadczące usługę będącą reklamą napojów alkoholowych

¹⁰⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 22 grudnia 2014 r., Poz. 1850, ROZPORZĄDZENIE MINISTRA ZDROWIA z dnia 8 grudnia 2014 r. w sprawie izb wytrzeźwień i placówek wskazanych lub utworzonych przez jednostkę samorządu terytorialnego

¹¹⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 29 grudnia 2015 r., Poz. 2222, ROZPORZĄDZENIE MINISTRA SPORTU I TURYSTYKI z dnia 18 grudnia 2015 r. w sprawie przekazywania rodów z Funduszu Zajęć Sportowych dla Uczniów

- Regulation on the functioning of health units serving alcoholic persons¹¹¹
- Regulation on testing for alcohol content in the organism¹¹²

Law on Charitable Activities and Voluntary Work¹¹³

- Regulation on simplified collection of revenue and costs by certain non-governmental organizations and associations of local authorities¹¹⁴
- Regulation on the financial management of the Mutual Benefit Fund¹¹⁵
- Regulation on the Council for Charitable Activities¹¹⁶
- Regulation on the publication of information of a non-profit organization within 1% of income tax¹¹⁷
- Regulation on the conduct of inspections of non-profit organizations¹¹⁸
- Ordinance of the Chairman of the Committee on Non-Profit Affairs of 24 October 2018 on a simplified offer template and a simplified report template on the execution of a public task¹¹⁹
- The regulation on templates for tenders and framework contract templates for the performance of public tasks and templates for reports on the performance of these tasks¹²⁰
- Regulation on the exchange of information through non-profit organizations¹²¹
- Regulation on the templates for the annual technical report and the annual simplified technical report on the activities of non-profit organizations¹²²

¹¹¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 27 grudnia 2018 r., Poz. 2410, ROZPORZĄDZENIE MINISTRA ZDROWIA z dnia 15 grudnia 2018 r. w sprawie funkcjonowania podmiotów leczniczych sprawujących opiekę nad uzależnionymi od alkoholu

¹¹² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 29 grudnia 2018 r., Poz. 2472, ROZPORZĄDZENIE MINISTRA SPRAW WEWNĘTRZNYCH I ADMINISTRACJI z dnia 28 grudnia 2018 r. w sprawie badań na zawartość alkoholu w organizmie

¹¹³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 29.05.2003, Nr 96, Poz. 873, USTAWA z dnia 24 kwietnia 2003 r. o działalności pożytku publicznego i o wolontariacie.

¹¹⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 26 października 2018, Poz. 2050, Rozporządzenie Ministra Finansów z dnia 22 października 2018 r. w sprawie prowadzenia uproszczonej ewidencji przychodów i kosztów przez niektóre organizacje pozarządowe oraz stowarzyszenia jednostek samorządu terytorialnego

¹¹⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 26 października 2018, Poz. 2051, Rozporządzenie Przewodniczącego Komitetu do spraw Pożytku Publicznego z dnia 24 października 2018 r. w sprawie gospodarki finansowej Funduszu Wspierania Organizacji Pożytku Publicznego

¹¹⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 26 października 2018, Poz. 2052, Rozporządzenie Przewodniczącego Komitetu do spraw Pożytku Publicznego z dnia 24 października 2018 r. w sprawie Rady Działalności Pożytku Publicznego

¹¹⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 26 października 2018, Poz. 2053, Rozporządzenie Przewodniczącego Komitetu do spraw Pożytku Publicznego z dnia 24 października 2018 r. w sprawie zamieszczania informacji przez organizację pożytku publicznego z zakresu 1% podatku dochodowego od osób fizycznych

¹¹⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 26 października 2018, Poz. 2054, Rozporządzenie Przewodniczącego Komitetu do spraw Pożytku Publicznego z dnia 24 października 2018 r. w sprawie przeprowadzania kontroli organizacji pożytku publicznego

¹¹⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 26 października 2018, Poz. 2055, Rozporządzenie Przewodniczącego Komitetu do spraw Pożytku Publicznego z dnia 24 października 2018 r. w sprawie uproszczonego wzoru oferty i uproszczonego wzoru sprawozdania z realizacji zadania publicznego

¹²⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 29 października 2018, Poz. 2057, Rozporządzenie Przewodniczącego Komitetu do spraw Pożytku Publicznego z dnia 24 października 2018 r. w sprawie wzorów ofert i ramowych wzorów umów dotyczących realizacji zadań publicznych oraz wzorów sprawozdań z wykonania tych zadań

¹²¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 29 października 2018, Poz. 2059, Rozporządzenie Przewodniczącego Komitetu do spraw Pożytku Publicznego z dnia 25 października 2018 r. w sprawie wymiany informacji dotyczących organizacji pożytku publicznego

¹²² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 29 października 2018, Poz. 2061, Rozporządzenie Przewodniczącego Komitetu do spraw Pożytku Publicznego z dnia 24 października 2018 r. w

- Regulation on the obligation to audit financial statements of non-profit organizations¹²³
- Resolution on the establishment of the government program for social activities of older people for the period 2014-2020¹²⁴

Law on combating drug addiction¹²⁵

- Regulation on the determination of the nature of the submission of tenders, the criteria for their evaluation and the dates of the selection procedure for the selection of a specific training program in the field of addiction to drugs or psychotropic substances¹²⁶
- Regulation on narcotic drugs, psychotropic substances, precursors of category 1 and preparations containing those substances or preparations¹²⁷
- Regulation on detailed conditions and procedures for the treatment or rehabilitation of addicts convicted of offenses related to the use of narcotic drugs or psychotropic substances.¹²⁸
- Regulation on detailed conditions and procedures for the medical treatment, rehabilitation and reintegration of dependents housed in organizational units of the prison service¹²⁹
- Regulation on detailed conditions and procedures for the medical treatment, rehabilitation and reintegration of addicts living in prisons and juvenile detention centers¹³⁰
- Regulation on the granting and revocation of licenses for the harvest of poppy seed milk and opium from poppies and herbs or resins derived from other

sprawie wzorów rocznego sprawozdania merytorycznego oraz rocznego uproszczonego sprawozdania merytorycznego z działalności organizacji pożytku publicznego

¹²³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 15 listopada 2018, Poz. 2148, Rozporządzenie Ministra Finansów z dnia 13 listopada 2018 r. w sprawie obowiązku badania sprawozdań finansowych organizacji pożytku publicznego

¹²⁴ 120MONITOR POLSKI, DZIENNIK URZĘDOWY RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 24 stycznia 2014 r., Poz. 52, UCHWAŁA Nr 237, RADY MINISTRÓW z dnia 24 grudnia 2013 r. w sprawie ustanowienia Rządowego Programu na rzecz Aktywności Społecznej Osób Starszych na lata 2014-2020

¹²⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 19.09.2005, Nr 179, Poz. 1485, USTAWA z dnia 29 lipca 2005 r. o przeciwdziałaniu narkomanii.

¹²⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2006), nr 64, Warszawa, 2006r., Poz. 455, Rozporządzenie Ministra Zdrowia z dnia 7 kwietnia 2006 r. w sprawie określenia trybu składania ofert, kryteriów ich oceny oraz terminów postępowania konkursowego w sprawie wyboru programu specjalistycznego szkolenia w dziedzinie uzależnienia od środków odurzających lub substancji psychotropowych

¹²⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2006), nr 169, Warszawa, 2006r., Poz. 1216, Rozporządzenie Ministra Zdrowia z dnia 11 września 2006 r. w sprawie środków odurzających, substancji psychotropowych, prekursorów kategorii I i preparatów zawierających te środki lub substancje

¹²⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2006), nr 239, Warszawa, 2006r., Poz. 1738, Rozporządzenie Ministra Zdrowia z dnia 1 grudnia 2006 r. w sprawie szczególnych warunków i trybu postępowania w przedmiocie leczenia lub rehabilitacji osób uzależnionych, skazanych za przestępstwa pozostające w związku z używaniem środków odurzających lub substancji psychotropowych

¹²⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2007), nr 5, Warszawa, 2007r., Poz. 40, Rozporządzenie Ministra Sprawiedliwości z dnia 21 grudnia 2006 r. w sprawie szczególnych warunków i trybu postępowania leczniczego, rehabilitacyjnego i reintegracyjnego w stosunku do osób uzależnionych, umieszczonych w jednostkach organizacyjnych Służby Więziennej

¹³⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2007), nr 93, Warszawa, 2007r., Poz. 627, Rozporządzenie Ministra Sprawiedliwości z dnia 17 maja 2007 r. w sprawie szczególnych warunków i trybu postępowania leczniczego, rehabilitacyjnego i reintegracyjnego w stosunku do osób uzależnionych umieszczonych w zakładach poprawczych i schroniskach dla nieletnich

hemp fibers for scientific research purposes and for the production of poppy seed extracts¹³¹

- Regulation on the collection by the accused of information on the use of narcotics, psychotropic substances or substitutes¹³²
- Regulation on the handling of narcotic drugs, psychotropic substances, their preparations, precursors and substitutes for research purposes by scientific units conducting research on drug addiction¹³³
- Regulation laying down specific conditions and procedures for the handling of narcotic drugs, psychotropic substances and precursors of category 1, their mixtures and medicinal products, which are broken, falsified or expired and which contain narcotic drugs, psychotropic substances or category 1 precursors¹³⁴
- Regulation on substitution treatment¹³⁵
- Regulation on the scope and modes of implementation of education, information and prevention measures in schools and educational institutions to combat drug dependence¹³⁶
- Regulation on preparations containing narcotic drugs or psychotropic substances which may be used for medical purposes and clinical trials after obtaining the approval of the Provincial Medicines Inspectorate¹³⁷
- Regulation authorizing the production, processing, modification, importation, distribution or use of narcotic drugs, psychotropic substances or category 1 precursors for scientific research¹³⁸

¹³¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2008), nr 197, Warszawa, 2008r., Poz. 1225, Rozporządzenie Ministra Zdrowia z dnia 28 października 2008 r. w sprawie wydawania i cofania zezwoleń na zbiór mleczka makowego i opium z maku oraz ziela lub żywicy konopi innych niż włókniste w celu prowadzenia badań naukowych oraz na sporządzanie wyciągów ze słomy makowej

¹³² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 12 stycznia 2012 r., Pozycja 38, ROZPORZĄDZENIE MINISTRA SPRAWIEDLIWOŚCI z dnia 5 stycznia 2012 r. w sprawie zbierania informacji na temat używania przez oskarżonego środków odurzających, substancji psychotropowych lub środków zastępczych

¹³³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 20 stycznia 2012 r., Pozycja 73, Rozporządzenie Ministra Zdrowia z dnia 5 stycznia 2012 r. w sprawie sposobu postępowania ze środkami odurzającymi, substancjami psychotropowymi, ich preparatami, prekursorami kategorii 1 oraz środkami zastępczymi gromadzonymi w celach naukowych przez jednostki naukowe prowadzące badania nad problematyką narkomanii

¹³⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 2 marca 2012 r., Pozycja 236, Rozporządzenie Ministra Zdrowia z dnia 27 lutego 2012 r. w sprawie szczególnych warunków i trybu postępowania ze środkami odurzającymi, substancjami psychotropowymi i prekursorami kategorii 1, ich mieszaninami oraz produktami leczniczymi, zepsutymi, sfałszowanymi lub którym upływał termin ważności, zawierającymi w swoim składzie środki odurzające, substancje psychotropowe lub prekursory kategorii 1

¹³⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 19 marca 2013 r., Poz. 368, Rozporządzenie Ministra Zdrowia z dnia 1 marca 2013 r. w sprawie leczenia substytucyjnego

¹³⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 28 sierpnia 2015 r., Poz. 1249, ROZPORZĄDZENIE MINISTRA EDUKACJI NARODOWEJ z dnia 18 sierpnia 2015 r. w sprawie zakresu i form prowadzenia w szkołach i placówkach systemu oświaty działalności wychowawczej, edukacyjnej, informacyjnej i profilaktycznej w celu przeciwdziałania narkomanii

¹³⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 6 listopada 2015 r., Poz. 1819, ROZPORZĄDZENIE MINISTRA ZDROWIA z dnia 20 października 2015 r. w sprawie preparatów zawierających środki odurzające lub substancje psychotropowe, które mogą być posiadane i stosowane w celach medycznych oraz do badań klinicznych, po uzyskaniu zgody wojewódzkiego inspektora farmaceutycznego

¹³⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 25 listopada 2015 r., Poz. 1951, ROZPORZĄDZENIE MINISTRA ZDROWIA z dnia 9 listopada 2015 r. w sprawie wydawania zezwoleń na wytwarzanie, przetwarzanie, przerabianie, przywóz, dystrybucję albo stosowanie w celu prowadzenia badań naukowych środków odurzających, substancji psychotropowych lub prekursorów kategorii 1

- Regulation on the handling of narcotic drugs, psychotropic substances, their preparations, category 1 precursors, substitutes or new psychoactive substances when conducting research or training¹³⁹
- Regulation authorizing the wholesale sale of narcotic drugs, psychotropic substances or category 1 precursors¹⁴⁰
- Regulation laying down specific conditions and procedures for the granting of authorizations and documents required for the import, export, intra-Community acquisition or intra-Community supply of narcotic drugs, psychotropic substances or category 1 precursors¹⁴¹
- Regulation on the model application form authorizing the placing on the market of pharmaceutical raw materials for the manufacture of prescription medicinal products for non-fibrous hemp herbs and extracts, pharmaceutical liqueurs and all other extracts of non-fiber hemp and non-fiber hemp resin, as well as the detailed data and the list of documents covered by this application¹⁴²
- Regulation on the list of psychotropic drugs, narcotic drugs and new psychoactive substances¹⁴³
- Regulation on the list of bodies authorized to make inquiries to determine whether a particular product is a substitute¹⁴⁴
- Regulation on the cooperation of medical institutions performing the treatment or rehabilitation of persons using narcotic drugs, psychotropic substances, new psychoactive substances or replacement drugs with the National Office for the Suppression of Drug Addiction¹⁴⁵

¹³⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 14 czerwca 2016 r., Poz. 845, ROZPORZĄDZENIE MINISTRA ZDROWIA z dnia 31 maja 2016 r. w sprawie postępowania ze środkami odurzającymi, substancjami psychotropowymi, ich preparatami, prekursorami kategorii 1, środkami zastępczymi lub nowymi substancjami psychoaktywnymi w przypadku prowadzenia badań lub szkoleń

¹⁴⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 22 lipca 2016 r., Poz. 1085, ROZPORZĄDZENIE MINISTRA ZDROWIA z dnia 7 lipca 2016 r. w sprawie wydawania zezwoleń na obrót hurtowy środkami odurzającymi, substancjami psychotropowymi lub prekursorami kategorii 1

¹⁴¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 30 marca 2017 r., Poz. 686, ROZPORZĄDZENIE MINISTRA ZDROWIA z dnia 16 marca 2017 r. w sprawie szczególnych warunków i trybu wydawania pozwoleń oraz dokumentów niezbędnych do przywozu, wywozu, wewnętrznzwspólnotowego nabycia lub wewnętrznzwspólnotowej dostawy środków odurzających, substancji psychotropowych lub prekursorów kategorii 1

¹⁴² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 14 grudnia 2017 r., Poz. 2337, ROZPORZĄDZENIE MINISTRA ZDROWIA z dnia 5 grudnia 2017 r. w sprawie wzoru wniosku o dopuszczenie do obrotu surowca farmaceutycznego do sporządzania leków recepturowych w postaci ziela konopi innych niż włókniste oraz wyciągów, nalewek farmaceutycznych, a także wszystkich innych wyciągów z konopi innych niż włókniste oraz żywicy konopi innych niż włókniste oraz szczególnego zakresu danych i wykazu dokumentów objętych tym wnioskiem

¹⁴³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 20 sierpnia 2018 r., Poz. 1591, ROZPORZĄDZENIE MINISTRA ZDROWIA z dnia 17 sierpnia 2018 r. w sprawie wykazu substancji psychotropowych, środków odurzających oraz nowych substancji psychoaktywnych

¹⁴⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 14 marca 2019 r., Poz. 490, ROZPORZĄDZENIE MINISTRA ZDROWIA z dnia 6 marca 2019 r. w sprawie wykazu podmiotów uprawnionych do przeprowadzania badań mających na celu ustalenie, czy dany produkt jest środkiem zastępczym

¹⁴⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 12 kwietnia 2019 r., Poz. 689, ROZPORZĄDZENIE Ministra Zdrowia z dnia 26 marca 2019 r. w sprawie współpracy podmiotów leczniczych prowadzących leczenie lub rehabilitację osób używających środków odurzających, substancji psychotropowych, nowych substancji psychoaktywnych lub środków zastępczych z Krajowym Biurem do Spraw Przeciwdziałania Narkomanii

- Regulation on the use of narcotic drugs, psychotropic substances, their preparations, precursors of category 1, substitutes or new psychoactive substances¹⁴⁶
- Regulation on training in the field of addiction¹⁴⁷
- Regulation on the statute for the Council against drug addiction¹⁴⁸

Law on the prevention of domestic violence¹⁴⁹

- Regulation on a model medical certificate for the causes and nature of injuries caused by domestic violence¹⁵⁰
- Regulation on the Domestic Violence Monitoring Team¹⁵¹
- Regulation on the standard of basic care by specialized support centers for victims of domestic violence, the qualifications of persons employed in these centers, detailed instructions for the conduct of interactions with persons using domestic violence, and the qualifications of persons who have interactions in the field of correctional education carry out¹⁵²
- Regulation on the procedure for removing a child from the family in the event of imminent danger to the life or health of a child due to domestic violence¹⁵³
- Regulation on the supervision and control of the implementation of tasks in the area of domestic violence prevention¹⁵⁴
- Regulation on the Blue Card Procedure and Blue Card Forms¹⁵⁵

¹⁴⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 19 kwietnia 2019 r., Poz. 738, ROZPORZĄDZENIE RADY MINISTRÓW z dnia 17 kwietnia 2019 r. w sprawie postępowania ze środkami odurzającymi, substancjami psychotropowymi, nowymi substancjami psychoaktywnymi, prekursorami kategorii 1, lub ich preparatami, oraz środkami zastępczymi

¹⁴⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 26 kwietnia 2019 r., Poz. 766, ROZPORZĄDZENIE MINISTRA ZDROWIA z dnia 17 kwietnia 2019 r. w sprawie szkolenia w dziedzinie uzależnień

¹⁴⁸ MONITOR POLSKI (2006), nr 31, Warszawa, 2006r., Poz. 1225, Zarządzenie Nr 4 Prezesa Rady Ministrów z dnia 3 stycznia 2006 r. w sprawie statutu Rady do Spraw Przeciwdziałania Narkomanii

¹⁴⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 20.09.2005, Nr 180, Poz. 1493, USTAWA z dnia 29 lipca 2005 r. o przeciwdziałaniu przemocy w rodzinie.

¹⁵⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2010), nr 201, Warszawa, 2010r., Poz. 1334, Rozporządzenie Ministra Zdrowia z dnia 22 października 2010 r. w sprawie wzoru zaświadczenie lekarskiego o przyczynach i rodzaju uszkodzeń ciała związanych z użyciem przemocy w rodzinie

¹⁵¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2011), nr 28, Warszawa, 2011r., Poz. 146, Rozporządzenie Ministra Pracy i Polityki Społecznej z dnia 28 stycznia 2011 r. w sprawie Zespołu Monitorującego do spraw Przeciwdziałania Przemocy w Rodzinie

¹⁵² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2011), nr 50, Warszawa, 2011r., Poz. 259, Rozporządzenie Ministra Pracy i Polityki Społecznej z dnia 22 lutego 2011 r. w sprawie standardu podstawowych usług świadczonych przez specjalistyczne ośrodki wsparcia dla ofiar przemocy w rodzinie, kwalifikacji osób zatrudnionych w tych ośrodkach, szczególnych kierunków prowadzenia oddziałów korekcyjno-edukacyjnych wobec osób stosujących przemoc w rodzinie oraz kwalifikacji osób prowadzących oddziaływanie korekcyjnoedukacyjne

¹⁵³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2011), nr 81, Warszawa, 2011r., Poz. 448, Rozporządzenie Ministra Spraw Wewnętrznych i Administracji z dnia 31 marca 2011 r. w sprawie procedury postępowania przy wykonywaniu czynności odebrania dziecka z rodziny w razie bezpośredniego zagrożenia życia lub zdrowia dziecka w związku z przemocą w rodzinie

¹⁵⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2011), nr 126, Warszawa, 2011r., Poz. 718, Rozporządzenie Ministra Pracy i Polityki Społecznej z dnia 3 czerwca 2011 r. w sprawie nadzoru i kontroli nad realizacją zadań z zakresu przeciwdziałania przemocy w rodzinie

¹⁵⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2011), nr 209, Warszawa, 2011r., Poz. 1245, Rozporządzenie Rady Ministrów z dnia 13 września 2011 r. w sprawie procedury "Niebieskie Karty" oraz wzorów formularzy "Niebieska Karta"

- Resolution on the establishment of the National Program for Combating Domestic Violence for the years 2014-2020¹⁵⁶

Law on vocational and social rehabilitation and employment of persons with disabilities

¹⁵⁷

- Regulation on the granting of funds for social co-operatives to create a job and to finance compensation costs for disabled people¹⁵⁸
- Regulation on the granting of funds for setting up a business, an agricultural activity or a social cooperative activity with a disabled person¹⁵⁹
- Regulation on the granting of funds for setting up a business, an agricultural activity or a social cooperative activity with a disabled person¹⁶⁰
- Regulation laying down monthly and annual information models on employment, education or employment for persons with disabilities¹⁶¹
- Regulation on the National Consultative Council for People with Disabilities¹⁶²
- Ordinance on the definition of the form of notifications which employers who are required to pay to this Fund must direct to the Board of the State Fund for the Rehabilitation of the Disabled.¹⁶³
- Regulation on monthly subsidies for the salaries of disabled workers¹⁶⁴
- Regulation on the reimbursement of additional costs related to the employment of disabled workers¹⁶⁵

¹⁵⁶ MONITOR POLSKI, DZIENNIK URZĘDOWY RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 9 czerwca 2014r., Poz. 445, Uchwała Nr 76 Rady Ministrów z dnia 29 kwietnia 2014 r. w sprawie ustanowienia Krajowego Programu Przeciwdziałania Przemocy w Rodzinie na lata 2014-2020

¹⁵⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (1997), nr 123, Warszawa, 1997 r. Poz. 776, USTAWA z dnia 27 sierpnia 1997 r. o rehabilitacji zawodowej i społecznej oraz zatrudnianiu osób niepełnosprawnych

¹⁵⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2019), Warszawa dnia 18.04.2019, Poz. 723, ROZPORZĄDZENIE MINISTRA RODZINY, PRACY I POLITYKI SPOŁECZNEJ z dnia 12 kwietnia 2019 r. W sprawie przyznania spółdzielni socjalnej środków na utworzenie stanowiska pracy i finansowanie kosztów wynagrodzenia osób niepełnosprawnych.

¹⁵⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2018), Warszawa dnia 13.12.2018, Poz.2342, ROZPORZĄDZENIE MINISTRA RODZINY, PRACY I POLITYKI SPOŁECZNEJ z dnia 12 grudnia 2018 r. W sprawie przyznania osobie niepełnosprawnej środków na podjęcie działalności gospodarczej, rolniczej albo działalności w formie spółdzielni socjalnej.

¹⁶⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2018), Warszawa dnia 28.09.2018, Poz. 1858, ROZPORZĄDZENIE MINISTRA RODZINY, PRACY I POLITYKI SPOŁECZNEJ z dnia 27 września 2018 r. W sprawie informacji dotyczących kwot obniżenia wpłat na Państwowy Fundusz Rehabilitacji Osób Niepełnosprawnych oraz ewidencji wystawionych informacji o kwocie obniżenia.

¹⁶¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2018), Warszawa dnia 28.09.2018, Poz. 1857, ROZPORZĄDZENIE MINISTRA RODZINY, PRACY I POLITYKI SPOŁECZNEJ z dnia 27 września 2018 r. W sprawie określenia wzorów miesięcznych i rocznych informacji o zatrudnieniu, kształceniu lub o działalności na rzecz osób niepełnosprawnych.

¹⁶² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2016), Warszawa dnia 18.04.2016, Poz. 1783, ROZPORZĄDZENIE MINISTRA RODZINY, PRACY I POLITYKI SPOŁECZNEJ z dnia 27 października 2016 r. w sprawie Krajowej Rady Konsultacyjnej do Spraw Osób Niepełnosprawnych.

¹⁶³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2016), Warszawa dnia 30.06.2016, Poz.956, ROZPORZĄDZENIE MINISTRA RODZINY, PRACY I POLITYKI SPOŁECZNEJ z dnia 22 czerwca 2016 r. W sprawie ustalenia wzorów deklaracji składanych Zarządowi Państwowego Funduszu Rehabilitacji Osób Niepełnosprawnych przez pracodawców zobowiązanych do wpłat na ten Fundusz

¹⁶⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2016), Warszawa dnia 30.06.2016, Poz.951, ROZPORZĄDZENIE MINISTRA RODZINY, PRACY I POLITYKI SPOŁECZNEJ z dnia 22 czerwca 2016 r. W sprawie miesięcznego dofinansowania do wynagrodzeń pracowników niepełnosprawnych.

¹⁶⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2014), Warszawa dnia 31.12.2014, Poz.1987, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 23 grudnia 2014 r. w sprawie zwrotu dodatkowych kosztów związanych z zatrudnieniem pracowników niepełnosprawnych.

- Regulation on the financial support of employers who operate workshops protected by the State Fund for the Rehabilitation of Persons with Disabilities¹⁶⁶
- Regulation on the reimbursement of training costs for disabled workers¹⁶⁷
- Regulation on the procedure and method of carrying out inspections by bodies authorized to carry out inspections in accordance with the Law on vocational and social rehabilitation and the employment of persons with disabilities¹⁶⁸
- Regulation on professional development centers¹⁶⁹
- Regulation amending the Regulation laying down detailed rules and procedures for granting assistance under the measure 'afforestation of agricultural and non-agricultural land' provided for in the Rural Development Program 2007-2013¹⁷⁰
- Regulation on the reimbursement of equipment for the workplace of persons with disabilities¹⁷¹
- Regulation on the definition of information models provided by the operator of a sheltered workshop or a center for professional development and the way in which it is presented¹⁷²
- Regulation on the issue of attestations of the status of an assisting dog¹⁷³
- Regulation on the reimbursement of social security contributions for disabled persons¹⁷⁴

¹⁶⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2014), Warszawa dnia 31.12.2014, Poz.1975, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 23 grudnia 2014 r. w sprawie pomocy finansowej udzielanej pracodawcom prowadzącym zakłady pracy chronionej ze środków Państwowego Funduszu Rehabilitacji Osób Niepełnosprawnych.

¹⁶⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2014), Warszawa dnia 31.12.2014, Poz.1970, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 23 grudnia 2014 r. w sprawie refundacji kosztów szkolenia pracowników niepełnosprawnych.

¹⁶⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2013), Warszawa dnia 09.01.2013, Poz.29, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 20 grudnia 2012 r. w sprawie trybu i sposobu przeprowadzania kontroli przez organy upoważnione do kontroli na podstawie ustawy o rehabilitacji zawodowej i społecznej oraz zatrudnianiu osób niepełnosprawnych.

¹⁶⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2012), Warszawa dnia 24.07.2012, Poz.850, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 17 lipca 2012 r. w sprawie zakładów aktywności zawodowej

¹⁷⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2012), Warszawa dnia 24.07.2012, Poz.599, ROZPORZĄDZENIE MINISTRA ROLNICTWA I ROZWOJU WSI z dnia 24 maja 2012 r. Zmieniające rozporządzenie w sprawie szczegółowych warunków i trybu przyznawania pomocy finansowej w ramach działania "Zalesianie gruntów rolnych oraz zalesianie gruntów innych niż rolne" objętego Programem Rozwoju Obszarów Wiejskich na lata 2007-2013.

¹⁷¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2011), Warszawa dnia 22.03.2011, Nr 62, Poz.317, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 11 marca 2011 r. w sprawie zwrotu kosztów wyposażenia stanowiska pracy osoby niepełnosprawnej

¹⁷² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2011), Warszawa dnia 01.03.2011, nr 44, Poz.232, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 22 lutego 2011 r. w sprawie określenia wzorów informacji przedstawianych przez prowadzącego zakład pracy chronionej lub zakład aktywności zawodowej oraz sposobu ich przedstawiania.

¹⁷³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2010), Warszawa dnia 20.04.2010, nr 64, Poz.399, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 1 kwietnia 2010 r. w sprawie wydawania certyfikatów potwierdzających status psa asystującego.

¹⁷⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2009), Warszawa dnia 20.04.2009, nr 8, Poz.42 ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 9 stycznia 2009 r. w sprawie refundacji składek na ubezpieczenia społeczne osób niepełnosprawnych.

- Regulation on the model and method of providing collective half-yearly information by the voivode on adopted decisions and the status of employment in sheltered workplaces and professional development centers¹⁷⁵
- Regulation on the nature of tasks in the field of occupational and social rehabilitation of the disabled, awarded to foundations and non-governmental organizations¹⁷⁶
- Regulation on the conduct of specialized examinations for the assessment of disability and disability¹⁷⁷
- Regulation on the operational fund for the rehabilitation of persons with disabilities¹⁷⁸
- Regulation on rehabilitation stays¹⁷⁹
- Regulation on the conditions, methods and procedures for the collection and deletion of data under the electronic national system for the assessment of disability¹⁸⁰
- Regulation on the reimbursement of remuneration and social security contributions of employers employing disabled persons¹⁸¹
- Regulation on formulas for half-yearly information on employers exempt from or compelled to contribute to the State Fund for the Rehabilitation of Disabled Persons and the way in which they are transferred¹⁸²
- Decree defining the tasks of voivodeship self-government, which can be financed from the State Fund for the Rehabilitation of Disabled People¹⁸³

¹⁷⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2008), Warszawa dnia 25.02.2008, nr 30, Poz.180, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 12 lutego 2008 r. w sprawie wzoru i sposobu przekazywania przez wojewodę zbiorczych informacji półrocznych dotyczących wydanych decyzji oraz stanu zatrudnienia w zakładach pracy chronionej i zakładach aktywności zawodowej

¹⁷⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2008), Warszawa dnia 22.02.2008, nr 29, Poz.172, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 7 lutego 2008 r. w sprawie rodzajów zadań z zakresu rehabilitacji zawodowej i społecznej osób niepełnosprawnych zlecanych fundacjom oraz organizacjom pozarządowym

¹⁷⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2007), Warszawa dnia 22.12.2007, nr 250, Poz.1875, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 18 grudnia 2007 r. w sprawie wykonywania badań specjalistycznych na potrzeby orzekania o niepełnosprawności i stopniu niepełnosprawności

¹⁷⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2007), Warszawa dnia 28.12.2007, nr 245, Poz.1810, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 19 grudnia 2007 r. w sprawie zakładowego funduszu rehabilitacji osób niepełnosprawnych.

¹⁷⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2007), Warszawa dnia 11.12.2007, nr 230, Poz.1694, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 15 listopada 2007 r. w sprawie turnusów rehabilitacyjnych.

¹⁸⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2007), Warszawa dnia 07.12.2007, nr 228, Poz.1681, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 28 listopada 2007 r. w sprawie wzorów półrocznych informacji o pracodawcach zwolnionych z wpłat na Państwowy Fundusz Rehabilitacji Osób Niepełnosprawnych lub zobowiązanych do tych wpłat oraz sposobu ich przekazywania.

¹⁸¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2007), Warszawa dnia 23.10.2007, nr 194, Poz.1405, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 17 października 2007 r. w sprawie refundacji wynagrodzenia oraz składek na ubezpieczenia społeczne pracodawcy zatrudniającemu osoby niepełnosprawne

¹⁸² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2005), Warszawa dnia 28.10.2005, nr 214, Poz.1811, ROZPORZĄDZENIE MINISTRA POLITYKI SPOŁECZNEJ z dnia 11 października 2005 r. w sprawie wzorów półrocznych informacji o pracodawcach zwolnionych z wpłat na Państwowy Fundusz Rehabilitacji Osób Niepełnosprawnych lub zobowiązanych do tych wpłat oraz sposobu ich przekazywania

¹⁸³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2004), Warszawa dnia 27.08.2004, nr 187, Poz.1940, ROZPORZĄDZENIE MINISTRA POLITYKI SPOŁECZNEJ z dnia 6 sierpnia 2004 r. w sprawie określenia zadań samorządu województwa, które mogą być dofinansowane ze środków Państwowego Funduszu Rehabilitacji Osób Niepełnosprawnych

- Regulation on the list of sanction fees ¹⁸⁴
- Regulation on occupational therapy workshops ¹⁸⁵
- Regulation on the principles and procedures for the exercise of control by the sovereign wealth fund for the rehabilitation of persons with disabilities ¹⁸⁶
- Regulation on detailed calculation rules and procedures for the transfer of grants to municipalities from the State Fund for Rehabilitation of Disabled People ¹⁸⁷
- Regulation on the assessment of disability and disability ¹⁸⁸
- Regulation laying down detailed rules for granting exemptions from work for persons with severe or moderate disabilities to participate in a rehabilitation stay ¹⁸⁹
- Ordinance on the algorithm for the transfer of funds of the state fund for the rehabilitation of disabled persons to the provincial (voivodeship) and povoliate governments ¹⁹⁰
- Regulation on the organization and functioning of social councils of the voivodeship and the district for persons with disabilities ¹⁹¹
- Ordinance on the definition of the task types of a district (county), which can be financed from the State Fund for the Rehabilitation of Persons with Disabilities ¹⁹²
- Regulation on criteria for the assessment of disability in people under 16 years ¹⁹³

¹⁸⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2004), Warszawa dnia 16.07.2004, nr 161, Poz.1682, ROZPORZĄDZENIE MINISTRA FINANSÓW z dnia 7 lipca 2004 r. w sprawie wykazu opłat o charakterze sankcyjnym

¹⁸⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2004), Warszawa dnia 15.04.2004, nr 63, Poz.587, ROZPORZĄDZENIE MINISTRA GOSPODARKI, PRACY I POLITYKI SPOŁECZNEJ z dnia 25 marca 2004 r. w sprawie warsztatów terapii zajęciowej

¹⁸⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2004), Warszawa dnia 15.04.2004, nr 63, Poz.586, ROZPORZĄDZENIE MINISTRA GOSPODARKI, PRACY I POLITYKI SPOŁECZNEJ z dnia 22 marca 2004 r. w sprawie zasad i trybu sprawowania kontroli przez Państwowy Fundusz Rehabilitacji Osób Niepełnosprawnych

¹⁸⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2003), Warszawa dnia 22.09.2003, nr 166, Poz.1616, ROZPORZĄDZENIE MINISTRA GOSPODARKI, PRACY I POLITYKI SPOŁECZNEJ z dnia 29 sierpnia 2003 r. w sprawie szczegółowych zasad obliczania i trybu przekazywania gminom dotacji celowej ze środków Państwowego Funduszu Rehabilitacji Osób Niepełnosprawnych

¹⁸⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2003), Warszawa dnia 08.08.2003, nr 139, Poz.1328, ROZPORZĄDZENIE MINISTRA GOSPODARKI, PRACY I POLITYKI SPOŁECZNEJ z dnia 15 lipca 2003 r. W sprawie orzekania o niepełnosprawności i stopniu niepełnosprawności

¹⁸⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2003), Warszawa dnia 05.06.2003, nr 100, Poz.927, ROZPORZĄDZENIE MINISTRA GOSPODARKI, PRACY I POLITYKI SPOŁECZNEJ z dnia 22 maja 2003 r. W sprawie szczegółowych zasad udzielania zwolnień od pracy osobom o znacznym lub umiarkowanym stopniu niepełnosprawności w celu uczestniczenia w turnusie rehabilitacyjnym.

¹⁹⁰ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2003), Warszawa dnia 20.05.2003, nr 88, Poz.808, ROZPORZĄDZENIE RADY MINISTRÓW z dnia 13 maja 2003 r. w sprawie algorytmu przekazywania środków Państwowego Funduszu Rehabilitacji Osób Niepełnosprawnych samorządom wojewódzkim i powiatowym

¹⁹¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2003), Warszawa dnia 14.04.2003, nr 62, Poz.650, ROZPORZĄDZENIE MINISTRA GOSPODARKI, PRACY I POLITYKI SPOŁECZNEJ z dnia 25 marca 2003 r. w sprawie organizacji oraz trybu działania wojewódzkich i powiatowych społecznych rad do spraw osób niepełnosprawnych.

¹⁹² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2002), Warszawa dnia 01.07.2002, nr 96, Poz.861, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 25 czerwca 2002 r. w sprawie określenia rodzajów zadań powiatu, które mogą być finansowane ze środków Państwowego Funduszu Rehabilitacji Osób Niepełnosprawnych.

¹⁹³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2002), Warszawa dnia 01.03.2002, nr 17, Poz.162, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 1 lutego 2002 r. w sprawie kryteriów oceny niepełnosprawności u osób w wieku do 16 roku życia.

- Regulation on the manner of establishing, operating and financing specialized training and rehabilitation centers and the procedure for monitoring their activities¹⁹⁴
- Regulation on the types of diseases that justify the reduction of the employment rate of persons with disabilities and the way in which they are reduced¹⁹⁵
- Regulation specifying the payment of contributions from the State Fund for the Rehabilitation of Persons with Disabilities who operate sheltered workshops in connection with the employment of persons with disabilities¹⁹⁶
- Regulation on the details and procedures for appointing and dismissing members of the Board of Directors of the National Fund for the Rehabilitation of Persons with Disabilities as well as details of the provisions of the Supervisory Board and the training of its members and the amount of their remuneration for attendance at meetings of the Supervisory Board¹⁹⁷

¹⁹⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2000), Warszawa dnia 13.07.2000, nr 51, Poz.613, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 6 czerwca 2000 r. w sprawie sposobu tworzenia, działania i finansowania specjalistycznych ośrodków szkoleniowo-rehabilitacyjnych oraz trybu sprawowania nadzoru nad ich działalnością

¹⁹⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (1999), Warszawa dnia 01.01.1999, nr 124, Poz.880, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SOCJALNEJ z dnia 18 września 1998 r. w sprawie rodzajów schorzeń uzasadniających obniżenie wskaźnika zatrudnienia osób niepełnosprawnych oraz sposobu jego obniżania.

¹⁹⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (1998), Warszawa dnia 15.08.1998, nr 98, Poz.623, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SOCJALNEJ z dnia 20 lipca 1998 r. w sprawie szczegółowych zasad wypłacania subwencji ze środków Państwowego Funduszu Rehabilitacji Osób Niepełnosprawnych prowadzącym zakłady pracy chronionej, w związku z zatrudnianiem osób niepełnosprawnych

¹⁹⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (1998), Warszawa dnia 10.04.1998, nr 45, Poz.276, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SOCJALNEJ z dnia 26 marca 1998 r. w sprawie szczegółowych zasad i trybu powoływanego oraz odwoływanego członków Rady Nadzorczej Państwowego Funduszu Rehabilitacji Osób Niepełnosprawnych, a także szczegółowych zasad działania Rady Nadzorczej i szkolenia jej członków oraz wysokości ich wynagrodzenia za udział w posiedzeniach Rady.

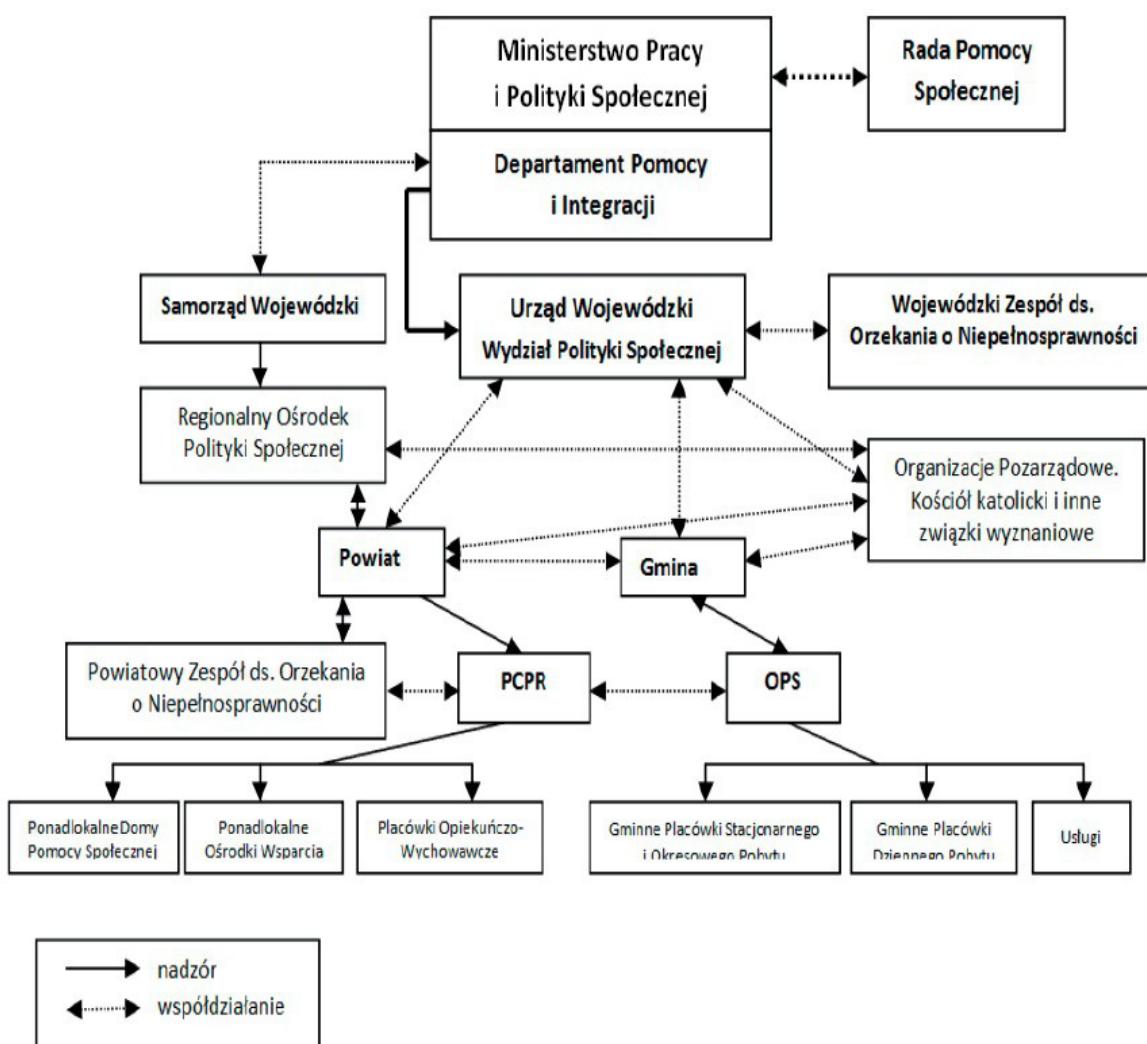


Figure 1 Organizational structure of social assistance in Poland¹⁹⁸

¹⁹⁸ Zasada-Chorab A. Rechtliche Rahmenbedingungen und Organisationssystem der Sozialhilfe in Polen, [in:] Sozialhilfesystem in Polen - Herausforderungen und Richtungen ROPS Toruń 2012, S.10

Struktura organizacji pomocy społecznej

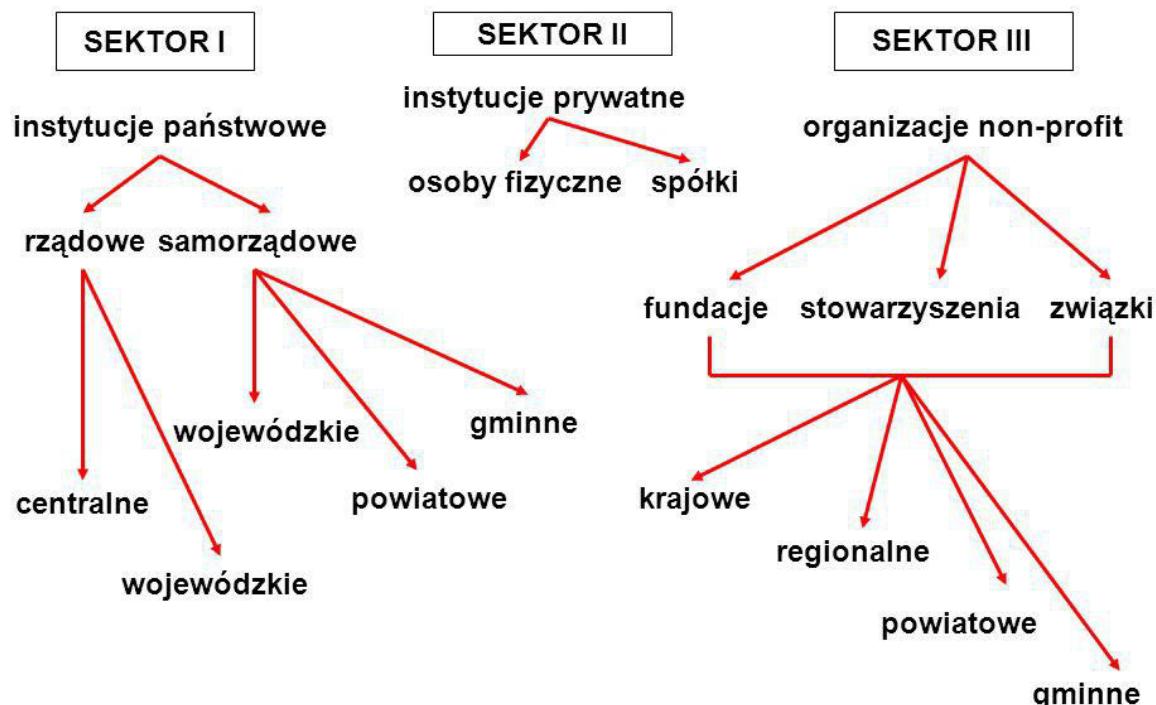


Figure 2 2 Structure of the Social Welfare Organization

III.1.2 Social security system in numbers

No.	name	estimate numbers	Sector
Stationary institutions			
1	Nursing home ¹⁹⁹ DPS	859 DPS ²⁰⁰ 81'200 places ²⁰¹ Total: 105'201 Clients	social sector
	a) for the elderly	24'044 People / Clients ²⁰²	
	b) for persons with chronic somatic diseases	21'214 People / Clients ²⁰³	
	c) for persons with chronic psychiatric disorders	23'155 People / Clients ²⁰⁴	
	d) for adult people with intellectual disabilities	15'917 People / Clients	
	e) for children and young people with intellectual disabilities	4'762 People / Clients ²⁰⁵	
	f) for physically handicapped persons	16'048 People / Clients ²⁰⁶	
	g) for alcohol dependent persons	61 People / Clients ²⁰⁷	
2	Family nursing home ²⁰⁸ RDPS	town: 26 RDPS ²⁰⁹ town: 150 places ²¹⁰ town: 136 Clients ²¹¹	social sector

¹⁹⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 13 kwietnia 2018 r. Poz. 734 OBWIESZCZENIE Ministra Rodziny, Pracy i Polityki Społecznej z dnia 23 marca 2018 r. w sprawie ogłoszenia jednolitego tekstu rozporządzenia Ministra Pracy i Polityki Społecznej w sprawie domów pomocy społecznej

²⁰⁰ GUS „Zakłady stacjonarne pomocy społecznej w 2017 r.” INFORMACJE SYGNALNE 16.05.2018 https://stat.gov.pl/obszary-tematyczne/warunki-zycia/ubóstwo-pomoc-społeczna/zakłady-stacjonarne-pomocy-społecznej-w-2017-roku_18.2.html downloaded 2018-12-17

²⁰¹ Ibidem

²⁰² Ibidem

²⁰³ Ibidem

²⁰⁴ ibidem

²⁰⁵ Ibidem

²⁰⁶ Ibidem

²⁰⁷ Ibidems

²⁰⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ Warszawa, dnia 26 czerwca 2012 r. Poz. 719, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 31 maja 2012 r. w sprawie rodzinnych domów pomocy

²⁰⁹ Ministerstwo Rodziny, Pracy i Polityki społecznej, Departament pomocy i integracji społecznej. Zestawienie według województw, Sprawozdanie MpiPS-03-R za I-XII 2016r. <https://www.gov.pl/web/rodzina/statystyka-za-rok-2016> downloaded 2018-12-18

²¹⁰ Ibidem

²¹¹ Ibidem

No.	name	estimate numbers	Sector
Stationary institutions			
3	Community-based self-help home SDS Type A: for chronically psychiatric patients Type B: for persons with intellectual disabilities Type C: for people with other chronic mental disorders Type D: for people with autism	town: 541 SDS ²¹³ town: 19'204 places ²¹⁴ town: 21'066 Clients ²¹⁵ Regional: 229 SDS ²¹⁶ Regional: 9'058 places ²¹⁷ Regional: 10'279 Clients ²¹⁸ Total: 770 SDS Total: 28'262 places Total: 31'345 Clients	social sector
4	Establishment that looks after people with disabilities, the chronically ill or the elderly around the clock in the context of an economic or legal activity	313 ²¹⁹ 11'300 places ²²⁰	social sector
5	Hostel for the homeless SDB	276 ²²¹ 15'700 places ²²²	social sector
6	Other	275 ²²³ 3'900 places ²²⁴	social sector

²¹² DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ nr 238, Warszawa, 2010 r. Poz. 1586, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 9 grudnia 2010 r. w sprawie środowiskowych domów samopomocy oraz DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ Warszawa, dnia 9 grudnia 2014 r. Poz. 1752 ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ, z dnia 4 grudnia 2014 r. zmieniające rozporządzenie w sprawie środowiskowych domów samopomocy

²¹³ Ministerstwo Rodziny, Pracy i Polityki społecznej, Departament pomocy i integracji społecznej. Zestawienie według województw, Sprawozdanie MpiPS-03-R za I-XII 2016r.

<https://www.gov.pl/web/rodzina/statystyka-za-rok-2016> downloaded 2018-12-18

²¹⁴ Ibidem

²¹⁵ Ibidem

²¹⁶ Ibidem

²¹⁷ Ibidem

²¹⁸ Ibidem

²¹⁹ GUS „Zakłady stacjonarne pomocy społecznej w 2017 r.” INFORMACJE SYGNALNE 16.05.2018 <https://stat.gov.pl/obszary-tematyczne/warunki-zycia/ubóstwo-pomoc-społeczna/zaklady-stacjonarne-pomocy-społecznej-w-2017-roku,18,2.html> downloaded 2018-12-17

²²⁰ Ibidem

²²¹ Ibidem

²²² Ibidem

²²³ Ibidem

²²⁴ Ibidem

	„EUPRAC“ Datenbasis O1	 Erasmus+
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No.	name	estimate numbers	Sector
Stationary institutions			
7	Day care home <u>DDP</u>	town: 302 DDP ²²⁵ town: 15'974 places ²²⁶ town: 21'445 Clients ²²⁷ Regional: 6 DDP ²²⁸ Regional: 224 places ²²⁹ Regional: 249 Clients ²³⁰ Total: 308 RDP Total: 16'198 places Total: 21'694 Clients	social sector

²²⁵ Ministerstwo Rodziny, Pracy i Polityki społecznej, Departament pomocy i integracji społecznej. Zestawienie według województw, Sprawozdanie MpiPS-03-R za I-XII 2016r.

<https://www.gov.pl/web/rodzina/statystyka-za-rok-2016> downloaded 2018-12-18

²²⁶ Ibidem

²²⁷ Ibidem

²²⁸ Ibidem

²²⁹ Ibidem

²³⁰ Ibidem

No.	name	estimate numbers	Sector
socio-professional integration (new units of the economy / social economy)			
A	occupational Therapy workshop ²³¹ WTZ	708 WTZ ²³² 684 WTZ ²³³ 24'871 Clients ²³⁴	social sector
B	Workshop for employment ²³⁵ ZAZ	103 ²³⁶	social sector
C	Center for Social Integration ²³⁷ CIS	159 ²³⁸	social sector
D	Club for Social Integration ²³⁹ KIS	217 ²⁴⁰	social sector
		WTZ+ZAZ+CIS+KIS: over 50'000 Clients in 2016 ²⁴¹ WTZ+ZAZ: over 30'000 Clients in 2016 ²⁴²	

²³¹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ nr 63, Warszawa, 2004 r. Poz. 587, ROZPORZĄDZENIE MINISTRA GOSPODARKI, PRACY I POLITYKI SPOŁECZNEJ z dnia 25 marca 2004 r. w sprawie warsztatów terapii zajęciowej

²³² GUS. „Usługi integracji społeczno-zawodowej na poziomie NTS 4. Raport końcowy”. Warszawa 2018 s. 54 <http://stat.gov.pl/statystyka-regionalna/statystyka-dla-polityki-spojnosci/statystyka-dla-polityki-spojnosci-2016-2018/badania/uslugi-publiczne/> downloaded 2018-12-18

²³³ Laboratorium Badań Społecznych. Badanie sytuacji warsztatów terapii zajęciowej. Warszawa 2014. (Laboratory for social research. The research on the situation of workshops). p. 41; Retrieved from <http://www.pfron.org.pl/download/1/5062/RaportkoncowyWTZ.pdf>

²³⁴ Ibidem

²³⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 24 lipca 2012 r., Poz. 850, ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 17 lipca 2012r. w sprawie zakładów aktywności zawodowej

²³⁶ GUS. „Usługi integracji społeczno-zawodowej na poziomie NTS 4. Raport końcowy”. Warszawa 2018 s. 54 <http://stat.gov.pl/statystyka-regionalna/statystyka-dla-polityki-spojnosci/statystyka-dla-polityki-spojnosci-2016-2018/badania/uslugi-publiczne/> downloaded 2018-12-18

²³⁷ Dz.U. 2003 Nr 122 poz. 1143, USTAWA z dnia 13 czerwca 2003r. o zatrudnieniu socjalnym

²³⁸ GUS. „Usługi integracji społeczno-zawodowej na poziomie NTS 4. Raport końcowy”. Warszawa 2018 s. 54 <http://stat.gov.pl/statystyka-regionalna/statystyka-dla-polityki-spojnosci/statystyka-dla-polityki-spojnosci-2016-2018/badania/uslugi-publiczne/> downloaded 2018-12-18

²³⁹ Dz.U. 2003 Nr 122 poz. 1143, USTAWA z dnia 13 czerwca 2003r. o zatrudnieniu socjalnym

²⁴⁰ GUS. „Usługi integracji społeczno-zawodowej na poziomie NTS 4. Raport końcowy”. Warszawa 2018 s. 54 <http://stat.gov.pl/statystyka-regionalna/statystyka-dla-polityki-spojnosci/statystyka-dla-polityki-spojnosci-2016-2018/badania/uslugi-publiczne/> downloaded 2018-12-18

²⁴¹ Ibidem

²⁴² Ibidem

III.2 Relevant legal regulations for occupational therapy in Poland

III.2.1 Organization of the Social Security System - Law on the Social Security System ²⁴³

Regulation on community-based self-help home SDS ²⁴⁴

§ 10.1. Home manager who hires employees with the following professional qualifications who need it:

1. Psychologist;
2. educator;
3. Social worker
4. Occupational therapy teacher;
5. Assistant to a disabled person;

another specialist who corresponds to the type and extent of services provided at home

in § 11.1. Employees within the meaning of § 10 (1) and (2) are compulsory work experience of at least three months working with people with mental disorders;

§14. Services in the sense of art. 51a, paragraph 2 of the Act include in particular:

1. Training in daily life, including: training in outward appearance care, education in hygiene science, cooking education, training in practical skills, self-employment training after acquiring finance;
2. interpersonal training skills and problem solving, including: establishing positive relationships with close relatives, neighbours, with other people while shopping, in public transport, in offices, in cultural institutions
3. Training in the ability to spend free time, including: developing literary interests, radio, television, internet and participation programs in social and cultural meetings;
4. psychological counseling;
5. Assistance with regulatory matters;
6. Providing access to health services, including arranging and monitoring appointments for doctor visits, assisting with the purchase of medicines, health support;
7. necessary care;
8. Physiotherapy, including: sports, tourism and recreation;
9. Full board for skiers for a 24-hour stay in the form of meals or food for the preparation of meals by the student;
10. other preparatory work for working in an occupational therapy workshop or working in a workplace under sheltered working conditions at a suitable workplace

²⁴³ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2004), nr 64, Warszawa, 2004 r. Poz. 593, USTAWA z dnia 12 marca 2004 r. o pomocy społecznej

²⁴⁴ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ nr 238, Warszawa, 2010 r. Poz. 1586,
ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 9 grudnia 2010 r. w sprawie środowiskowych domów samopomocy

Regulation on Social Homes ²⁴⁵

§ 5. 1 The house provides regardless of the type of service:

- 1) in terms of life needs:
 - a. Place of residence,
 - b. meals,
 - c. Clothes and shoes,
 - d. Maintaining cleanliness;
- 2) care consisting of:
 - a. Support for basic life activities,
 - b. Maintenance,
 - c. necessary help in dealing with personal matters;
- 3) supporting, consisting of:
 - a. Enabling participation in occupational therapy,
 - b. Improving the efficiency and activation of the residents of the house,
 - c. to facilitate the satisfaction of religious and cultural needs
 - d. Ensuring the conditions for the development of self-government of the residents,
 - e. promote the development, maintenance and development of contact with the family and the local community,
 - f. Measures to become as independent as possible from a resident of the house,
 - g. helping the self-employed resident of the house to take up work, especially if it has a therapeutic character, if the resident fulfills the conditions for such self-empowerment,
 - h. Ensuring the safekeeping of cash and valuables,
 - i. to finance a resident of a house that does not have his own income, to pay for necessary personal property not exceeding 30% of the permanent benefit referred to in Article 1. 37 (2) (1) of the Social Assistance Act of 12 March 2004, hereinafter referred to as "the Law",
 - j. Ensuring that the rights of residents are respected and that residents have access to information about those rights,
 - k. efficient introduction and treatment of complaints and inquiries from residents

§ 6. 1. A house is considered fulfilled, though:

- 10) The resident receive in terms of care and support services:
- a. Do social work
 - b. Organization of occupational therapy in treatment rooms and in persons residing in the apartments referred to in Article 56 (3) and (4) of the Law, including occupational therapy workshops

²⁴⁵ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 27 sierpnia 2012 r., Poz. 964,
ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 23 sierpnia 2012 r. w sprawie
domów pomocy społecznej

- c. the possibility of using a library or library building and a daily press, as well as the opportunity to familiarize oneself with the legal provisions relating to houses
- d. Organization of public holidays and occasional events and enabling participation in cultural and tourist events
- e. the ability to contact a priest and participate in religious practices, depending on the denomination of a resident of the house
- f. regular contact with the director of the house on certain days of the week and at certain times, announced in an accessible location
- g. Burial after the confession of the deceased resident of the house

2. Condition for the effective implementation of care and support services:

- 1) Full-time employment of at least two social workers per one hundred inhabitants of the household
- 2) To provide the residents of the house with a psychologist and, in the case of residents of the house who reside in the houses referred to in Article 56 (3) of the Law, also a psychiatrist
- 3) an employment rate of staff members of the therapeutic care team employed full time in the appropriate type of home for:
 - a. the elderly - at least 0.4 per inhabitant of the house,
 - b. chronically somatically ill persons - at least 0.6 per inhabitant of the house,
 - c. chronically mentally ill persons - at least 0.5 per inhabitant of the house,
 - d. Adults with intellectual disabilities - at least 0.5 per resident of the house,
 - e. Children and adolescents with intellectual disabilities - at least 0.6 per inhabitant of the house,
 - f. Persons with physical disabilities - at least 0.5 per inhabitant of the house

while the setting of employment quotas also includes volunteers, apprentices, trainees and persons using alternative services at home when working directly with the residents of the house; When calculating the indicator, the participation of these persons must not exceed 30% of the total number of persons employed in the therapeutic care team.

At least every two years, attendants of the team of therapists attend training courses organized by the headmaster on the rights of the resident of the house and the instructions for the therapy as well as methods of working with residents

Regulation on specialized care services ²⁴⁶

§ 3.

1. Specialized services are provided by persons qualified to practice: social worker, psychologist, pedagogue, speech therapist, occupational therapist, nurse, assistant to a disabled person, environmental officer, medical rehabilitation specialist, physiotherapist or any other profession providing knowledge and skills to provide specific specialized services.

²⁴⁶ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ (2005), nr 189, Warszawa, 2005 r., Poz. 1598, ROZPORZĄDZENIE MINISTRA POLITYKI SPOŁECZNEJ z dnia 22 września 2005 r. w sprawie specjalistycznych usług opiekuńczych

2. Persons providing specialized services to persons with mental disorders must complete a minimum of six months internship in one of the following units:
 - 1) a psychiatric clinic;
 - 2) an organizational unit of social assistance for people with mental disorders;
 - 3) a therapy facility or educational institution attended by children with developmental or mental disabilities;
 - 4) a therapeutic-educational center;
 - 5) Rehabilitation facility;
 - 6) to another entity not listed in items 1 to 5, which offers specialized care services for people with mental disorders.
3. In justified cases, professional services may be provided by persons who acquire or strive for the required professional qualifications referred to in paragraph 1, have at least one year professional experience in the units referred to in paragraph 2 and have the opportunity to consult with persons providing specialized services the required qualifications.
4. Persons providing services within the meaning of § 2 para. 1 lit. a, must have training and experience in the following areas:
 - 1) Ability to adapt the motivation to the behavior accepted by the environment;
 - 2) to shape the habits of purposeful action;
 - 3) Conduct social behavior training

III.2.2 Law for the protection of mental health ²⁴⁷

Regulation on social rehabilitation courses in social housing for people with mental disorders ²⁴⁸

Based on article. 7 Par. According to Article 4 of the Act of 19 August 1994 on the protection of mental health (Journal of Laws 2011 No. 231, item 1375) the following is administered:

§ 1. The regulation regulates:

- 1) Goals, types, program scope and time dimension,
- 2) the way of conducting,
- 3) the type of documentation,
- 4) the way of rewarding the participants
social rehabilitation courses in nursing homes for people with mental disorders referred to in the arts. 56 points 3-5 of the law of 12 March 2004 on social assistance (Journal of Laws of 2013, item 182, as amended.2)), hereinafter referred to as "classes".

²⁴⁷ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 19.08.1994, Nr 111, Poz. 535,
USTAWA z 19 sierpnia 1994 r. o ochronie zdrowia psychicznego.

²⁴⁸ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 27 lutego 2014 r., Poz. 250,
ROZPORZĄDZENIE MINISTRA PRACY I POLITYKI SPOŁECZNEJ z dnia 14 stycznia 2014 r. w sprawie
zajęć rehabilitacji społecznej w domach pomocy społecznej dla osób z zaburzeniami psychicznymi

§ 2. The lessons are aimed:

1. Improving the social functioning of people living in care homes for persons with mental disorders, as referred to in Article 56 (3) to (5) of the Social Welfare Act of 12 March 2004, hereinafter referred to as "houses", in particular:
 - a. to develop personal ingenuity
 - b. to stimulate social activity
 - c. Development of the ability to independently perceive social roles
2. Promotion of mental health through physical activation of the residents

§ 3. The following class types are defined:

1. therapeutic classes
2. lessons with a psychologist
3. physical activities
4. Preparatory activities for employment

§ 4. The scope of the program includes classes of certain types:

1. in therapeutic classes:
 - a. Training of functioning in everyday life,
 - b. Training of interpersonal skills and problem-solving skills,
 - c. Training in recreational activities;
2. at lessons with a psychologist:
 - a. psychological examination
 - b. psychological therapy
 - c. psychological counseling
3. in physical activities:
 - a. sports
 - b. tourism
 - c. recreation
4. for classes preparing to take up employment:
 - a. manual therapy, also in the context of occupational Therapy workshops
 - b. IT classes
 - c. Working, even under sheltered working conditions or at a suitable workplace

§ 5.

1. Classes take place individually or in groups of at least 10 hours per week.
2. The type, extent and duration of the lessons depend on the age, health and the needs and abilities of the homeowner.
3. The type, scope and duration of the lessons are derived from the individual care plan for the dorm, which is listed in the regulations issued on the basis of Article 3. 57 (8) of the Act of 12 March 2004 on Social Assistance by the Head of the Therapeutic Care Team referred to in this Regulation, hereinafter referred to as the "Therapeutic Care Team", or by an employee designated by the Director of

the Company in collaboration with other employees of the therapeutic care teams and the resident of the house or his legal representative.

4. The head of the therapeutic care team or the worker referred to in paragraph 3 shall work closely with a psychologist and, if permitted by the consent of the resident of the house or his legal representative, with a psychiatrist or neurologist who is a resident of the House with specialist care.

§ 6.

1. Individual and group courses are documented in the classrooms run by the therapeutic and caring team of staff members.
2. The following should be noted in particular in the class diary:
 - 1) weekly schedule and duration of lessons
 - 2) Type and subject of the lesson as well as first and last name of the teacher
 - 3) First and last names of the residents of the classroom
 - 4) Information on the activities carried out in order to regularly evaluate the implementation of the individual support plans of the residents of the house, which are referred to in the regulations based on art. 57 (8) of the Law of 12 March 2004 on social assistance:
 - a. Absence and its causes
 - b. Evaluation of cooperation with the therapist
 - c. active or passive participation in lessons
 - d. Shortening or lengthening participation in lessons

§ 7.

1. Residents who actively participate in lessons can receive prizes.
2. The application for a prize in kind is made by the head of the therapeutic support team or the employee in accordance with § 5 para. Third
3. The request for a prize in kind includes the name and surname of the resident of the house, the name and surname of the candidate and a proposal for a substantive award giving reasons.
4. The property manager approves the application for the award of goods and determines its value.
5. The selection and purchase of a material price are made in consultation with the award-winning person.

§ 8. The regulation comes into force 14 days after the date of publication

Regulation on Rehabilitation Measures in Psychiatric Hospitals²⁴⁹

Based on article. 15 (2) of the Act of 19 August 1994 on the Protection of Mental Health (Journal of Laws of 2011 No 231, item 1375) is regulated as follows:

§ 1. The regulation regulates:

Objectives, nature, extent and duration of rehabilitation courses organized in psychiatric hospitals, hereinafter referred to as "rehabilitation courses"

Way of implementation and documentation of rehabilitation measures

²⁴⁹ DZIENNIK USTAW RZECZYPOSPOLITEJ POLSKIEJ, Warszawa, dnia 24 kwietnia 2014 r., Poz. 522
ROZPORZĄDZENIE MINISTRA ZDROWIA z dnia 8 kwietnia 2014 r. w sprawie zajęć rehabilitacyjnych organizowanych w szpitalach psychiatrycznych

How participants are rewarded for rehabilitation

1. Organized Rehabilitation Courses, hereinafter referred to as "Rehabilitation Courses"
2. Way of implementation and documentation of rehabilitation measures
3. How participants are rewarded for rehabilitation

§ 2. The purpose of the rehabilitation courses is:

1. Reduce the severity of disease symptoms and prevent their recurrence
2. Learn to actively participate in your own treatment
3. Learning and improving the skills
 - a. social
 - b. practical, including self-service
4. Finding suitable forms of personal development and supporting personal development
5. social integration
6. Support and training of families

§ 3. The following types of rehabilitation classes are defined:

1. psychological help sessions, especially in the form of individual, group or family psychotherapy
2. Education and psychoeducation
3. occupational Therapy
4. Training social skills
5. Art Therapy
6. Exercise therapy

§ 4. The scope of the rehabilitation courses includes:

1. psychological help sessions - preparation for the solution of emotional, interpersonal problems, the management of crises, including the families of the patients
2. Enlightenment and psychoeducation - teach the patient basic knowledge about his illness
3. Occupational therapy - adapted to the needs and abilities of the patient, the exercise of concentration skills, the ability to organize the implementation of follow-up activities that lead to the fulfillment of a specific task
4. Training of social competences - adapted to the needs and abilities of patients who acquire and practice self-service skills, the ability to solve social and communication problems, and the ability to cope with problems arising from the treatment process
5. Art Therapy - Learning and improving various forms and techniques of art that help to strengthen a patient's personal development
6. Exercise therapy - sports activities, tourism and recreation

§ 5.

1. Rehabilitation measures are carried out according to an individual rehabilitation plan prepared by a specialist in psychiatry and psychology or occupational therapy in collaboration with the patient.
2. The Individual Rehabilitation Plan includes such types of rehabilitation classes that form system-coordinated interactions that allow the patient to live independently, integrate socially, engage in occupational activities, and acquire skills to ensure the greatest possible independence.
3. The individual rehabilitation plan defines the individual nature and time of rehabilitation courses for the areas of the patient in question, taking into account the course of the disease, the severity of its symptoms and the patient's expectations and possibilities.

§ 6.

1. Rehabilitation courses are conducted 5 times a week for 2 to 5 hours a day, including at least twice a week in the afternoon
2. In the afternoon and on non-working days, patients also have access to organized services that can improve their social adaptation

§ 7.

1. The documentation of the rehabilitation measures takes place in the medical history, which is part of the medical record.
2. The history of the disease includes information on the course of the patient's participation in rehabilitation measures in relation to:
 3. Changes in mobility
 4. Drive - non-directed activity (own)
 5. Concentration of attention (during spontaneous activity, during play, while performing tasks, during concentration time)
 6. Cooperation (in different situations, time of cooperation)
 7. Mastery of new skills (speed, durability, level of difficulty), also in the area of behavioral control, ability to ask for help, building up correct interpersonal relationships, shaping the assertiveness
 8. dominant mood and emotions
 9. Willingness to contact (kind, direction)
 10. Self-service skills
11. difficult behaviors (describing these behaviors and situations in which they occur)

§ 8.

1. Patients actively involved in rehabilitation can receive prizes.
2. The application for a material prize is to be submitted by the person who draws up the individual rehabilitation plan in accordance with § 5 (1).
3. The request for a prize in kind includes: first and last name of the patient, first and last name of the applicant and a proposal for a non-cash consideration with justification.
4. The head of a psychiatric clinic approves the application for a non-cash prize and determines its value.

§ 9. The Regulation will enter into force on the day following the date of notification

III.2.3 Law on vocational and social rehabilitation and employment of persons with disabilities

Art. 6b.

1. District teams decide upon request of an interested person or their legal representative or with their consent at the request of a social welfare center.
2. Social welfare centers may participate in the rights of the parties in matters relating to district groups.
3. The decision of the district determines the disability or the degree of disability, at most three symbols for the causes of the disability and information in particular:
 - 1) adequate employment taking into account the psychophysical abilities of a particular person
 - 2) Education, including specialist training
 - 3) Employment at a workplace
 - 4) Participation in occupational therapy
 - 5) the need to provide orthopedic articles, aids and technical aids that facilitate the functioning of a particular person
 - 6) Use of the environmental support system in its own existence, which includes the use of social, nursing, therapy and rehabilitation services provided by the network of social assistance institutions, non-governmental organizations and other bodies
 - 7) the need for permanent or long-term care or care by another person due to a significantly reduced possibility of self-employment
 - 8) the need for continuous involvement of the child's guardian in the process of his daily treatment, rehabilitation and education
 - 9) However, compliance with the provisions of Article 8 (3a) (1) and (2) of the Law of 20 June 1997 - Road Traffic Act (Journal of Laws 2017, Nos. 1260 and 1926, Stand 2018, Nos. 79, 106 and 138) may be applied to persons with disabilities average degree of disability can only be confirmed by establishing the cause of disability marked with the symbols 04-O (disorders of the visual organ), 05-R (obstruction of the locomotive organ) or 10-N (neurological disease).

Art. 10. The basic forms of activity in support of the process of vocational and social rehabilitation of persons with disabilities include the participation of these people:

1. Occupational Therapy Course, hereinafter referred to as "Course"
2. rehabilitation stays, hereinafter referred to as "stays"
3. Club Activities

Art. 10 A.

1. A workshop is an institutionally and financially separate institution where people with disabilities who are unable to work are given the opportunity to rehabilitate themselves socially and professionally in order to acquire or restore the skills necessary to take up employment.
2. The workshop shall implement the objective referred to in paragraph 1 using occupational therapy techniques designed to develop the following:

- 1) Skills to carry out everyday activities and personal ingenuity
- 2) psychophysical skills and basic professional and technical knowledge enabling participation in vocational training or employment
3. The therapy is carried out on the basis of an individual rehabilitation program, which defines the following:
 - 1) Forms of rehabilitation
 - 2) extent of rehabilitation
 - 3) Methods and scope of the learning skills referred to in paragraph 2
 - 4) Forms of cooperation with relatives or guardians
 - 5) planned effects of rehabilitation
 - 6) Persons responsible for the implementation of the rehabilitation program
 - 3a. On the basis of an individual rehabilitation program, a participant in a course of unpaid internships at the employer, including a social cooperative, can take up to 15 hours per week for up to 3 months, with the possibility of renewal to 6 months
 - 3b. For the professional practices referred to in paragraph 3a, not more than 50% of the participants in a course can attend at the same time.
1. The program overview, consisting of:
 - 1) workshop manager
 - 2) Specialists in rehabilitation or revalidation
 - 3) Instructor of occupational therapy
 - 4) psychologist
 - 5) guidance counselor or trainer - if necessary
2. The Program Committee shall, on a regular basis and at least every three years, make a comprehensive assessment of the implementation of the individual rehabilitation program of the course participant and comment on the progress of rehabilitation, giving the following reasons:
 - 1) Start a job and continue vocational rehabilitation under sheltered working conditions or at a suitable job
 - 2) the need to refer a disabled person to a support center as defined in the social assistance provisions, because of the lack of progress in rehabilitation and the prospects of being able to make progress that justifies employment and vocational rehabilitation under sheltered employment conditions continue to be bad or on the job market after further rehabilitation in the workshop;
 - 3) Extension of the therapy due to:
 - a. positive forecasts of future advances in rehabilitation that will allow for employment and continue vocational rehabilitation under sheltered labor or labor market conditions
 - b. temporary lack of job opportunities
 - c. the periodic inability to transfer a disabled person to the support center referred to in point 2
3. The Program Committee shall carry out the first comprehensive assessment of the implementation of the individual rehabilitation program of the course participant and, at the earliest, within 3 months and no later than 6 months after the workshop, shall occupy a position in the area of commencement of treatment in the workshop referred to in paragraph 5.

Art. 10f.

1. Handicapped people are required to attend the following events:
 - 1) Course - as specified in the disability or disability certificate
 - 2) Stay - at the request of the doctor under whose care this person is present
2. The organization intending to organize or conduct a course accepts and authorizes, in consultation with the Family Support Center, the registration of persons wishing to attend the course.
 - a. The workshop operator keeps a list of people with disabilities who have been asked to take part in the course and who have not yet started therapy in the workshop.
 - b. A disabled person who has left the course in connection with employment, in case of job loss and re-registration for participation in the course within 90 days of leaving the course, shall be entered in the list referred to in paragraph 2a. and has priority in initiating therapy.
3. Applications by disabled persons to co-finance participation in the stay will be submitted to district family support centers.
4. The course participant has the right to participate in occupational therapy until the end of the month following the month when the decision on the degree of disability is lost

Art. 35a.

1. The tasks of the circle include:
Co-financing the costs of setting up and operating occupational therapy courses

Art. 47.

1. The funds of the Fund, up to 30% of the expenditure, shall be allocated to:
 - 1) Implementation of measures to compensate for disparities between regions, particularly in municipal units where the unemployment rate is above 110% of the average unemployment rate in the country or where occupational therapy or occupational workshop has not been set up.

Art. 48.

1. Fund resources are transferred by the Chairman of the Board of Directors of the Fund:
3. In particular, the algorithm referred to in paragraph 1 should include the number of inhabitants, the number of disabled persons and the number of participants in occupational therapy courses in the district and the amount foreseen in the financial plan for the year for the performance of tasks by the local authorities and the amount of take account of commitments financed by the Fund for the execution of contracts concluded by 31 December before the year in which the funds are calculated.

Regulation on occupational therapy

§ 1. The regulation regulates:

1. detailed rules for the establishment, functioning and funding of occupational therapy including:

- a. Formulas, methods of submission and how to handle applications for co-financing of start-up, labor and costs arising from the increased number of occupational therapy participants
 - b. the method of co-financing the costs of start-up, labor and costs resulting from the increased number of occupational therapy participants
 - c. the method of producing information on the use of funds and reports on the activities of occupational therapy
 - d. detailed rules for reducing co-financing depending on the participation rate of persons with disabilities housed in organizational units required by separate occupational therapy regulations
2. the progress of persons involved in rehabilitation
 3. Composition and size of the team taking into account the requests for co-financing of the costs of setting up and carrying out occupational therapy as well as the requests to co-finance the costs resulting from the increase in occupational therapy
 4. Scope and type of carrying out workshop inspections by relief organizations for family members

§ 2. A foundation, association or other entity, hereinafter referred to as "units", who wish to set up or run a workshop will qualify candidates for participation in training according to the occupational therapy information contained in the competent authority certificate issued by the Disability Certificate.

§ 3.

1. A unit intending to set up a workshop will submit an application for co-financing of the project to the competent family support center (hereinafter referred to as the "assistance center"). A cost for the establishment and operation of the workshop, hereinafter referred to as "the application", from the State Fund for the rehabilitation of persons with disabilities, hereinafter referred to as the "Fund"; The application form is annex no. 1 of the regulation.
2. The application must be accompanied by a project to set up a workshop (hereinafter referred to as "the project").
3. The project includes:
 - 1) Name and indication of the seat of the unit to be built by a workshop
 - 2) Address and document confirming the legal form of the facility or premises intended for occupational therapy for a period of at least 10 years
 - 3) Promise of exemption from fees for the use of equipment or premises intended for occupational therapy for a period of at least 10 years, if that facility or premises belong to a local administrative unit
 - 4) current extract from the court register or other document confirming the entity's legal personality, and in the absence of any legal personality - a document confirming the existence of such entity
 - 5) the statute of the unit, which intends to set up a workshop
 - 6) Submission of at least 20 candidates for workshop participants, indicating the degree and nature of their disability, including the indication for rehabilitation in the form of occupational therapy resulting from the assessment of the degree of disability and the age of the candidates
 - 7) Workshop plan describing how the workshop participants work in the field of social and vocational rehabilitation

- 8) Obligation to develop individual rehabilitation programs for workshop participants within no more than 3 months after the beginning of the lesson
- 9) Proposals to hire a full-time workshop, indicating the number of posts and the qualifications required of the employees
- 10) Estimating the cost of setting up the workshop together with:
 - a. the estimate of any adaptation work that has been prepared and signed by a person with a structural qualification and which includes calculations of individual items based on unit prices for rates and surcharges, together with the calculation basis
 - b. Project documentation during modernization or extension of the plant
 - c. a list of necessary workshop equipment resulting from the therapy program in material and financial terms with unit prices,
 - d. Reason
- 11) an estimate of the annual cost of workshop activity under consideration of:
 - a. the monthly cost per participant
 - b. the estimated percentage of the funds of the Fund in financing these costs
- 12) Information on own funds or resources from other sources to finance the costs of setting up a workshop
- 13) Plan of the workshop area with indication of the effective area and the place of destination
- 14) Provisions of the workshop approved by the unit intending to set up a workshop;
- 15) Definition of the medical form of care in the workshop. The project was proposed for the establishment of a workshop, hereinafter referred to as "project".
4. In the event of an incomplete application for the help center within 14 days from the date of its application, the Center shall inform the unit in writing that the documentation must be completed.
5. If the application is not filed within the prescribed time limit or if information incompatible with the facts is provided, the application will not be considered.

§ 8.

The workshop is a day care.

1. The length of stay in the workshop is not more than 7 hours a day and 35 hours a week. If less than 35 hours a week are set up, the amount of funding will decrease proportionally.
2. Instruction in the workshop is carried out in accordance with the Individual Rehabilitation and Therapy Program, hereinafter referred to as the "Individual Program", which is prepared for the participant by the Program Council of the course referred to in Art. (10a para. 4)
3. The workshop provides the necessary conditions for the complete implementation of the individual program.

§9

The course is conducted on the basis of the organizational regulations approved by the body that runs the workshop. In particular, the following should be specified in the organization regulations of the course:

1. the rights and obligations of the participant
2. the method of determining the amount of funds received by the participant in the context of economic education and management
3. Organization of work and activities
4. the way the participants are transported to the workshop
5. the responsibilities of the workshop manager in relation to:
 - a. to ensure adequate working conditions and activities
 - b. Planning:
 - the schedule in the workshop
 - Summer breaks of the participants
 - Employee vacations

§10

1. The activity of the workshop is non-profit.
2. Revenues from the sale of products and services provided by the participants as part of a treatment program will be used, in agreement with the participants, to cover the social integration costs of the participants.
3. If the revenue exceeds the monthly amount corresponding to the product of the number of participants and 30% of the minimum wage applicable in December of the previous year, the Parties shall decide on the apportionment of the amount exceeding that amount.

§11 The workshop is obliged to keep records:

1. with information about:
 - a. the basis for the qualification of the disabled for participation in the workshop
 - b. the place of residence, the marital status of the participant, his living and living conditions
 - c. Collaboration with the participant's families or guardians, including:
 - Date and duration of the contacts
 - Forms of contact
 - Evaluation of cooperation
 - d. the reasons for the termination of participation
 - e. Rehabilitation, including the implementation of individual programs;
2. another, which results from separate provisions

§12

1. A participant participating in an individual program of economic education can receive a maximum of 20% of the minimum wage.
2. The amount of funding and its allocation to each participant will be determined by the Program Council of the workshop in accordance with the relevant program, taking into account the provisions of the Organizational Rules of the Workshop.

§ 13.

1. Workshop employees are:
 - 1) the workshop manager
 - 2) Specialists in rehabilitation or revalidation
 - 3) Instructor for occupational therapy
 - 4) a psychologist
2. Depending on your needs, the workshop is busy:
 - 1) a nurse or a doctor
 - 2) a social worker
 - 3) professional instructor
 - 4) other persons required for the proper operation of the workshop
3. Workshop employees are to be employed by the workshop operator.
4. There should not be more than five participants per person working directly together.
5. The number of therapy groups and occupational therapy teachers working in the group depends on the degree and type of disability of the participants.

§ 14.

1. Workshop Program Board:
 - 1) annually develops individual rehabilitation programs for each workshop participant
 - 2) indicates the persons responsible for the execution of these programs
2. The Program Council evaluates the implementation of the individual rehabilitation program at regular intervals at least once a year. The Program Council assesses at least every six months the individual effects of rehabilitation with participation of the participant.
3. A comprehensive assessment of the implementation of the Individual Rehabilitation Program will be made on the basis of a review of:
 - 1) the ability to independently perform everyday activities
 - 2) Interpersonal skills, including communication and collaboration in the group
 - 3) the degree of mastery of the skills required to take up employment, including psychophysical fitness, social and professional maturity levels, and the emotional and motivational areas

§ 19.

1. The cost of activities that can be co-financed by the Fund includes the costs of:
 - 1) Remuneration of workshop staff, employers' social contributions to employees, contributions to the Labor Fund and the Guaranteed Social Security Fund for employees, as well as depreciation on the company social security fund, if applicable
 - 2) necessary materials, energy, material services and intangible services related to the operation of the workshop
 - 3) Carriage of participants or operation of motor vehicles in connection with the implementation of the rehabilitation program and the necessary support for the activities of the workshop
 - 4) Training of workshop staff in relation to workshop activities
 - 5) Insurance of the participants

- 6) Insurance of the workshop property
 - 7) Participants organized trips
 - 8) Materials for occupational therapy in laboratories, also in the home studio
 - 9) in connection with economic education
2. With the agreement of the district, no more than 3% of the funds of the Fund may be used to cover the annual costs of workshop activity for the necessary replacement of used workshop equipment or its additional equipment.

§ 21.

1. The body responsible for the workshop shall submit to the district by 1 March of the following year an annual report on the rehabilitation activity and the use of the financial resources of the workshop (hereinafter referred to as "the report").
2. The report contains in particular
 - 1) annual billing and information on the use of funds by the workshop, including amounts from the sale of products and services within the meaning of § 10 (2) and (3)
 - 2) information about:
 - a. Number of participants and the degree and nature of their disability
 - b. the general attendance of workshop participants during certain months of the year under review
 - c. Forms and methods of rehabilitation performed by the workshop
 - d. the number of participants who left the workshop stating reasons
 - e. Number of participants who have made progress in the following areas:
 - personal ingenuity and independence
 - social rehabilitation
 - vocational rehabilitation
 - along with a description of these advances
 - 3) Details of the decisions of the Program Committee regarding the participants for which the Program Council has assessed the implementation of the Individual Rehabilitation Program.
3. The report is the basis for the annual evaluation of the workshop activities by the district.

§ 22.

1. The inspection of the workshop takes place after presentation of a written power of attorney of the head of the assistance center as well as a professional card or identity card by the auditor.
2. The inspection of workshop activities is subject in particular:
 - 1) the correctness of the qualified candidates for the participants
 - 2) the validity of the judgments of the participants and the content of the information contained therein
 - 3) Correctness of the documentation in relation to:
 - a. Attendees
 - b. Content activities of the workshop, including the activities of the program council
 - c. Collaboration with parents or guardians of participants
 - 4) Regularity of employment and qualification of workshop staff
 - 5) Compliance of the contract terms with the actual condition

- 6) Agreement of work organization and classes in the workshop with the provisions of the regulation, the organizational rules of the workshop and the contract
- 7) Correctness of the implementation of the activity plan and the individual rehabilitation programs
- 8) Proper use of funds of the Fund
- 3. As part of the inspection, an employee of the Help Center:
 - 1) enter the area and the workshop;
 - 2) require workshop staff to provide information and explanations on subjects covered by the exam
 - 3) require the submission of documentation relating to the workshop activities required to carry out the inspection
- 4. The support center will inform the workshop operator in writing of the results of the inspection within 30 days of the date of the inspection. In case of irregularities in the scope of the audit, conclusions and recommendations after the audit shall be attached to the information.
- 5. The body that carries out the workshop within 30 days of receipt of the information on the results of the inspection shall inform the Assistance Body in writing of how the recommendations for follow-up were carried out or for what reasons they were not carried out.

Regulation on companies for occupational activities

§ 1. The regulation regulates:

- 1. Details, procedures and conditions for the establishment, financing and operation of companies for occupational activities, hereinafter referred to as 'establishments'
- 2. Working time and rehabilitation of persons classified as significantly or moderately disabled
- 3. the method of creating and using the company's activity fund

There is no direct evidence of occupational therapy. It is also not necessary to hire an occupational therapist in the workplace.

III.3 Place of occupational therapy in the social security system

The social security system in Poland seems to be clear. It consists of 3 basic sectors (see chart 2). However, it is more complex and less clear (see Figure 1). The main problem is the legal and legal connection, which is very bad. The Polish social system is not well organized. Regulations in the system are missing. Not every regulation that should be adopted by the ministers is fulfilled. That is why the position of occupational therapists in this system is not as clear as it is supposed to be.

Social care system overview	
Number of legislation acts	14
Number of regulations	165
Place of OT in social care system	
Number of legislation acts	2
Number of regulations	6

IV. Summary comparison of the country-specific data for the work order 4

IV.1 Social security system in the participating countries

The right to social security is one of the fundamental rights of citizens of the Republic of Bulgaria under Article 51 (1) of the Constitution of the Republic of Bulgaria.

The state social security provides cash benefits, allowances and pensions for:

- temporary incapacity to work,
- temporarily reduced ability to work (new hiring),
- Maternity Protection,
- Unemployment,
- Disability,
- high age,
- death.

The scope of social protection in Bulgaria includes classic social insurance based on social security contributions. The social security systems are financed from the budgets of the social security funds, the health and health insurance from the budget of the national health insurance and the national budget. In 2000, a pension reform was implemented in Bulgaria, introducing the three-pillar pension scheme. The selected model combines the pay-as-you-go principle (solidarity principle) and the capital principle of social security, ie the social function of the state and the individual contribution of the insured.

Social insurance in Germany is based on several principles. A large part of the German population is subject to compulsory insurance, i. the obligation to be insured against certain risks (exceptions possible for the self-employed, the self-employed, the marginally employed, civil servants and soldiers). For most types of insurance, both employers and employees contribute to social security systems. For non-compulsory persons there is the possibility of voluntary insurance.

Compulsory insurance is based on the solidarity principle. Regardless of the use of benefits, all insured persons pay into the insurance. Thus, those who claim more are secured by the other members. Contributions depend on the insured person's income, whereas the benefits are distributed through a solidary compensation. The five main categories of social insurance are health insurance, unemployment insurance, pension insurance, accident insurance and long-term care insurance. In addition to the statutory health insurance in Germany but also the private health insurance companies, which are based on the equivalent principle. The amount of the premiums (premiums) is determined individually and depends on criteria such as age, gender, pre-existing conditions and the agreed scope of services.²⁵⁰

The system of social protection in Poland consists of the system of social security and basic security, the system of health insurance, the system of benefits in case of unemployment and the system of social assistance. The compulsory insurance in the case of certain social risks and performance guarantees in the event of the occurrence of the respective risk are contained in numerous legal acts, starting with the highest ranking act, i. with the Constitution of the Republic of Poland.

²⁵⁰ (Bundeszentrale für politische Bildung, 2009)

The Social Security Fund (FUS) is a state-assigned fund. It was created by law on 1 January 1999 for the purpose of carrying out social security tasks. The power of disposal of the Fund rests with the Social Security Institute (Zakład Ubezpieczeń Społecznych), a state-owned organizational unit based in Warsaw. The contribution rates in the pension insurance and sickness benefit insurance are uniform for all insured persons. The most important item of the Social Security Fund's revenue is premium income. In 2009, they accounted for 62.55% of the total revenue of the Fund and amounted to a total of ZŁ 86 537.7 million. Compared to the previous year, premium income was ³ 3 845.5 million, ie. increased by 5%. The second largest source of revenue is the grant from the state treasury. The grant amounted to PLN 30 503.3 million in 2009 and represented 22.05% of the fund's income.²⁵¹

In the three countries, the social security system is intended to protect the population. In Bulgaria and Germany, the principle of solidarity is applied. In Poland, we talk about health funds, which are filled with contributions and state subsidies, but the principle of solidarity is not directly named.

IV.2 Relevant legal regulation for occupational therapy in the participating countries

The legal position of the occupational therapist in Germany is determined by the social codes. Here you will be summarized together with 3 other job profiles under the collective term health care providers or remedy providers.

The SGB V contains 12 paragraphs, which regulate the daily work, the admission and the application areas of occupational therapists. These are supplemented by a paragraph in SGB VI and VII as well as 13 paragraphs in SGB IX.

The social codes regulate not only the conditions for the exercise of the profession, but also the possible areas of application, rights and obligations as well as the revocation of the professional title.

Social legislation is constantly adapted to the changing conditions of the social and economic environment. Many legal regulations have recently influenced social legislation.

In Bulgaria, the place of the occupational therapist in the respective fields of work is defined in a paper "Methodology for determining the number of employees in the" field of work ". In this paper, it becomes clear that a three-stage classification of the legal regulations governs the use of occupational therapists.

The occupational therapist is in the fields of work:

- Day Center for Children with Disabilities / Intellectual Disabilities,
- Home for children with intellectual disabilities,
- Social Rehabilitation and Integration Centers,
- Home for adults with physical disabilities, mental disabilities, mental disorders

classified as a compulsory occupational therapist, which must be present. This equates this with a physiotherapist. Employers could hire an occupational therapist or physiotherapist for this position.

²⁵¹ (Sozialversicherungsanstalt, 2010)

The occupational therapist is in the fields of work:

- Day Center for Street Children,
- Center for communication support

classified as a recommended employee, which may be present. As a result, no statutory mandatory employment of an occupational therapist is needed, but only possible.

The Occupational Therapist is not covered by law in the fields of work:

- Villas,
- Maternity and baby services,
- Sheltered houses, crisis centers,
- Day center for the elderly,
- Care at home for personal support.

In the respective fields of work there is no legal mention of the occupational therapist, but are possible jobs for this.

The social security system in Poland consists of three basic sectors:

- state institutions,
- private facilities and
- non-profit organizations.

These finance the occupational therapy service in the Polish social assistance. Here are six workspaces defined by the organizational structure:

- Social Lead care homes,
- Support centers,
- Childcare and educational facilities,
- Municipal stationary and periodic facilities,
- municipal day care homes and
- Services.

Social assistance is characterized by 15 cooperations and 9 control functions between the 18 institutions. The potential for conflict exists in the organizational and legal connections. The Polish social system is therefore confusing, which is favored by lack of regulation in the system. In the 14 laws in the social care system there are two legal acts and in the 165 regulations six regulations which regulate the positioning of the occupational therapist in the social care system. Not every regulation that should be adopted by the ministers is fulfilled. That is why the position of occupational therapists in this system is not clear.

IV.3 Statutory provisions for the remuneration of occupational therapy services in the participating countries

Occupational therapy is funded by private and / or government funds in the countries listed. This depends on whether occupational therapy takes place as a result of a prescription by a doctor or by an authority or is desired on the patient's own initiative. occupational therapy interventions, which are financed by the state, are included in the social expenditure of the country.

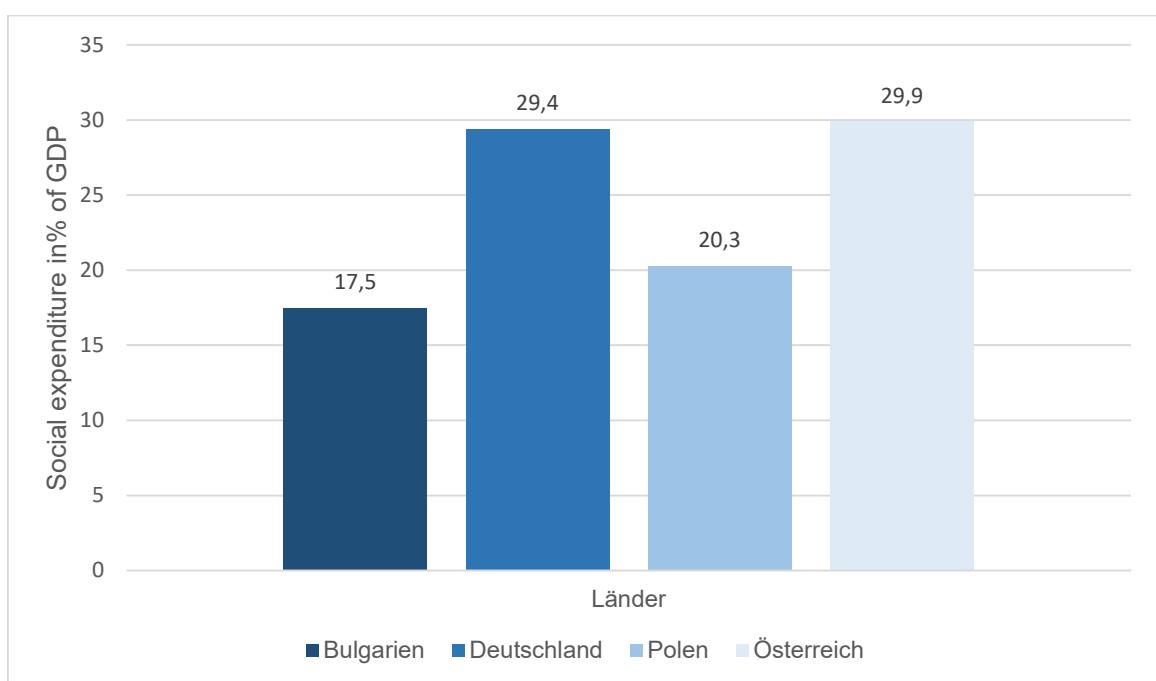


Figure 3: Social expenditure as% of GDP²⁵²

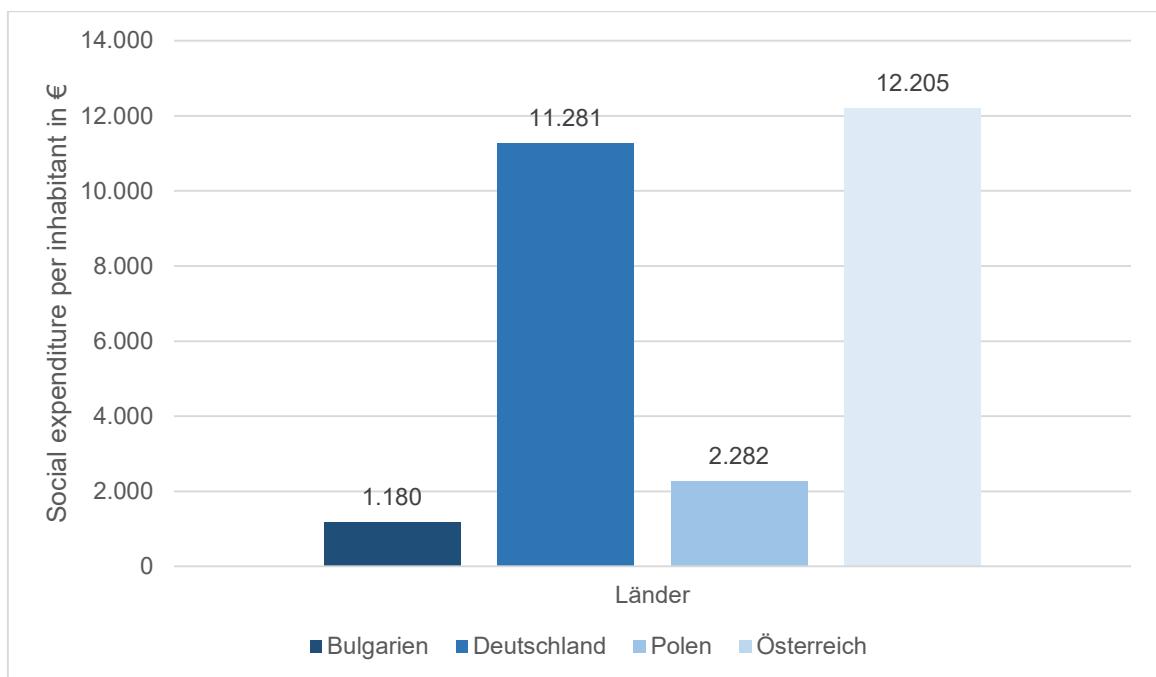


Figure 4: Per capita social spending 2016²⁵³

Of the participating countries, Austria had the highest per capita social expenditure in 2016, at € 12,205, followed by Germany at € 11,281. In 2016, these two countries were above the European average. By contrast, Poland and Bulgaria are below the European average of € 2,282 and € 1,180.

²⁵² (Wirtschaftskammer Österreich (WKO), 2016)

²⁵³ (Wirtschaftskammer Österreich (WKO), 2016)

IV.4 Conclusion

All participating project countries finance occupational therapy from state and private funds. In Germany and Bulgaria, the allocation of funding is well-structured and it can be understood which funds finance which services. In Poland this is not possible. The system in Poland is described as not clearly structured and incomplete. The systems allow a clear assignment of occupational therapists in the social system and the areas of application defined in Bulgaria and Germany. In Germany, too, all rights, obligations and conditions are defined by the social legislation.