

REGULATION BY THE COUNCIL OF MINISTERS

of 15 February 2011

On the National Programme for Preventing HIV Infections and Combating AIDS

By the virtue of art. 4 point 1 of the Act of 5 December 2008 on preventing and combating infections and infectious diseases among people (publication number Journal of Laws No. 234, pos. 1570, of 2009, No. 76, pos. 641 and of 2010 No. 107, pos. 679 and No. 257, pos. 1723) it is hereby ordered as follows:

§ 1. 1. The National Programme for Preventing HIV Infections and Combating AIDS, hereinafter referred to as the “Programme” is established.

2. The Programme is implemented in five areas:

- 1) prevention of HIV infections within the entire society;
- 2) prevention of HIV infections among persons with higher levels of risky behaviours;
- 3) support and healthcare for HIV positive persons and persons suffering from AIDS;
- 4) international cooperation;
- 5) monitoring.

3. Prevention of HIV, referred to in paragraph 2 point 1, consisting in particular of:

- 1) the promotion of healthy lifestyles in preventing HIV infection;
- 2) prophylaxis in the area of HIV/AIDS;
- 3) promoting responsible conduct and care for one’s own health as well as one’s partners;
- 4) promoting reliable and up-to-date information on issues related to HIV/AIDS;
- 5) minimizing risk factors.

4. Prevention of HIV, referred to in paragraph 2 point 2, consisting in particular of:

- 1) promotion of healthy lifestyles in preventing HIV infection;
- 2) prophylaxis in the area of HIV/AIDS;
- 3) changing attitudes and supporting responsible conduct and taking care of one’s own health as well as of one’s partners;
- 4) minimizing risk factors.

5. Support and health care, referred to in paragraph 2 point 3, consisting in particular of:

- 1) taking action against stigmatisation and discrimination of people infected with HIV;
- 2) maintaining and developing the motivation and skills necessary for an independent and active life;
- 3) organizing support in the social sphere, including the support from NGOs and other entities;
- 4) providing universal access to HIV/AIDS diagnostics
- 5) providing universal access to antiretroviral treatment operated and funded on the basis of the health programme established by the Minister of Health under the terms determined in the regulations on healthcare services financed from public funds;
- 6) prevention of disease progression;
- 7) preventing the effects of the disease;
- 8) increasing patient’s awareness of health and disease.

6. International cooperation, referred to in paragraph 2 point 4, consisting in particular of:

- 1) shaping international policy in the area of HIV/AIDS by active participation of a representative of the Republic of Poland in the activities of the international organizations dealing with issues of HIV/AIDS;
- 2) representing the Republic of Poland in the international organizations whose activities include issues related to HIV/AIDS;
- 3) the exchange of experience in the area of best practices based on existing knowledge.

7. Monitoring referred to in paragraph 2, point 5, serves to assess the implementation of the Programme and involves in particular:

- 1) the systematic collection and analysis of information on HIV/AIDS;
- 2) collecting and analysing information on planned and ongoing activities and tasks in the area of HIV/AIDS;
- 3) maintaining an IT database in the area of implementation of the antiretroviral treatment, referred to in paragraph 5 point 5;
- 4) maintaining an IT database, referred to in § 10.

§ 2. The goals and objectives in the areas of implementation of the Programme are determined by the Annex to the Regulation.

§ 3. 1. The implementation of the Programme is directed by the Minister of Health.

2. The coordinator of the implementation of the Programme is the National AIDS Centre, an agency subordinate to and supervised by the Minister of Health, responsible for the implementation of tasks related to preventing and combating AIDS, hereinafter referred to as "Coordinator".

§ 4. 1. The Coordinator, in cooperation with the entities responsible for implementing the Programme, develops a schedule for implementing the Programme, hereinafter referred to as "Schedule".

2. The Schedule includes, in particular, tasks whose implementation will affect the achievement of the objectives set out in the Annex to the Regulation.

3. The Schedule determines: the type of tasks, the entities responsible for their implementation, the year of implementation of tasks and indicators of their implementation.

4. The Schedule shall be determined for a period of 5 years.

5. The Coordinator shall prepare the Schedule and submit it to the Minister of Health by the 30 June of the year preceding the commencement of the implementation of the tasks included in the Schedule.

6. The Minister of Health shall submit the Schedule for the approval of the Council of Ministers.

§ 5. 1. The entities responsible for implementing the Programme are ministers proper according to the Programme goals.

2. The entities obligated to implement the Programme are also the local government authorities and their subordinate units.

3. All the entities which participate in the implementation of the Programme under separate provisions are required to develop and implement strategies in the area of social policy including programmes of welfare, family policy, health promotion and protection

programmes, prevention and alcohol related problem solving programmes, drug abuse and public education.

4. Entities which carry out activities enabling the undertaking of tasks resulting from the Schedule or conducting actions supporting the implementation of the Programme may also be involved in the implementation of the tasks of the Programme.

§ 6. 1. The entities obliged to implement the Programme, on the basis of the Schedule, develop detailed annual schedules of the implementation of the Programme tasks, called hereinafter “the annual schedules” for the following year, which they submit to the Coordinator by 15 October.

2. The coordinator prepares annual schedules in an aggregate form and submits them to the minister of health by 15 November.

§ 7. 1. The entities responsible for implementing the Programme provide the minister of health with an annual report of the performance of tasks included in the annual schedules by 15 April.

2. The Coordinator prepares annual schedules in an aggregate form and submits them to the minister of health by 15 May.

§ 8. 1. The entities responsible for implementing the Programme provide the minister of health with a report of the performance of tasks included in the Schedule along with a summary of that period by 15 April.

2. The Coordinator prepares a report of the performance of tasks included in the Schedule along with a summary of that period in an aggregate form and submits it to the Minister of Health by 15 May.

3. The report, referred to in paragraph 2, is presented to the Council of Ministers for approval by the Minister of Health.

§ 9. 1. The entities, referred to in § 5. points 2-4, assemble, for the duration of the Schedule, teams for the implementation of the Programme, hereinafter referred to as “teams” in order to integrate the implementation of tasks set out in Schedule.

2. The teams coordinate, within a province, the measures resulting from annual schedules and cooperate with the Coordinator in this regard.

3. The teams are appointed no later than 3 months prior to the development of first annual schedules.

§ 10. 1. The monitoring system of the Programme implementation is used to collect data from the entities implementing the Programme concerning the areas defined in § 1 point 2.

2. The monitoring system, referred to in point 1, includes the information on:

1) the entities responsible for implementing the Program and participating in its implementation;

2) the performed tasks (the level of financing, the date of implementation, and their scope);

3) actions directed at a specific target groups;

4) consistency with other statutory programmes.

3. All the entities involved in the implementation of the Programme are required to enter the information referred to in paragraph 2 into the monitoring system.

4. The entities involved in the implementation of the Programme enter into the monitoring system:

1) The annual schedules referred to in § 6 point 1;

2) The report referred to in § 7 point 1.

5. Access to the monitoring system is valid after obtaining an individual password from the Coordinator.

6. The monitoring system is run by the Coordinator.

§ 11. On the basis of existing regulations resulting from “The Schedule for Implementation of the National Programme for Combating AIDS and Preventing HIV Infections for the years 2007-2011” particular tasks are implemented as well as reports drawn up.

§ 12. The Regulation shall enter into force 14 days after the date of its publication.¹⁾

Prime Minister: *D. Tusk*

¹⁾ The regulation hereof was preceded by the regulation by the Council of Ministers of 13 September 2005 on the National Programme for Combating AIDS and Preventing HIV Infections (publication number Journal of Laws No. 189, pos. 1590), which shall be repealed upon the entry into force of this Regulation, by the virtue of art. 68 of the Act of 5 December 2008 on preventing and combating infections and infectious diseases among people (publication number Journal of Laws No. 234, pos. 1570, of 2009, No. 76, pos. 641 and of 2010 No. 107, pos. 679 and No. 257, pos. 1723).

ANNEX

MAIN GOALS AND DETAILED OBJECTIVES WITHIN THE AREAS OF IMPLEMENTATION OF THE NATIONAL PROGRAMME FOR PREVENTING HIV INFECTIONS AND COMBATING AIDS

No.	FIELDS	GOALS	OBJECTIVES
1	2	3	4
I	Prevention of HIV infections within the entire society (primary prevention)	1. reduction of the spread of HIV infection	a) increasing knowledge about HIV/AIDS in the general population and changes in attitudes, with particular emphasis on responsibility for one's own health and life
			b) developing and strengthening the training and education targeted at different social and professional groups
		2. ensuring adequate access to information, education and services	a) expanding the range of information tailored to individual recipient needs
			b) improvement of care of women of reproductive age and pregnant women
		3. updating the law in effect in the field of HIV/AIDS	c) increase of the availability of anonymous and free HIV testing
			d) increase and integration of activities aimed at preventing HIV and other sexually transmitted diseases
			a) alignment with the current legal status of HIV/AIDS as per international and EU obligations adopted by Poland
II	Prevention of HIV infections among persons with higher levels of risky behaviour (secondary prevention)	1. reducing the spread of HIV infection	b) legislative initiatives aimed at creating or updating legislation on HIV/AIDS
			a) increasing the knowledge about HIV/AIDS in order to reduce the level of risky behaviour
		2. development of the	a) improving the quality and

		VCT network performing anonymous and free	availability of diagnosis of HIV infection for people exposed to HIV
		HIV tests along with counselling	b) improving epidemiological data collection about the manner of HIV infection and risky behaviour
		3. providing adequate access to information, education and services	a) widening the offer of information and education tailored to individual customer needs
		in the area of HIV/AIDS prevention	b) supporting activities aimed at health related harm reduction
III	Support and healthcare for HIV positive persons and persons suffering from AIDS	1. quality of life improvement in the psychosocial sphere of HIV positive persons and persons suffering from AIDS	a) improving quality of life and functioning of people living with HIV/AIDS, their families and relatives
	(tertiary prevention)	quality of life improvement in the psychosocial sphere of HIV positive persons and persons suffering from AIDS	b) increasing the level of social acceptance towards people living with HIV/AIDS, their families and relatives
		2. improving the quality and availability of diagnostics and healthcare for HIV-infected	a) improving the existing medical healthcare system for people living with HIV/AIDS
		patients, patients with AIDS and those vulnerable to HIV	b) improving the system of care of people exposed to HIV infection
		3. vertical infection prevention	a) improving the care for women of reproductive age, pregnant, or breastfeeding
			b) improving the system of care for children living with HIV/AIDS, and born to mothers living with HIV
IV	International co-operation	development of international cooperation	a) expanding international cooperation in the area of HIV/AIDS
			b) active Polish participation in planning, developing and coordinating international policy on

			HIV/AIDS
			c) active Polish participation in the work of international institutions and organizations
			d) expansion of international cooperation to improve the quality of life of people living with HIV/AIDS, their families and relatives
V	Monitoring	improving monitoring of the epidemiological situation and activities and tasks related to HIV/AIDS	a) improving the detectability of epidemiological surveillance of HIV infections, AIDS incidence and mortality of people living with HIV/AIDS and other sexually transmitted diseases, including accordance on the notification system
			b) improving surveillance of activities and tasks related to HIV/AIDS
			c) informative support of the implementation of the Programme of HIV/AIDS Prevention
			d) informative support of the implementation of ARV treatment