

population, conduct search and investigative work with saboteurs, as well as combat looting. According to Yevhen: "When a full-scale war began in Ukraine, police officers do their work in all directions: who burns tanks, who fights, who helps civilians, who feeds them, who evacuates people... That's why we showed our true face" [3].

Police officers have shown that they can maintain internal order, from interacting with the military command to cleaning up cities after liberation from the Russian occupiers, while joining the established patrol police regiment on a voluntary basis. Police officers really show how qualified they are, performing their direct professional duties and even more than the people of Ukraine could expect.

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COMPENSATION FOR DAMAGES AS A RESULT OF MEDICAL NEGLIGENCE ON THE EXAMPLES OF UKRAINE AND SWEDEN

In the context of exercising the patient's right to compensation for damage caused by the provision of medical services, many problems arise due to the lack of an effective mechanism for protecting patients' rights in the current national legislation. At the legislative level, there are a number of gaps that create obstacles to the realization of citizens' rights to health care [1, p. 5]. Therefore, by analyzing the compensation for medical malpractice in Sweden, we will be able to use this experience in our country.

Sweden has a significant number of regulations governing the relationship between a healthcare facility and a patient. Thus, the legal status of a patient in Sweden is regulated in detail by special regulations, unlike in Ukraine, where the specifics of the liability of healthcare facilities for harm caused to patients are not addressed by the legislator.

Sweden is one of the countries that has recognized the "risks" of medical activities at the legislative level and introduced the principle of liability of a medical institution to a patient even in the absence of direct fault in causing damage.

Sweden's healthcare policy is based on the introduction of compulsory civil liability insurance for healthcare providers. Thus, despite the fact that compensation for damage caused to patients is regulated by tort law in most countries, Sweden has chosen a different model - "no-fault liability insurance."

These issues are regulated by the Swedish Act on Damage to Patients, which contains provisions on the patient's right to compensation and the obligation of healthcare professionals to insure their civil liability to patients. A patient is entitled to compensation for damage to health if there is a possibility that the damage was caused during the initial examination, treatment, etc.; or if the damage could have been avoided by choosing another method of treatment that would be less risky from a medical point of view; failure of medical equipment used in the examination, care or treatment; incorrect diagnosis; infection during a medical examination, treatment or similar activities; an accident during examination, care, treatment or transportation of the patient or as a result of fire or other damage to the equipment; use of medicines in violation of the instructions.

Thus, today the health care system in Sweden is recognized as one of the most advanced, not least because of the existence of an effective mechanism for compensating for harm caused to a patient during medical care. Thanks to the Swedish model of "no-fault insurance," there are no patient lawsuits in Swedish courts seeking compensation for damage to the patient's health [2; 278-280].

In Ukraine, there is no special legal regulation of the issue of compensation for damage caused by medical negligence; these issues are regulated by the general provisions of the Civil Code of Ukraine. It is impossible to compensate for damage to health. The unique characteristics of health do not always make it possible to return to the state that existed before medical intervention. For the most part, this damage is irreparable. Therefore, the main task of civil law is to determine a fair procedure for monetary compensation for affected patients [3].

Secondly, the civil legislation of Ukraine provides for compensation by a legal entity (including a medical institution and its medical staff) or an individual (a medical professional - entrepreneur) for damage caused in the performance of their labor (professional, official) duties. By the way, in case of injury or other damage to health, the organization or individual responsible for the damage is obliged to compensate:

- 1) the victim's earnings (income from labor activity) lost as a result of the loss or reduction of ability to work, as well as reimburse additional expenses for treatment, purchase of medicines, prosthetics, constant care, enhanced nutrition, sanatorium treatment, etc. caused by the injury;

2) in case of death of the victim - to disabled persons who were dependent on the victim or had the right to receive maintenance from the victim on the day of his/her death (including a child born after the death) - the share of the victim's average monthly earnings that fell to these persons or to which they were entitled under the current legislation;

3) in case of injury to the health of a minor under 14 years of age (students - 18 years of age) and not earning at the time of the injury, the necessary expenses for treatment, prosthetics, permanent care, etc. related to the injury. After the victim reaches the age of 14 (students - 18) - damage related to the loss or reduction of their ability to work, based on the minimum wage established by law, and after the victim starts working, the compensation may be increased (at their request) based on the amount of remuneration of an employee of their qualifications. If such a minor had earnings at the time of the injury, the compensation is based on the amount of his or her earnings, but not lower than the minimum wage (earnings).

Thirdly, every injured consumer of healthcare services has the right to claim compensation for damages, regardless of whether they had a contractual relationship with the manufacturer (performer, seller) of these services. In addition, under the current civil law of Ukraine, damage caused by defects in services (works) is subject to compensation by their performer.

Fourthly, in case of injury to health, not only material damage or losses are compensated, but also moral (non-pecuniary) damage, the procedure for compensation of which is somewhat different from the procedure for compensation of material damage. Along with compensation for property damage, the patient or other interested parties are entitled to compensation for moral or non-pecuniary damage. Moral (non-pecuniary) damage is defined as moral (mental) and physical suffering suffered by the victim as a result of the unlawful actions of another person.

The legislative definition of non-pecuniary damage is given in Article 23 of the Civil Code of Ukraine and is disclosed through the forms of its expression. In the case of improper treatment, non-pecuniary damage may be manifested in physical pain and suffering suffered by an individual due to injury or other damage to health; as well as in mental suffering suffered by an individual due to unlawful behavior towards him or her, members of his or her family or close relatives.

In Ukraine, compensation for non-pecuniary damage is the most effective compensatory measure of civil liability that can be applied to a medical institution. In fact, it is the right to compensation for moral damages in Ukraine that compensates patients or their relatives for the lack of an effective mechanism for compensation for material damage caused by improper treatment. At the same time, the amount of moral compensation is insignificant, as we will see further on the example of judicial practice of compensation for health damage in Ukraine [4].

Thus, Sweden has chosen the path where insurance allows compensation to a patient even in the absence of a direct causal link between the actions of a healthcare

professional and the harm, while in Ukraine, despite the existence of legal provisions that allow compensation for the loss of the patient, judicial protection is ineffective, long-term and with insignificant amounts of compensation. It is noteworthy that in Ukraine, unlike other countries, there are no special rules that would determine the specifics of the burden of proof in medical malpractice disputes.

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THE MAIN CHARACTERISTICS OF THE ACTIVITIES OF LAW ENFORCEMENT AGENCIES OF THE UNITED KINGDOM

The law gives the police forces several powers to carry out law enforcement. The Home Office tracks the following powers: arrests, detentions, stops and searches, road checks, intimate searches (like drug searches), fixed penalty notices (for motoring offences) and breath tests.

The main detachment of the British police are constables. They have the right to arrest and search the suspect. Most of them serve in the territorial police. They are also represented in special units: the Transport Police, the Military Police and the Police for Peaceful Atoms

Many regulations allow the employment of constables for specific purposes. This is how the police for the protection of ports and docks, tunnels and forests appear.

If ordinary constables deal with minor criminal offenses, then detectives - employees of the Criminal Investigation Department (CID) - are engaged in the disclosure