

**On approval of the Rules for the provision of medical care to persons with tuberculosis sent for compulsory treatment**

***Unofficial translation***

Order of the Acting Minister of Healthcare of the Republic of Kazakhstan dated October 28, 2020, No. ҚР ДСМ-161/2020. Registered with the Ministry of Justice of the Republic of Kazakhstan on October 29, 2020, No. 21538

      Unofficial translation

      In accordance with paragraph 3 of Article 158 of the Code of the Republic of Kazakhstan dated July 7, 2020 "On public health and health care system" **I HEREBY ORDER:**

      1. To approve the Rules for the provision of medical care to persons with tuberculosis sent for compulsory treatment in accordance with the annex to this Order.

      2. To recognize as invalid the Order of the Minister of Healthcare of the Republic of Kazakhstan dated March 30, 2019, No. ҚР ДСМ-14 "On approval of the Rules for the provision of medical care to patients with tuberculosis aimed at compulsory treatment, and invalidation of some orders of the Ministry of Healthcare of the Republic of Kazakhstan" (registered in the State Register of Normative Legal Acts under No. 18482, published on April 14, 2019, the Reference Control Bank of Normative Legal Acts of the Republic of Kazakhstan in electronic form).

      3. The Department of Medical Aid Organization of the Ministry of Healthcare of the Republic of Kazakhstan, in accordance with the procedure established by the legislation of the Republic of Kazakhstan, shall ensure:

      1) state registration of this Order with the Ministry of Justice of the Republic of Kazakhstan;

      2) posting this Order on the Internet resource of the Ministry of Healthcare of the Republic of Kazakhstan;

      3) within ten working days after the state registration of this Order with the Ministry of Justice of the Republic of Kazakhstan, submission to the Legal Department of the Ministry of Healthcare of the Republic of Kazakhstan the information on the implementation of the measures provided for in subparagraphs 1) and 2) of this paragraph.

      4. Control over the execution of this order shall be entrusted to the Supervising Vice-Minister of Healthcare of the Republic of Kazakhstan.

      5. This order shall come into effect upon the expiration of ten calendar days after the day of its first official publication.

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*Acting Minister of Healthcare* *of the Republic of Kazakhstan*
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*M. Shoranov*
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|   | Approved by Order of the ActingMinister of Healthcare of theRepublic of Kazakhstandated October 28, 2020No. ҚР ДСМ-161/2020 |

 **The Rules for the provision of medical care to persons with tuberculosis sent for compulsory treatment**

 **Chapter 1. General Provisions**

      1. These Rules have been developed in accordance with paragraph 3 of Article 158 of the Code of the Republic of Kazakhstan dated July 7, 2020 "On public health and the health care system" (hereinafter referred to as the Code), and shall determine the procedure for providing medical assistance to persons with tuberculosis sent for compulsory treatment (hereinafter referred to as the Rules).

      2. The following concepts and definitions shall be used in these Rules:

      1) treatment - a complex of medical services aimed at eliminating, stopping, and (or) alleviating the course of the disease, as well as preventing its progression;

      2) refusal of treatment - the refusal of a patient diagnosed with tuberculosis, confirmed by a laboratory method, from treatment prescribed by a centralized medical advisory committee of a phthisiology-pulmonological organization;

      3) evasion of treatment - the violation of the treatment regimen prescribed by the centralized medical advisory committee of the phthisiology-pulmonological organization in the form of unreasonable omission of taking seven daily doses of anti-tuberculosis drugs during the calendar month recorded in the medical documentation;

      4) compulsory treatment - treatment of a person suffering from tuberculosis, carried out based on a court decision.

      3. In accordance with paragraph 2 of Article 158 of the Code, the grounds for compulsory treatment of persons with tuberculosis shall be:

      1) refusal to treat a person suffering from an infectious form of tuberculosis, recorded in the patient's medical records;

      2) unauthorized withdrawal and violation of the treatment regimen in the form of unreasonable skipping of taking seven daily doses of anti-tuberculosis drugs during the calendar month recorded in the patient's medical records.

      4. Compulsory treatment of persons with tuberculosis in accordance with paragraph 1 of Article 158 of the Code includes anti-tuberculosis and symptomatic treatment with isolation in phthisiology-pulmonological organizations and is carried out within the guaranteed volume of free medical care.

 **Chapter 2. The procedure for providing medical care to persons with tuberculosis sent for compulsory treatment**

 **Paragraph 1. The procedure for referring persons with tuberculosis for compulsory treatment**

      5. Persons with tuberculosis who have refused or evaded treatment are subject to compulsory hospitalization by a court decision based on the conclusion of the centralized medical advisory commission (hereinafter referred to as CMAC).

      CMAC shall be created as part of the consultative and diagnostic departments at the republican and regional (city) centers of phthisiopulmonology.

      The CMAC shall include the head physician, in the case of his/her absence - deputy head physician, heads of the organizational and methodological department, departments for the treatment of patients with tuberculosis, drug-resistant tuberculosis, a pharmacist (chemist).

      6. The medical documentation of patients with tuberculosis at the meeting of the CVCC of the phthisiology-pulmonological organization shall be presented by:

      1) phthisiatrician of an organization providing outpatient care at the place of registration - in case of refusal to hospitalize a patient with tuberculosis, with a diagnosis confirmed by a laboratory method;

      2) attending physician - in case of unauthorized care and violation of the treatment regimen in the form of an unreasonable omission of taking seven daily doses of anti-tuberculosis drugs during the calendar month recorded in the medical documentation.

      At the conclusion of the centralized medical advisory commission, the head physician of the phthisiology-pulmonological organization shall signs an application for compulsory treatment in two copies in the form in accordance with the Annex to these Rules.

      7. The following documents shall be attached to the application for compulsory treatment:

      1) conclusion of the centralized medical advisory committee of the phthisiology-pulmonological organization on the recognition of a person as a patient with tuberculosis;

      2) documents confirming the refusal and evasion of the patient from the treatment prescribed by the doctor;

      3) power of attorney for a representative of the phthisiology-pulmonological organization to participate in the court session, certified by the head physician of the phthisiology-pulmonological organization.

      The documents shall be sent to the court within 5 calendar days from the date of adoption of the opinion of the centralized medical advisory committee of the phthisiology-pulmonological organization.

      8. Materials on referral to compulsory treatment shall be considered by the court within the timeframes determined by Article 347 of the Civil Procedural Code of the Republic of Kazakhstan dated October 31, 2015 (hereinafter referred to as the Civil Procedural Code of the Republic of Kazakhstan).

      9. The decision on compulsory treatment of patients with tuberculosis and those who evade treatment, in accordance with paragraph 4 of Article 158 of the Code, shall be taken by the court at the request of healthcare organizations in accordance with the legislation of the Republic of Kazakhstan.

      10. Compulsory treatment of persons with tuberculosis who are released from institutions of the penitentiary system with incomplete treatment shall be carried out in accordance with the Rules for organizing anti-tuberculosis care in institutions of the penitentiary system, approved by Order of the Minister of Internal Affairs of the Republic of Kazakhstan dated August 19, 2014 No. 530 (registered in the State Register of Normative Legal Acts under No. 9762).

 **Paragraph 2. The procedure for providing medical care to persons with tuberculosis sent for compulsory treatment**

      11. A patient delivered to a phthisiology-pulmonological organization in accordance with part 4 of article 348 of the Code of Civil Procedure of the Republic of Kazakhstan, upon admission, shall undergo sanitization and examined by a doctor.

      A medical card (hereinafter referred to as the Medical records) shall be drawn up for the patient in the form determined in accordance with subparagraph 31) of Article 7 of the Code.

      12. Allocation to the wards shall be carried out taking into account the data of laboratory tests and drug sensitivity at the time of admission and in the course of treatment.

      13. The patient shall be assigned a regimen and treatment regimen in accordance with the decision of the centralized medical advisory committee of the phthisiology-pulmonological organization.

      14. Documents for a patient with tuberculosis, including drug-resistant tuberculosis, shall be submitted to a meeting of the centralized medical advisory committee of a phthisiology-pulmonological organization to prescribe an appropriate regimen and treatment regimen in compliance with infection control measures.

      15. The attending physician shall examine the patients daily, except weekends and holidays.

      On weekends and holidays, the examination shall be carried out by the medical staff on duty.

      16. The head of the department shall examine the patient on the day of admission, subsequently - for medical reasons and before discharge. The head of the department shall record the results of the examination of the patient with the diagnosis and recommendations in the medical record and sign them.

      17. Compulsory treatment of people with tuberculosis, including drug-resistant tuberculosis, shall continue until completion of the full course of treatment with favorable outcomes “cured” or “treatment completed”.

      18. In case of a decision of the centralized medical advisory committee of a phthisiology-pulmonological organization to terminate treatment of a person with drug-resistant tuberculosis, the patient must be transferred to organizations providing palliative care and nursing care.

      19. To prevent the unauthorized departure of patients from the phthisiology-pulmonological organization, as well as the entry of unauthorized persons into the territory of the phthisiology-pulmonological organization, the territory of the phthisiology-pulmonological organization shall be fenced off with a solid fence with a height of at least 2.5 meters and is provided with round-the-clock security and a video surveillance system. A separate fenced-in walking area for patients shall be allocated.

      20. Phthisiology-pulmonological organizations shall be equipped with the following engineering and technical means:

      1) main fencing of the territory;

      2) signaling;

      3) safe for storing documents;

      4) metal easily removable and opening bars on the windows;

      5) metal doors in all specialized and auxiliary premises;

      6) checkpoint with specialized security;

      7) video surveillance system.

      21. The territory of the phthisiology-pulmonological organization shall be guarded by a specialized security unit licensed for this type of activity (hereinafter referred to as the Security service).

      The security service shall organize the access control and provide external and internal security.

      22. Working personnel and administration shall be allowed on the territory of the phthisiology-pulmonological organization.

      23. The exit of patients from the territory of the phthisiology-pulmonological organization and the exercise yard shall be allowed accompanied by security guards and medical personnel for carrying out medical and diagnostic measures.

      24. Security service personnel shall assist medical personnel in the prevention and suppression of illegal actions of persons undergoing compulsory treatment, on the basis of an agreement concluded between the phthisiology-pulmonological organization and the security service.

 **Paragraph 3. Procedure for the discharge of persons with tuberculosis who are undergoing compulsory treatment**

      25. 10 calendar days before the patient is discharged, completing the full course of treatment with a favorable outcome, the attending physician and the head of the department shall specify the procedure for further dispensary observation.

      When a patient is discharged from a phthisiatrician, outpatient care at the place of residence shall be given a medical record, the last radiograph, and an extract from the inpatient's medical record in the form determined in accordance with subparagraph 31) of Article 7 of the Code.

      26. 10 calendar days before discharge/transfer of a patient who has completed treatment with the outcome of "failed treatment", the attending physician and the head of the department shall clarify the procedure for further palliative treatment.

      The patient shall be transferred to an organization providing palliative care and nursing on specialized medical transport by prior agreement with the receiving party, where an extract from the inpatient's medical record and radiographs shall be transferred.

      A medical record in the form determined in accordance with subparagraph 31) of Article 7 of the Code, a patient transferred to an organization providing palliative care and nursing care, shall be sent to the phthisiatrician of an outpatient clinic at the place of residence.

      27. The patient's medical record after discharge/transfer shall be checked, signed by the management of the phthisiology-pulmonological organization and submitted to the archive.

      28. Persons with tuberculosis who have undergone compulsory treatment, after being discharged, shall be registered with a phthisiology-pulmonological organization at their place of residence in accordance with paragraph 3 of Article 158 of the Code.

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|   | Annexto the Rules for the provision of medical care to persons with tuberculosis sent for compulsory treatment |
|   | The form |
|   | To the court of the \_\_\_\_\_\_\_\_\_\_\_ region, the cities of Nur- Sultan, Almaty, Shymkent |

 **APPLICATION FOR COMPULSORY TREATMENT**

      The patient \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

      (surname, name, patronymic (if any) of the patient/legal representative)

      \_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

      date of birth, resident at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

      consisting of at the dispensary with the "\_\_\_\_\_\_" \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_,

      with diagnosis: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

      Concomitant diseases: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

      Record of the disease: The patient \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

      described facts refusal or failure of the treatment) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

      \_\_\_ Conclusion of centralized medical-consultative commission of phthisiology-pulmonological organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

      Based on the above, in accordance with

      Article 158 of the Republic of Kazakhstan Code on

      July 7, 2020 "On public health and healthcare system", I hereby request to send:

      for compulsory treatment in phthisiology-pulmonological organization\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name) patient

      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

      (surname, name, patronymic (if any) of the patient/legal representative)

      Annex: materials on \_\_\_\_ sheets

      Head physician of a phthisiology-pulmonological organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_(region, city)

      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

      (surname, name, patronymic (if any)

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