# Notes of the Meeting minutes of the Health Coordination Meeting

11th April 2022

NEWS: Translation into Polish from now on in ZOOM, including meeting minutes

Wiadomość: uruchomiliśmy drugą ścieżkę dźwiękową z tłumaczeniem na język Polski.

# **Corrections on UNHCR support for registration of NGOs**

In previous health Sector meetings and notes it was stated that UNHCR held a briefing on the licensing of foreign health professionals in Poland.

Correction: The briefing on 16 March was facilitated by the **NGO Forum**, aimed at registering international NGOs in Poland. The resulting guidance material can be accessed on the Poland Data Portal [click here for more information]

#### General Information:

- Based on information provided by UNHCR (10/04) over 4.622 million people have fled Ukraine, more than 7.1 million are displaced, and 13 million people are stranded in inaccessible areas.
- More than **537,000 people have crossed back into** Ukraine since 24 February. This is potentially creating new challenges for the humanitarian response as people will need support to reintegrate into their communities or find suitable host communities if returning to their homes is no longer a viable option.
- PESEL system dated 5.04.2022: 741 000 assigned PESEL numbers
- Refugees population data from PESEL system:
  - children 49.1%,
  - women age 18-65 44.4%,
  - men age 18-65 3.2%,
  - eldery >65 3.2%
- Leaflets with health related information:
  - a. The President's office issued a leaflet, available in 4 languages, where it is stated that **for all health issues patients** should call **800 190 590** [click here].
  - b. Wyborcza.pl has made a brochure **for Ukrainian Mothers in Poland** with useful information on every big city. Not specifically health oriented, rather general, but they do have some information on health as well [click here].
  - c. **Leaflets with contact information for health institutions** for larger cities in Poland can be found on the UNHCR data portal [click here].
  - d. Search mechanisms for medical facilities:
     NFZ (National Health Fund) search engine, Polish only [click here]
     DaVita shared a search mechanism where dialysis service providers are listed [click here]
     Dentists for Ukraine search [click here]

# MOH updates:

1. An earlier existing procedure of issuing fast-track authorisation for non-EU doctors for working with Covid patients allows continuing working in Poland, now helping refugees. [source]

- 2. Facilitations for doctors and nurses from Ukraine: documents in six months. The Ministry of Health has introduced facilitations for those who crossed the Polish border after February 24 this year. Refugees, who are representatives of medical professions, can present documents such as a diploma of graduation and obtaining a specialist title in the form of a copy. A list of institutions which hire is provided. [source]
- 3. 237 representatives of medical professions came to POL, including 41 doctors and 11 nurses [source]

# MoH for persons undergoing psychiatric treatment

- To buy the **medicaments** in a pharmacy, a prescription from a doctor is needed. This may be a psychiatrist or a primary care doctor (the doctor must have a contract with the National Health Fund).
- Use the National Health Fund's free 24-hour helpline 800 190 590 to find out where the nearest doctor is (doesn't have to be a psychiatrist, can be a general practitioner).
- If the patient has a **PESEL number**, the doctor can issue an electronic prescription. If one don't have a PESEL number a printed prescription will be received.
- Reimbursement (medicaments in reduced prices, co-financed by the Polish state) under certain conditions.

EC communication: Welcoming those fleeing war in Ukraine - readying Europe to meet the needs

## For the details, click here

- 4. ACCESS TO HEALTHCARE Many of those fleeing the war against Ukraine are arriving in Europe in a vulnerable state of health.
  - The Temporary Protection Directive underlines the **rights of those under its scope to social** and medical care, including mental health care.
  - This will also call for **clear information for arrivals** on the procedure and conditions for access to healthcare.
  - The Commission will explore how the qualifications of Ukrainian healthcare workers can be recognized.
  - The immediate **priority is to treat those in urgent need of specialized hospital treatment** and care, whether emergency care or treatment for chronic diseases.
  - The Commission has set up a **solidarity mechanism for intra EU medical transfers** from the Member States bordering Ukraine, where healthcare systems are under particular pressure.
  - 10 000 places have already been made available by Member States, including places for cancer
    and burns patients, as well as pediatric wards, and beds for new-borns and their mothers.
     Vaccines, medicines and medical equipment including ambulances have also been delivered
    to Member States under pressure.
  - The Commission invites Member States to make full use of the new Standard Operating
    Procedures for medical transfers using the Early Warning Response System under the
    mechanism. These allow Member States to request support for the effective and secure
    transfer of the patients' health records, and outline the key components to be addressed –
    such as the condition, the need for treatment, and the family situation.
  - Medical supplies are a key part of the work of the Union Civil Protection Mechanism (UCPM)
    to support Member States. While the receiving Member State covers the cost of treatment
    and care of incoming patients, medical evacuations and delivery of medical supplies can be
    supported and cofinanced by the UCPM.

- To help speed up medical transfers of patients, the Commission, in close coordination with Member States and WHO Europe, is ready to support the set-up of triage hubs in most affected Member States for patients directly at the border to make a first diagnosis, determine the urgency and identify hospitals for referral.
- The UCPM can also help Member States to deploying medical personnel on the ground.
- The European Centre for Disease Prevention and Control (ECDC) is monitoring the health situation on a permanent basis.
- Vaccination coverage in Ukraine is low compared to the EU, particularly for tuberculosis, polio, measles and COVID-19. Standard child vaccination should be considered a priority and dedicated vaccination campaigns would help national healthcare professionals to roll this out.
- The Commission's Health Emergency Preparedness and Response Authority is supporting the procurement and **supply of vaccines**.

## RRP:

1. Provision of primary health care services- Individuals

# proportion of the aware target population who know how to access the services.

Target: 50% refugees

2. Outbreak prevention and response - individuals

# Ukrainian Children vaccinated against Measles-containing-vaccine first-dose (MCV1)

Target: 95%

# Ukrainian refugee Children vaccinated against Poliomyelitis -

Target: 95%

3. Sexual and Reproductive Health services – individual

# of pregnant women accessing prenatal care

Target: 100%

4. MHPSS support - individuals

# MHPSS sessions provided to adults

# MHPSS sessions provided to children and adolescents.

Target: 22%

5. Capacity building of health professionals staff - individual

# Health care worker capacity building events held by partners related to the UA emergency (e.g., MHPSS, Ewar, disabilities, immunization, TB, HIV) for health care workers in Poland Target: 3,000 Health care workers trained

### Surveillance and EWARN

- currently there are ongoing discussions on approaches to extend the coverage of the national
  infectious disease surveillance system to ensure that event of public health concerns, no
  matter where they occur in Poland are captured by the system.
- cases of outbreaks of polio in Ukraine and known

- outbreaks can be prevented by vaccination, therefore it is especially important to stress that
  there are efficient and safe vaccines that could be delivered to the Ukrainian population in
  Poland.
- local authorities do investigate outbreaks that are reported at the reception center and accommodation centers,
- in a week we should have more updates on the extension of the national system.

#### TB:

- Ukraine is one of the 18 high burden countries for tuberculosis in the WHO European region and one of the 13 countries with high burden of multi-drug-resistant tuberculosis, in the global list [source]
- Before the war, Ukraine has been pioneering and tuberculosis response, and especially with significant decline in tuberculosis incidents and mortality. However, the burden of tuberculosis remained: ~ 4500 patients, with 1/3 of multidrug resistant patients.
- Estimation: based on # of people crossing the border, there should be around 800 people with tuberculosis, out of which around 200 patients with multi drug resistant tuberculosis. A number of multidrug resistant patients remaining in Poland will require continuation of treatment with the same regiment
- These calculations have been shared with partners in other European countries. A survey on availability of medicines for tuberculosis, including multi drug resistant TB, is done across European countries. No issues within Europe with medications, but for multidrug resistant some of the medications are either not available, or the stocks are limited.
- In Poland: WHO are working on establishing an emergency stock of medicines, incl. multi-drug resistant tuberculosis. The Minister of Health granted the possibility of procuring medicines for humanitarian purposes that are not registered in the EU. WHO will ensure the procurement of medicines through the GDF global drug facility in partnership with Tokyo for medicines that WHO qualified, or the ones approved by the stringent right regulatory authority. This is a mid-term solution that we're working on the immediate solution for those people who are in need. WHO has support from MSF, who is also trying to support the newcomer patients in the country
- Compulsory screening for tuberculosis disease among refugees is not cost effective and not necessary.
- The WHO and the CDC have published the joint note that is available now on the CDC website and soon published on the WHO Euro website
- On Wednesday 13 April 2022 WHO EURO is hosting a webinar for pulmonologist of Poland to
  increase the awareness and bring the update on the treatment approaches in Ukraine,
  especially on drug resistant TB. The webinar will be organized jointly with the WHO country
  office, and with great support of some of the partners (MSF, the National Tuberculosis
  program, etc).

## **Outbreaks in UKR**

Suspected cases of *Leptospirosis* among internally displaced persons (IDP) in Khmelnystky were confirmed by local authorities (Sources: 1,2)

- Since the beginning of 2022 until 31 March, local authorities of the Khmelnystky region, western Ukraine reported 3 confirmed cases of *Leptospirosis*, of which all are IDPs.
- Suspected case of *Diphtheria* among IDP was confirmed in Ternopil (Source: communication WHO EURO, media link)

### **Outbreaks in Poland, Przemysl**

On the 6<sup>th</sup> April there was information on **outbreaks by the Mayor of Przemysl**, and Chief of Sanitary Inspection :

- According to the Chief of Sanitary Inspection, there are confirmed cases in the reception centers including, 41 Covid-19 cases, 15 Rotavirus cases, 4 Novavirus cases, 2 flu cases. Together with MoH experts they frequently conduct "disease mapping" through collection of samples from food and water in reception centers and in schools.

#### **Immunization**

ECDC colleagues gave an update on the planned vaccination campaign for UKR refugees in southern Poland.

A national ordinance was issued to offer vaccination against measles, diphtheria, pertussis, polio, and hepatitis A to all Ukrainian refugees. There is no information about which vaccines will be used. The vaccination campaign will be a national campaign. WHO will support with communication materials and probably a rapid acceptance and demand assessment. The acceptance for COVID-19 vaccination among UKR refugees is minimal, but it may not be the same for childhood vaccines.

### **Health Information**

Update on partners, Peter

- There are many international NGOs present inside Poland many of whom are providing direct clinical care and some of them without appropriate registration, quality control or reporting. WHO is working to identify all organisations present, and to support MoH in the following:
  - Formally mapping national and international non-governmental teams that are present
  - to communicate to teams any requirements for them to provide health care in Poland (such as appropriate professional registration and daily reporting of activities)
  - to ensure that any teams MoH would like to remain in Poland meet minimum clinical standards set either by the MoH or using WHO's own Emergency Medical Team Minimum Standards.
  - Activating a tool for daily clinical reporting that all teams accepted by MoH should be required to use. This would allow MoH to track activities and also provide surveillance data from teams directly to MoH and it can be adapted to meet MoH requirements.
  - Collating offers of medical assistance and sharing these with MoH via an agreed focal point within the Ministry.
- Please, all those NGOs who have not yet replied to WHO <a href="mailto:skeltonp@who.int">skeltonp@who.int</a> regarding their area and place of work should do that asap.



#### **Health Services**

#### 1. MHPSS

# **Poland MHPSS Technical Working Group Activities**

- Poland MHPSS TWG has 80+ members now including Polish NGO'S, policy makers, INGO' and NGO's, UN agencies and Ministry of Health.
- One pager info sheet for Poland MHPSS TWG shared with Interagency Coordination and interested parties explaining the function of the group, available in Polish as well.
- TOR sent to members for review, final version will be shared this week.
- Weekly MHPSS TWG meetings are held on Thursdays at 11 am CET, <u>click here</u> to join the meeting and send email to <u>mhpsstwg.poland@gmail.com</u> to be come a member
- Previous meeting minutes, member contact list, presentations and reports of the group could be found here

#### Assessments

 International Medical Corps published a <u>Rapid MHPSS Situation Analysis Report</u>, will be presented in a one hour session by IMC, date/time will be shared ASAP to MHPSS TWG members.

# **Capacity Building Initiatives by WHO**

- WHO signed a contract with Translators Without Borders for translation of key MHPSS resources. The list of translations is shared with members and asked to add Polish translations being worked on to coordinate/harmonize all emergency MHPSS resources in Polish
- Updated Polish version of Psychological First Aid has been <u>published</u> by WHO Poland.
- WHO online learning platform MHPSS in Emergencies has been launched globally, WHO is translating the resource into Polish, to be finalized in late April 2022.
- <u>IASC Key considerations when offering Remote Support Guidance Note</u> has been translated by WHO Poland.

### 2. EMTs and EU evacuations

- The Interagency Standing Committee has published some guidelines on the inclusion of people with disabilities in humanitarian response.
- Cooperation is needed, any data on applied solutions is welcome.
- Including people with disabilities to strengthen applied programs is a great starting point.

### **Government & MoH updates**

According to the MoH in POL non-EU medicine for treating TB, MDR-TB and HIV/AIDS are now allowed to enter POL and will then be distributed to relevant health facilities.

### 3. Health services for elderly [HelpAge report]

Thanks to IMC we received a short assessment from Help Age on needs of older refugees:

- While some older refugees are sheltering in the reception centres and collective sites across Poland, most are either staying with friends and relative or renting accommodation which is becoming increasingly unaffordable.
- Of those coming into Poland, preliminary estimates suggest that some 20% are over 65. However, this cannot be verified as the Polish authorities are not currently collecting disaggregated data on demographics. Older people in Ukraine are a significant demographic part, with 1 in 4 people over 60. Therefore, ensuring that assistance is tailored to the specific needs of older people is critical in all interventions.
- 263% of older people need urgent medication, including for diabetes, blood pressure and pain relief.
- 40% reported that they need urgent medical attention.
- Many older people have multiple health conditions and complex health needs. The Polish
  government has assured all Ukrainians that they will be provided with free access to health
  services for a year. However, many refugees will be unfamiliar with local health services and
  lack funding to purchase medicines. An interruption in their medical routines is likely to
  accentuate underlying health issues and there is an urgent need for assistance.
- ②Only **35%** of Ukrainians are fully vaccinated against COVID-19. This is especially concerning for older people who are at a significantly higher risk of dying from the virus. Therefore, it is important to ensure those most at risk have the opportunity to be vaccinated and receive personal protective equipment.
- 260% of older refugees interviewed had a disability.
- The most common mentioned disabilities for older people were regarding sight (30%) and mobility (20%). Older people with mobility issues are often at greater risk of being excluded from assistance. This may include providing assistance door to door.
- ②Of those older refugees interviewed **45**%reported they need assistive products, with **33**%mentioned they needed glasses..
- The small sample and approach limited the representativeness and the scope for data disaggregation. Therefore, other actors should conduct larger needs assessments and ensure that this data is disaggregated by sex, age, and disability and the anonymised data is shared across the humanitarian sector and with the Polish authorities.

# Disability

Several agencies have expressed their interest in supporting and working with people with disability:

**Intersos**: made a plie regarding the situation of older people.

Since about 2-3 weeks in Korczowa there are problems - care of elderly people 75+.

2-3 weeks ago not many older people were coming to the center/ crossed the border. Today we have ca. 25 people. They are more and more with every day.

They are lost, often ill, have nothing, and do not know anyone, don't know where to go.

According to Intersos the Polish social system does not accept them -lack of legal regulation. Sometimes it is possible to ask for some people (1,2 persons) to be accepted. Sometimes we find a good place but there is no transport..... And it is difficult to explain to an old lost person to go somewhere with several changes.

**OXFAm**: any partners offering specialised transportation for those with physical disabilities? OXFAM is not directly working on that but we have a protection program which is receiving referrals from families needing this kind of assistance. We'll also be factoring this into any WASH provisions we'll be providing at reception centres.

Ilios Foundation, a partner of Humanosh Foundation, has a bus adapted for people with disabilities.

Contact: Monika Dryl, Humanosh Foundation,

Mob. 0048 605292842, Email: monika.dryl@humanosh.org

# AOB

### **Belarus-Pol border**

**Warsaw Coordination Support Center** 

www.Warszawa-Ukraina.info/en

witek.hebanowski@gmail.com

On the Belarusian section of the border, the services still "hunt" for the defenceless people hiding in the forests.

Contrary to popular belief, there are still many women and children among them who need help. The Border Guard and other services do not hesitate to take such people to the frosty forest if they catch them. Due to the still binding ban on entry to the restricted zone and the prohibition of aid activities at the border with Belarus, refugees on the other side of the border are condemned to loss of health, and sometimes torture. In many cases their lives are also at risk.

For seven months, we have been calling for the health and life of refugees and refugees along the border with Belarus to be saved. Humanitarian aid and human rights are universal. We demand that the ban on entry to the border zone be lifted and that people who are victims of wars and the regime of Alexander Lukashenka be secured.

Helping out is legal. This violence is a crime!