

**PERMANENT MISSION OF ROMANIA**  
to the United Nations Office at Geneva  
and the International Organizations in  
Switzerland



**MISSION PERMANENTE DE LA ROUMANIE**  
auprès de l'Office des Nations Unies à Genève  
et des Organisations Internationales en Suisse

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The Permanent Mission of Romania to the United Nations Office at Geneva and the International Organizations in Switzerland presents its compliments to the Special Procedures Branch and, referring to the joint urgent appeal UA ROU 1/2020 of 19 May 2020, has the honor to present herewith the official response of the Romanian authorities (two documents in attachment to the note verbale).

The Permanent Mission of Romania would appreciate a confirmation of receipt of the above mentioned documents.

The Permanent Mission of Romania to the United Nations Office at Geneva and the International Organizations in Switzerland avails itself of this opportunity to renew to the Special Procedures Branch the assurances of its highest consideration.



**Geneva, 20 July 2020**

**Special Procedures Branch**  
**Office of the High Commissioner for Human Rights**  
**-in town-**

**Rue de Vermont 37-39; 1202 - Genève**

**Phone/Téléphone :** +41-22-752 1090 **Fax/Télécopieur:** +41-22-752 2976

**E-mail/Courriel:** mission.romania@romaniaunog.org

**Website:** <http://mpgeneva.mae.ro>

Following the receipt of the joint urgent appeal, letter no. UA ROU 1/2020, concerning the physical integrity of persons with disabilities and older persons in Sasca Mică and other residential institutions in Romania, who have tested positive for COVID-19, the Ministry of Foreign Affairs of Romania requested input from the competent authorities.

The responses bellow were compiled based on the information received from governmental institutions - namely the Ministry of Health, the Ministry of Labour and Social Protection, the National Authority for the Rights of Persons with Disabilities, Children and Adoptions (hereinafter "NARPDCA"), the General Directorates for Social Assistance and Child Protection (hereinafter "GDSACP"), the National Agency for Payments and Social Inspection, the National Institute for Public Health and the Public Health Departments – and from the competent autonomous institutions - People's Advocate, the National Council on Combating Discrimination, the General Prosecutor's Office attached to the High Court of Cassation and Justice and the Monitoring Council<sup>1</sup>.

The response below is structured in order to give the broadest possible dynamic picture of the measures taken. It includes aspects which are necessary to prove that the rights provided by the relevant international instruments were observed, as well as aspects which are not circumscribed to an urgent appeal procedure, but to a regular reporting – namely those related to the deinstitutionalisation process in Romania.

#### *I. Facts and measures*

With regard to the facts described, Romanian authorities would like to provide the following additional information and comments.

The management system in place, regarding the institutions where persons with disabilities and older persons reside, has two levels – national and local (county and territorial administrative units). Depending on the situation, the structures subordinated to the Ministry of Labour and Social Protection, the ones under the Ministry of Health or the local authorities share the main responsibilities. In exceptional situations, the Public Ministry or the police could be involved as well. For a better understanding of the facts and measures described, a matrix regarding the competent authorities and their different roles in the management of the social care institutions is annexed.

Following the outbreak of the COVID-19, on March 16, 2020, the President of Romania enacted by presidential decree the state of emergency for an initial period of 30 days. A subsequent decree prolonged the state of emergency until May 14, 2020. The exercise of certain rights, expressly provided in article 2 of the presidential decree, could be restricted proportionally with the gravity of the health threat, by means of military ordinances issued by the Minister of Interior<sup>2</sup>. In Romania, the state of alert was initially declared on 15 May 2020, by

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<sup>1</sup> The process of collecting data regarding the situation in the residential centres during COVID-19 pandemic is pending.

<sup>2</sup> See the notifications made by Romania according to Article 4 of the International Covenant on Civil and Political Rights and according to article 15 of the European Convention on Human Rights (<https://www.coe.int/en/web/conventions/full-list/-/conventions/webContent/62111354>).

Decision of the National Committee for Emergency Situations, for a period of 30 days<sup>3</sup>. The state of alert was prolonged on 16 June 2020, by the Decision of the Government, for another 30 days.

The following regulations were relevant for the situation in the social residential care units envisaged by the urgent appeal:

- Military Ordinance no. 8/2020 – imposing the preventive isolation at the working place for 14 days shifts;
- Orders of the Minister of Health regarding the organisation of hospitals in view of managing COVID-19 cases<sup>4</sup>;
- Common order no.3577/831/2020 of the Minister of Labour and Social Protection and the Minister of Health on measures to prevent contamination with SARS Cov-2 and to ensure that work is carried out in safe and healthy conditions at work, during the period of alert for employers in social services for vulnerable categories<sup>5</sup> (supplemented by the recommendations issued by NARPDCA)
- Protocols regarding the management of COVID-19 cases, published on the site of the National Institute for Public Health.

Based on these norms, each residential care unit had the obligation to elaborate and implement its own protocols, according to its needs and particularities. NARPDCA created a strategic coordination and prevention mechanism for COVID-19 pandemic around the 47 county level GDSACPs and the private social service providers and strived to coordinate also with the structures subordinated to the Ministry of Health and with local authorities.

The National Coordination Unit for COVID-19, established at the level of NARPDCA since 10<sup>th</sup> of March 2020, ensures a continuous flow of information and facilitates the publication on the NARPDCA' site of regular updates on the COVID-19 situation in residential care units (see <http://NARPDCA.gov.ro/w/wp-content/uploads/2020/07/Situatia-raspandirii-COVID-03-iulie.pdf>).

During this period (March-May 2020), NARPDCA issued coordination and management instruments. We mention the most relevant for the situations envisaged: methodological recommendations towards GDSACPs regarding the first phase prevention measures (methodology published on 10 March 2020); procedure for public relations activities; recommendation on suspension of the day services, recovery and rehabilitation services; official notice on extension of validity of disability certificates (16 March 2020); Prevention Guide

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<sup>3</sup> On 18 May 2020, new legislation, the Law regarding some measures to prevent and combat the effects of the COVID-19 pandemic, specifically regulating the Covid-19 situation was enacted. Thus, the Government declared again the state of alert, for a new period of 30 days, through a Government Decision , later endorsed, with amendments, by the Parliament.

<sup>4</sup> The National Institute for Public Health publishes all relevant regulation on COVID-19 pandemic on its site, including Minister's orders: [http://www.cnscbt.ro/index.php/legislatie\\_cov](http://www.cnscbt.ro/index.php/legislatie_cov)

<sup>5</sup> Article 1 provides for detailed obligations regarding (among others): training of the personnel, organisation of work (including the identification of the persons responsible for the temperature measurement of the beneficiaries) and management of resources (including providing the necessary equipment), re-evaluation of risks, and permanent communication with the competent medical personnel.

COVID-19 (26 March 2020)<sup>6</sup>; official notification of the GDSACPs on the support for children and adults in the protection system run by a private corporation and subsequent methodology (2 April 2020); Recommendation regarding the application of the provisions of the Military Ordinance no.8/2020. It is worth mentioning that, at the request of UNICEF Romania, some of these recommendations were disseminated in the UN system, as good practices to be implemented in other parts of the world.

*Note: NARPDCA issued further recommendations and formal notices at the end of the emergency state (recommendation on the resumption of activities following the termination of the state of emergency situation – 16 May 2020) and during the state of alert (recommendation for social services applicable during the alert period – 16 May 2020). Moreover, it initiated a working group with the National Institute of Public Health for developing a methodology for further preventing and combating COVID-19 in social services (2 June 2020)<sup>7</sup>. At the same time, it sent a letter to the Ministry of National Education and Research proposing measures on the education of children with disabilities and CES during COVID-19 pandemic.*

The Ministry of Health and its subordinated structures managed each of the situations occurred, without any discrimination regarding age or social status. The actions taken were based solely on medical, epidemiological reasons, with due consideration for the particularities of the cases concerned and in line with the national and international regulations and recommendations in force. Measures like isolation at the work place of the medical and of the social care assistance personnel were among the strictest in Europe, but as pointed out by the Council of Europe Human Rights Commissioner, one with positive results<sup>8</sup>.

As regards the measures and situation in the centres from Suceava county<sup>9</sup> - **Sasca Mică, Zvoriştea and Costana** - the following information could contribute to a more comprehensive presentation as compared to the one provided in the urgent appeal.

On 15 April 2020, DGACSP of Suceava County informed the Public Health Department of Suceava County that one of the residents of the **Sasca Mică** Centre was transferred to Suceava's emergency hospital, due to possible COVID-19 symptoms. After the confirmation of the presence of the virus for the mentioned beneficiary, on 16 April 2020, all beneficiaries and personnel of the Sasca centre were tested for COVID-19. The results communicated on 21 April 2020 showed that 242 beneficiaries and 59 employees have contracted the virus, but all of them were asymptomatic. The Suceava Department for Public Health decided to transfer to Suceava emergency hospital all of the employees which were tested positive. This measure was based on the following: at the moment of the outbreak of such a numerous COVID-19 cases, they were

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<sup>6</sup> This guide, elaborated in an easy-to-understand language, was sent to the GDSACP's in order to be disseminated among beneficiaries

<sup>7</sup> The methodology will be released soon.

<sup>8</sup> <https://www.coe.int/en/web/commissioner/-/lessons-to-be-drawn-from-the-ravages-of-the-covid-19-pandemic-in-long-term-care-facilities>.

<sup>9</sup> As pointed out in the introduction and extensively presented in the matrix, each of the competent structures of the Ministry of Labour and of the Ministry of Health was able to organize their activity of combating and preventing COVID-19 spreading, according to the national legislation and administrative orders at central level.

already in quarantine, working in 14 days shifts, according the regulations in force mentioned above; it was physically impossible to create additional separate spaces for the caretakers working in 14 days shifts; taking into consideration the high number of cases, the best way to prevent the spread of the virus in the families and, consequently, in the community, was to hospitalize them.

The same approach was taken as regards **Costana** centre. Here, when 8 of the beneficiaries manifested the disease in a medium form, they were hospitalized too. This proves that no discriminatory treatment between employees and beneficiaries was envisaged, but only medical and epidemiological aspects. In this sense, it is relevant that 2 of the hospitalized beneficiaries manifested an aggressive behaviour in hospital, due to their mental health condition. This is conclusive evidence that the measure of hospitalization represents a supplementary trauma for these persons; consequently it should be a measure of last resort, based on the gravity of the form of manifestations of the disease.

The COVID-19 positive beneficiaries who remained in the centre were asymptomatic. The health condition of the beneficiaries was monitored by the medical personnel of Suceava emergency hospital, on a daily basis. The Suceava's county Health Directorate took into consideration the mental state of the beneficiaries when deciding for this approach<sup>10</sup>. This approach was also in line with the Minister of Health' Order no. 503/2020 modifying the annex of a previous Minister of Health Order no. 487/2020 on approving the protocol of treatment for SARS-Cov2<sup>11</sup>.

The quarantine measures were followed by several operational measures: isolation of the beneficiaries in order to ensure separate care for the beneficiaries, during the 14 days shifts; training of the personnel on COVID-19 procedures, done by medical staff from the emergency hospital of Suceava; daily controls of the medical condition of the beneficiaries (temperature measurement, observance of manifestation; supplementing the medical staff in the centre.

As regards the information of the beneficiaries' family members from Sasca centre – contact details and hours of operation are provided for each centre on the website of the GDSACP Suceava, under the section Information of public interest<sup>12</sup>. Any requests for information or complaints could be sent to GDSACP Suceava, on the email address or via its Facebook page.

Finally, at that time, contrary to the affirmations in the urgent appeal, the Suceava hospital functioned at only half capacity and the COVID-19 section from the nearest hospital in Rădăuți was full.

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<sup>10</sup> According to medical evaluation, the adaptation of these patients to a change of environment is more difficult and the personnel in place had the appropriate knowledge and the better means to treat them on the spot. However, at the core of the medical evaluation was the way in which the disease manifested.

<sup>11</sup> “The mild cases may be more rapidly discharged from the hospitals or may be take care of at home, with the following recommendations: a minimum of 14 days isolation and monitoring of the health situation (either directly or by phone)”

<sup>12</sup> <http://dgaspcsv.ro/wp-content/uploads/2020/05/Anunt-important-CRRN-Sasca-Mica-1.pdf>.

On 26 May 2020, there were only 16 COVID-19 positive cases in Sasca centre among beneficiaries and 4 among employees. According to the information provided by the Suceava Public Health Directorate, in **Zvoriştea** centre there were not reported COVID-19 cases (information updated on 13 July 2020).

As regards **Păclişa centre** – on 20 April 2020, the Directorate for Public Health of the Hunedoara County, acting upon request of the Hunedoara GDSACP, initiated an epidemiologic investigation, following the death of a beneficiary, who presented possible COVID-19 infection manifestations before death occurred. All persons in the centre, including the personnel, were tested – 10 beneficiaries and 5 employees being declared COVID-19 positives. On 22 April 2020, all 15 persons were hospitalized in the Hunedoara emergency hospital, even though they were asymptomatic. Due to the neuropsychiatric disorders of the beneficiaries, after 24h, all 15 persons were transferred back to the centre.

The measures taken at the centre were strict and in accordance with the regulations in force, and no differentiated medical treatment was applied between the beneficiaries and the personnel (there were two medical nurses assigned and specially equipped for the entire restricted area; all personnel was equipped and disinfection procedures were applied<sup>13</sup>). Medical staff from the hospitals in the region - Hunedoara and Haţeg - payed several visits to the centre, consulted all beneficiaries and the personnel infected and prescribed the necessary treatment. Each of these medical visits is registered in the patients' files.

Moreover, following successive re-testing of the persons with non-conclusive results, another beneficiary was transferred into the special area for COVID-19 and his/her contacts were isolated and medically assisted accordingly. The results for two more employees were also positive.

Besides the non-discriminatory character of the procedures applied in this case, the important fact to be underlined is that no other death was registered at the centre and, currently, there is no patient with COVID-19 infection.

As regards the privately owned centre “**St. Ilie**” from **Galaţi**, the following information is relevant. The testing of the elderly persons in the centre began as early as 2 April 2020, following the first registered case on 28 March 2020 (one of the employees of the centre). On 5 April, first four cases of COVID-19 were confirmed by the results of the tests, and consequently the centre was isolated in quarantine. Four series of tests were conducted (223 in total) – with the following results positives for COVID-19: 114 cases, elder persons, residing in the centre and 23 cases among the personnel.

The personnel and the elder persons needing extensive medical care were transferred in different hospitals in Galaţi. At the same time, the Health Directorate of Galaţi found solutions for ensuring medical assistance in place (62 new medical staff were temporary seconded at the

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<sup>13</sup> It is worth mentioning that the system of the 14 days shifts functioned since 13 April 2020

centre). The latter measure is in accordance with the WHO recommendation for the COVID-19 patients in long-term care institutions<sup>14</sup>.

## *II. Protocols and preventive measures*

According to WHO recommendations, the main components of the COVID-19 management system are represented by the prevention component (separate circuits for supply, limitation of visits, priority testing), increase training and decision-making supports for the health and social care workforce, provide additional support, financial, human and material resources, establishing a rigorous monitoring and reporting system.

The National Institute of Public Health issues protocols for the management of the COVID-19 and the residential centres have the responsibility to issue their own protocols and procedures, according to their needs and particularities. According to the Ministry of Health, the general protocols do not provide for any distinctions based on age. On the webpage of the National Institute of Public Health – a special section is dedicated to COVID-19, with information for the general population and information for medical staff. Measures on the prevention of contamination with the SARS Cov-2 were approved by Common Order of the Minister of Health and the Minister of Labour and Social Protection no. 3577/831/2020, in view of ensuring safe and healthy conditions at work for employees in social services for vulnerable categories. Moreover, the Ministry of Labour published general guidelines, addressed to all social services providers on the need to update the internal procedures according to the regulations in force. All these general measures were supplemented by the recommendation and the coordination activity undertaken by the NARPDCA.

The preventive measures ranged from incentives (financial or in kind – food, shelter) for medical and health care providers, to quarantine measures for all types of residential care units, ensuring free tests for the employees and beneficiaries<sup>15</sup>, online psychological support for those which were isolated and prohibition by law of the interruption of the social services granted to persons at risk and last, but not least, efforts for an appropriate supply chain of equipment (especially in the early phase of the pandemic, when many countries had temporary problems<sup>16</sup>).

## *III. Statistics*

Numbers and statistics are important components of the overall monitoring system of the evolution of the COVID-19 pandemic. However, they are changing very rapidly and numbers which showed a preoccupying tendency regarding one situation or another, may become irrelevant in two weeks' time.

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<sup>14</sup> [https://apps.who.int/iris/bitstream/handle/10665/331508/WHO-2019-nCoV-IPC\\_long\\_term\\_care-2020.1-eng.pdf](https://apps.who.int/iris/bitstream/handle/10665/331508/WHO-2019-nCoV-IPC_long_term_care-2020.1-eng.pdf)

<sup>15</sup> According to the Case definitions for acute respiratory syndrome with the new Coronavirus, published on 14 May 2020 – the following categories will be tested for COVID-19 with priority: asymptomatic and symptomatic institutionalized persons; staff of the residential centres (2 times a month, following each 14 days shift)

<sup>16</sup> It is worth mentioning the mobilization of the whole society and of the private sector, especially at the beginning of the pandemic (see for example the partnership between NARPDCA and UNICEF Romania for 150000 gloves and masks or the donation of approx. 225000 Euro towards NARPDCA for sanitary equipment and food supplies).

As stated in point I, NARPDCA provides for regular, monthly updates on the situation of COVID-19 infections in the social assistance system in Romania. According to the update from 3 July 2020, out of 55 000 beneficiaries residing in centres for persons with disabilities (adults and children) and for elderly persons, there are 185 persons COVID-19 positives, 1295 residents declared cured. 176 residents are deceased. There are 111 employees working in these centres that were infected with COVID-19; 3 have died<sup>17</sup>.

The overall picture indicates that the measures taken proved their efficiency. Thus, compared to 4 June 2020, the date of the previous statistics published by the NARPDCA, the number of infected residents decreased by 183 (from 362 to 185); the number of those cured increased by 377 (from 918 to 1295).

As regards the numbers provided in the urgent appeal and, moreover, the affirmation there that “real numbers [*of older people*] could be much higher”, please consider the following information provided by the National Agency for Payments and Social Inspection provides the following information:

- Out of the 1149 social services at national level monitored weekly, since 15 March 2020, 649 were residential services for the elderly people;
- The number of elderly people residing in these centres at the beginning of the monitoring period was 27137;
- According to data available on July 10, 2020, 926 elderly people have been infected with Sars Cov-2, out of which 159 have died (16,53%) and 726 people were declared cured.

#### *IV. Deinstitutionalization process*

In 2010 Romania has ratified, without reservations, the UN Convention on the rights of persons with disabilities (CRPD) and for the period 2016-2020 a national Strategy "A society without barriers for people with disabilities" is in force<sup>18</sup>.

Romania engaged on the deinstitutionalization and prevention of the institutionalization of persons with disabilities, simultaneously with the development of alternative support services for independent living and integration in the community.

From a legal perspective, the process of reorganization/restructuring of residential centres emphasizes the need of assessing the individual needs of persons with disabilities, identifying activities needed to maintain, develop, strengthen the person's potential and correlate these activities with the type of social service needed.

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<sup>17</sup> According to NARPDCA, on 3 July 2020, the situation in the counties cited in the urgent appeal was the following: in Galați – there were 16 beneficiaries infected with Sars Cov-2, 160 cured and 65 deaths; in Hunedoara – 0 infected 51 cured and 8 deaths; in Suceava – there were 2 beneficiaries infected with Sars Cov-2, 460 cured and 19 deaths.

<sup>18</sup> The aim of the Strategy is to ensure the full benefit of their rights and effective participation of persons with disabilities in social life, as guaranteed by the Romanian Constitution and the international agreements to which Romania is a party. This Strategy focuses on eight main directions for actions, aiming to the implementing of the Convention on the rights of persons with disabilities in Romania: accessibility, participation, equality, employment, education and training, social protection, health and statistics in data collection



During 2016 - 2018, the first financing mechanisms for deinstitutionalization were created or accessed through the EU Regional Operational Program, with a total value of 16 million Euros (for the deinstitutionalization of 516 persons<sup>19</sup>) and through Programs of National Interest (from the national budget), with a total value of 22 million Euros (784 people<sup>20</sup>). For 2021 Romania set as objective the deinstitutionalization of 1300 persons.

In 2018, the Government Emergency Ordinance No. 69, amending Law no. 448/2006 on the protection and promotion of the rights of persons with disabilities, set the framework for the reorganization of the residential centres, the methodology for developing the Restructuring Plans and the specific minimum quality standards required for social services for adults with disabilities. This Government Decision sets also the maximum capacity of residential centers for adults with disabilities at 50 seats, therefore restructuring plans must be drawn up for centers with a capacity of more than 50 persons. At the same time, the Government Decision no. 69/2018 provides for a 25% annual reduction in funding from the state budget for residential centres with a capacity of more than 50 people<sup>21</sup>.

Currently, out of the 300 public residential centres for persons with disabilities (where live over 16.000 persons) - 39 centres have a capacity of over 100 seats, 7 centres have a capacity of over 200 seats and 1 centre (Sasca Mica - Suceava County) has a capacity of over 350 seats.

Out of the 85 existing centres throughout the country, with a capacity of more than 50 seats, 50 have submitted and obtained approval for restructuring. So far, 31 centres for which the restructuring plans were approved, accessed projects through GDSACPs, with European and national financing mechanisms, amount at over 60 million Euro.

The above-mentioned aspects provide for a partial picture of the measures taken by the Romanian authorities as regards the deinstitutionalisation process. The next national Strategy 2021-2027, developed with EU funding, will provide for a stricter coordination mechanism with measurable targets and indicators, that will contribute to a further advancement of the deinstitutionalisation process in Romania.

## V. Conclusion

According to the information received from the General Prosecutor's Office attached to the High Court of Cassation and Justice, there are several ongoing criminal files regarding the centres mentioned in the urgent appeal. The main charge in these cases resides in article 352 of the Romanian Criminal Code (preventing the spread of diseases<sup>22</sup>) and only in the case of the

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<sup>19</sup> There are 7 territorial DGASPCs which implement 8 European projects aiming at transferring 467 persons with disabilities from 9 residential centres to family-type units (57 sheltered housing and 18 day centres).

<sup>20</sup> There are 16 territorial DGASPCs which implement 31 national interest projects, aiming at transferring 650 persons with disabilities from 29 residential centres to family-type units (83 sheltered housing and 28 day centres).

<sup>21</sup> The difference is to be provided from the county budget – this being an incentive for the territorial units to be more active in the deinstitutionalization process.

<sup>22</sup> Article 352 of the Criminal Code provides for the following: “(1) Failure to comply with the measures taken for the prevention and combating of infectious and contagious diseases, if this resulted in the spreading of such a disease, shall be punishable by no less than 6 months and no more than 2 years of imprisonment or by a fine. (2) If the act set out in par. (1) is committed with basic intent, the penalty shall consist of no less than 1 and no more than

private centre for elderly persons in Galați a criminal file was open also for hosting more persons than the number allowed according to its documents on accreditation and functioning. As regards Păclișa case – the return from the hospital of the beneficiaries and employees infected – the criminal file is managed by the military prosecutors, due to the fact that at that time, the Deva Emergency Hospital was under military management.

In our view, the fact that the judiciary system reacted promptly (and is worth mentioning that the files were initiated *ex officio*) and that, according to information received, in none of these pending files exists any indication regarding a discriminatory medical approach applied to the employees of the centres as compared to the beneficiaries – represent additional proof on the non-existence of a breach of the rights indicated in the urgent appeal.

We consider relevant to mention also the responses provided by the autonomous institutions: the institution of the People’s Advocate – the National Preventive Mechanism under the Optional Protocol to the UN Convention against Torture (NPM) – the National Council for Combating Discrimination informed on their conclusions as regards to the cases envisaged by the urgent appeal.

The National Council for Combating Discrimination responded that so far (mid-June) there were no complaints registered with regard to the situations envisaged in the urgent appeal.

The NPM provided an extensive response, based on its demarches towards the GDSACPs of Suceava, Hunedoara and Galați counties and the Prefecture of the Suceava County – as part of its more extensive preventive action towards all public authorities in the country, undertaken since the beginning of the pandemic<sup>23</sup>. As regards the situation of the elderly persons, the institution of People’s Advocate made a recommendation to the National Committee for Emergency Situations<sup>24</sup> to increase the intensity of the protection measures on several key aspects: access of the employees in these centres, use of the protection equipment, elaboration of procedures regarding food supply, hygiene and contact with the beneficiaries. This recommendation was accepted and implemented by the authorities.

This mix of actors involved in the delivery of support for persons from these vulnerable categories creates challenges in maintaining oversight of the quality of services provided during the pandemic. However, there is no absolute “prescription” as to the best procedures and, for sure, there are no examples of absolute best practices that would cover all levels of decision and government regarding long-term care facilities. Currently, the international community is still at the point of sharing the experience in managing the pandemic. As mentioned in our response, Romanian practices were shared at the level of UN and at the Council of Europe level. During all

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*6 months of imprisonment or a fine.”* The prosecutors are investigating the ways in which the infection was spread in the centres and the conformity of the measures taken with the legislation in force.

<sup>23</sup> The NPM ceased its monitoring visits during the state of emergency. However, it had extensive correspondence with the authorities in charge of the residential centres on the following aspects, relevant for the situation of the residents: access to medical assistance, situation of deaths occurred during the state of emergency, measures taken in order to ensure the relation with the family, situation in the centres where difficulties were signaled (lack of equipment, insufficient personnel, provision of medicine, food, hygiene materials).

<sup>24</sup> National Committee for Emergency Situations is an inter-ministerial committee presided by the Minister of Interior during the state of emergency and by the Prime-minister during the state of alert.

this period, Romanian authorities strive to follow the general directions and recommendation issued at international level and the measures taken were by no means discriminatory.

In conclusion, the Romanian authorities acknowledge the importance of the aspects raised in the urgent appeal and, in general, the role of the UN special rapporteurs and experts, in monitoring the observance of the human rights enshrined in the UN conventions, especially during this unprecedented crisis generated by the COVID-19 pandemic. The measures taken show our commitment to observe the rights of the persons residing in these centres, while efficiently combating the spread of the COVID-19 disease.