Health Coordination Meeting,
21 March 2022

Dear Partners,

To generate a clear overview of who is doing what on the ground, we kindly ask you to take the time to fill in the attached questionnaire (Excel sheet) and to kindly return it to EUPOLHealthCoordination@who.int, our generic email inbox.

Please share any health-related assessments with WHO and indicate if we are allowed to publish them or not.

General Information:

- MoH and Health Fund agreed to participate at the next meeting on 28th March
- OCHA opened data portal page for the refugee response in Poland.
- On 18th March: In the first two days of registering Ukrainians by the authorities 82,500 Ukrainians got Polish personal identification number, with which they may i.e. work legally in Poland. The government’s representative for the cybersecurity said that it would take approx. two months to register all Ukrainian refugees staying in Poland.
- Funding of the POL Health Care fund: PLN 9.25 billion for health services. Next week, the Health Committee will deal with the amendment of the financial plan of the National Health Fund for 2022. There will be more money for health services - by over PLN 9 billion.
- UNHCR and PCPM have started also a multi-purpose cash program for UKR refugees in Poland. It started in Lublin, then it will be extended to Warszaw and Rzeszow, lasting for 3 months. Intension is to bridge the time till the Government funding for refugees is fully in place. PCPM plans also cash for work programs for refugees in Pol, incl in social services, school enrolment and psychological support, and also to introduce the PESEL social security number to all refugees.
- Because of suboptimal hygienic conditions on the way to the POL border and in reception centres there is an outbreak risk of typhus. WHO is inquiring which labs are able to test for typhus in UKR and POL.
- From MEDAIR: NGOs, please indicate the salary rates for hired medical staff from UKR in POL and report it to MEDAIR Heidi Giesbrecht heidi.giesbrecht@medair.org;

Info from WHO

- WHO health coordination launched a generic email: EUPOLHealthCoordination@who.int, please use that email when you wish to contact WHO or the coordination team.
- WHO initiated the contact with the International Association of Gynaecologists and Obstetricians (FIGO) to collect information on needs on maternal and child health, particularly on pregnant women, women in labour and newborns. They are willing to donate UNFPA reproductive kits and provide other support according to needs. Please advise if you work in that field.
• Upcoming WHO mission for Civil Society Organisations, 22-28 March,
  o Outcomes: meetings with INGOS (Hope, Care, Medair, Pol Red Cross) and Polish civil societies, to get an overview and on needs and check how to support in future.

Licensing Ukrainian doctors/nurses in Poland

• MOH Announcement on the rules of employment of medical personnel from Ukraine in Poland.
• The key to a fast licensing, to circumstance the normal lengthy procedure, would be to use “the right to practice a conditional profession in an entity providing health services to patients suffering from COVID-19” and argue that Ukrainian refugee/ migrants flow represents another emergency (like COVID) requiring rapid and flexible response.
• This provision is temporary and will be faster and more relevant since it does not require Polish language test that is otherwise required.

Licensing foreign Doctors/nurses in Poland

• We contacted the legal counsel at the regional Chamber of Physicians and Dentists, and the legal counsel at the regional Chamber of Nurses.
• Even though a new law was passed opening access to practicing medicine in Poland for Ukrainian doctors and nurses, physicians and nurses from non-EU countries, still have to apply to the regional Chamber of Physicians and Nurses for a permission to practice medicine.
• The telephone number of the Chamber for Physicians and Dentists is 17 717 77 17.
• This involves submitting evidence of diploma in medicine, good command of Polish language, proper ethical conduct etc. All documents would have to be in Polish or translated to Polish by a licenced translator.
• The fastest way is contacting the Ministry of Health (Department Rozwoju Kadr Medycznych, Tel.:0048 22 6349 858) who is handling the matters of foreign physicians in Poland and may grant permission to foreign physicians.
• Please liaise also with UNHCR who also held a briefing on this topic, 16 March 2022 (sacher@unhcr.org).

Maternal and child health

• There have been more than 4,300 births since the start of the war in UKR and it’s estimated that about 80,000 (UNFPA) Ukrainian women will give birth over the next 3 months.
• Disruption of antenatal care may increase the risk of obstetric and neonatal care complications, including the reduced ability to manage procedures like caesarean sections or neonatal intensive care in UKR.
• CARE published an assessment on gender analysis on Friday, highlighting the needs in this sector. CARE’s Rapid Gender Analysis on Ukrainian Refugees in Poland
• As mother and child health at border points/reception centres is not well-established, CARE was linked with the French NGO ‘Corridor Citoyen’ which is in close contacts with the Association of Gynaecologists and Obstetricians (FIGO) to discuss delivery of supplies and support to border points and hospitals.
• FIGO is a federation of over 130 OBGYN societies from around the world and want to support women and children in the humanitarian crisis facing Ukraine. FIGO is to arrange donations through member societies and can provide medical, surgical, OB supplies. Planned
is to purchase UNFPA standard kits to UKR and POL. WHO can offer to facilitate further logistics.

- Through FIGO, American hospitals might be willing to take high risk pregnant women.
- Implementing partner could be Corridor Citizen humanitarian response looking with partners on Logistics: Taking material to border and then finding ways to get supplies into Ukraine. Evacuating individuals to France and French municipalities and determining who has capacity.

**Logistics/Supply donation guidance:**

WHO has issued guidelines for supply donations to support the Ukraine emergency response, including a list of critical supplies for which support is urgently needed. The Guidance Note for Medical Supply Donations is now available on the WHO website.

**Referrals of UKR patients to POL or elsewhere**

During the UKR Health Cluster meeting on Tuesday a request was shared about evacuation of a psychiatric hospital in Kyiv of 700+ sick (60 disabled) people from Kyiv City Psychiatric Hospital №1. Sixty of them are bedridden. WHO is in contact with EU to find solutions.

As for 80 dialysis patients the health authorities in Rzeszow were ready to receive them for 2 days and stabilize them for further transport to Germany.

The City Special Home for Children in Odessa requested the evacuation of nearly 100 disabled and sometimes terminally ill children, whilst the security situation around the city is fragile. WHO is meeting with MOH and EC and is waiting for nomination from EC.

There is already a very good network established between MoH in Poland with regards to pediatric referrals/transfer from UKR to Poland and within Poland, and if needed into other countries.

**Patient Transfers requirements:**

- MOH UKR needs to define needs, conditions and number of patients and which services they require. This will be done through UKR health cluster and UKR office of WHO.
- MOH UKR needs to translate medical documentation regarding transport of patients from Ukraine to Poland. This depends on also where they are originating in Ukraine.
- Lviv is the Ukrainian hub for patients who should be sent to other countries.
- Clinical contact points in Poland and in WHO will discuss further options available.
- If you get patient referral requests from UKR and you need support please contact EUPOLhealthcoordination@who.int.

**HIV/AIDS**

Estimated number of people living with HIV/AIDS in UKR is 250,000, estimated prevalence is 1% - 1 in 100 refuges might need ART treatment. WHO recommends a multi-month dispersement of ART – a take-home dose for 3-6 months, per person.

- WHO is estimating the specific drug needs for procurement in POL and in the neighboring countries.
- A letter from WHO EURO to MOH Poland is sent, stating that WHO will fund and procure HIV/AIDS drugs for the needs of refugees in Poland and neighboring countries.
MHPSS

• The working group continues to function with UNHCR co-leading alongside WHO with 50+ members from different agencies.
• Meetings have been held with relevant Ministry of Health officials in Poland to provide support and guidance regarding what is needed for MHPSS.
• Coordinating with UKR MHPSS working group for mental health and psychosocial support during humanitarian emergencies.
• Published psychological first aid in Polish as of 21 March 2022.
• UKR patients in need of mental health care (clinical or ambulant) and need to take drugs cannot get them here in POL. MOH is working with WHO on clearing the UKR drugs on the Polish side.

Outbreak investigation

Please report any suspected outbreak to WHO via the generic email: EUPOLHealthCoordination@who.int

Suspected lice and scabies

On 16th March at the OCHA coordination meeting there was information given about a possible outbreak of lice infestation and scabies at reception centres, particularly in the Tomaszow Lubelski Reception Point.

Actions:

• WHO reached out to the major of the city Tomaszow Lubelski and to the head of the medical point there.
• MEDAIR kindly agreed to visit the reception centre at the Stadium in Tomaszow Lubelski and at a school at Wyspiańskiego 8 and the medical points there. They met with the health team and director and did key informant interviews with the manager, health team, and other volunteers, and examination of all residents in this small centre with any skin complaints. None were consistent with scabies.
• Outcome: Not the majors office, nor the medical points, nor the people accommodated in the centre reported any symptoms or suspicion of lice or scabies.
• However, since hygienic standards are quite low in most reception centres (i.e. rare washing of bedsheets) the likelihood of spreading such diseases is high and symptoms are only appearing after 4 to 8 weeks after infection.
• MEDAIR kindly agreed to preposition the drug Ivermectin and is in the process of procuring it.

Rota virus

• Baby with an infection has been found at Korchova and isolated (difficult to isolate due to open space of reception center).

COVID-19

• The incidence of COVID-19, although decreasing, remains very high, while vaccination uptake, particularly in vulnerable populations, remains low. This, along with disruption in testing and treatment, puts those most vulnerable at increased risk.
• No solution for people who test positive in reception centres to isolate and quarantine.
• Isolation area must be created in order to prevent further transmission.
• POL Government is providing free COVID-19 vaccines

**Communicable diseases**

• Refugees from Ukraine are at elevated risk of infectious diseases, as living conditions during transit or upon arrival may increase the risk of transmission and/or susceptibility to disease, including vulnerability due to poor shelter and overcrowded living conditions and exacerbating factors such as nutritional stress and exposure to cold weather.
• Outbreaks of respiratory and diarrhoeal infections are reported in the reception centres.
• Ukraine has some of the highest burden of chronic infectious diseases in Europe, particularly HIV and Tuberculosis (TB)/Multi-drug resistant (MDR)-TB.
• Shortages of medical supplies, challenging access to essential health services, and the interruption of prevention, diagnostic and treatment services pose a severe threat of adverse outcomes from these conditions.
• Treatment protocols of HIV/AIDS and TB differ in UKR and POL and WHO is going to purchase UKR used drugs to continue the treatment which started in UKR.

• ECDC has developed an operational guidance for the prevention and control of infectious diseases in the context of increased migrant/refugee flows linked to the Ukraine crisis. The main communicable diseases health threats that have been identified by ECDC are vaccine preventable diseases (with Poliomyelitis and measles on the top priorities), COVID19, and risk of antimicrobial resistance for conflict-related patients [Homepage | European Centre for Disease Prevention and Control (europa.eu)]

**Vaccination**

• Poland has published a law which requires that Ukrainian children intending to stay longer than 3 months in Poland need to be immunized according to the Polish vaccination calendar.
• Measles in Ukraine that started in 2017 and reached a peak in 2019 reflecting the prolonged and persisting suboptimal vaccination coverage with measles containing vaccines.
• Another concern is the outbreak of circulating vaccine-derived poliovirus type 2 (cVDVP2) that Ukraine has been experiencing since September 2021. The affected Oblasts are Rivne (in North-West Ukraine) and Zakarpattya (in South-West Ukraine).
• As of February 25, 2022, there have been two detected paralytic cases and 19 isolations of VDPV2 from asymptomatic contacts.
• Together with UNICEF, WHO is working on provision and purchase and logistics of bringing childhood vaccinations to Poland.

**WHO kindly requests that NGOs report immediately if they see any active cases of Polio.**

**Vaccination calendars of UKR and POL**
Q&A and further discussion

Stefan Hoyer

- Need for doctors/midwives who are able to go also to the other side of the border to assess pregnant women and newborns.
- Work with health cluster coordinator to get needs assessment rolling.
- Still possible for volunteers to travel to Lviv or Kyiv into Ukraine?
  - General WHO recommendation: not to send additional people to Ukraine
  - Support for the idea of trained nurses or midwives around the border to support women in labor, women with complications and infants

NGO Natan

- Continues to serve from the Ukrainian and Polish side alongside with the Polish Red Cross and they are linked with local hospitals throughout the area
- Difficult to register patients individually to ensure continuity of care
- Developed an App which takes people through healthcare, need to find a donor through WHO and the health sector
- Propose referral mapping that organisations who are working in other sectors within shelters/accommodation centers may be trained for referrals
- Working alongside UNCHR, etc. regarding protection measures

UNHCR – Sandra Harlass

- Rolling out a cash program (started 21st March) which will expand from Warsaw to other cities
- Blue Dot Concept implementation jointly with UNICEF including Blue dots, including cash points and distribution of WHO prepared health information leaflets and health questionnaires for refugees.
- Combined response in the MHPSS component and health referral component to support refugees in finding the care or treatment they need.