

Health Coordination Call: Meeting Minutes

18 April 2022

Note:

- total number of UKR refugees 4 869 019 [[UNHCR](#)]
- In Poland: 2.816 mln (since 24.02), 17 300 entering, 19 300 returning to UKR (17/04/2022) [[UNHCR](#)]
- PESEL system update (18.04.2022): 937,039 assigned PESEL numbers [[Poland's data portal](#)]

Useful links:

- [UNHCR Data Portal](#): The link to the meeting, meeting minutes and other updates from the Poland Health Sector
- [Health Sector partners: presence and activities as of April 18](#)
- [Data Portal of Poland](#)
- [NFZ Health facilities Search Engine](#)
- [Ministry of Health: refundable medication](#)
- [Ukrainemedlist](#): Search mechanism for Ukrainian drugs and their substitutes

Updates from partners:

1. InterSOS:

- operating at the Korczowa reception centre; weekly coordination meetings held with partners at the municipality level
- Report increases in diarrhea and dehydration cases
- Oxfam is responsible for improving hygiene
- Covid: approx. 50% of the people were tested
- Only one child was not vaccinated fully among the refugees – not sure how this was checked
- the referral path remains unclear
- Mobile clinics / vaccination bus by the MoH: heard but didn't see

2. Hadassa

- Operating in Przemsyl (Tesco and small refugee center at the Ukrainian Cultural Center) and in Korczowa - Room nr 13: Sanitary conditions in Przemsyl have improved; however, still having a report of diarrhea and vomit symptoms of unknown source

3. Iryna Maslovska:

- There is a need for a meeting with Starostwo [[administrative unit](#)] – who are in charge of the center sanitation
- Providing awareness messages, masks, solutions for disinfection will be helpful

WHO UPDATES:

1. Information management:

- 4W Mapping Tool is completed by partners using a [Microsoft form](#), which populates the table automatically. We have circulated posters with the QR code for people to complete. There are 2 duplicated entries at the moment in the form. In total, we have:
 - 24 organisations (an additional 5 duplicate entries);
 - 10 are providing direct clinical care.
- Summary of key NGO Activities" which includes narrative summaries of key NGOs – based on visits or phone interviews. This would be a good starting place for new staff and should be kept up to date by all staff.
- WCO Poland developed the table mapping the health partners per administrative division (województwo – voivodship and powiat); digital mapping is in the development.
- Health Sector Meeting feedback session based on a questionnaire was conducted. Several partners declared that they are willing to present on their actions and findings on future meetings.

2. TB

- On Wednesday, 13 Apr 2022 WHO EURO hosted a webinar for pulmonologists of Poland to increase the awareness and update on the treatment approaches in Ukraine, especially on drug-resistant TB. The targeted audience was: TB national counterpart/s of Poland and Ukraine; Technical counterpart/s at MOH of Poland; members of the Polish Association of pulmonologists of Poland; Primary health care Family doctors of Poland; Community based organizations serving Ukraine refugees along their pathways; WHO/COP and EURO/TB
- Topics discussed: burden of TB among refugees (WHO estimates); Polish policy and practices of TB diagnosis and treatment; Why refugees don't access Tb services in Poland
- Ukraine policy of TB diagnosis and treatment: focus on the ambulatory care and WHO recommended diagnostic algorithms and treatment regimens
- [Rapid Response] (via MSF) and [country preparedness and planning] (via GDF) for to the high emergency needs of TB diagnostics and drugs to assure continuity and universal TB care coverage along Ukraine refugees' pathways.
- Quick access to TB services in Poland: solutions for refugees and communities
<https://www.testfinder.info/>
- Communication across the borders: patients consent and short/long tracks
- The National TB focal point, Professor Maria Korzeniewska-Kosela confirmed that none of the patients with DR-TB have reached out to regional clinics for care. There are several reasons for that, which are
- mostly related to national requirements for hospitalization of patients with TB and MDR-TB while they are considered "infectious", i.e., having evidence of strong bacteriological conversion, and there are limited possibilities to arrange proper treatment monitoring at outpatient settings.
- Also, the Ukrainian National TB Program has been providing patients with 1–2-month supply of medicines for self-administration.

Action Point: Possibly, intervention needed

- access to medicines, as the first step

- offer support with other minimum packages for programmatic management of MDR-TB. WHO is coordinating support with partners and setting up the stock of medicines for MDR-TB in Poland (100 treatment courses) and discussing the possibility of emergency procurement of medicines for MDR-TB to address the immediate needs.

General Action Points:

- Provision of awareness messages, masks, solutions for disinfection is deemed as useful
- Engaging health authorities and the laboratory of the administrative unit should ensure the collection of stool samples and lab testing
- disabilities and special needs data collection and addressing
- Additional comments and clear understanding on access to health services (who can access health services and on which basis) are necessary.