Update on the Health system response to the Refugee emergency in the Republic of Moldova

Inter-agency refugee HEALTH working group

25 May 2022
Refugee emergency in the Republic of Moldova

Situation at borders during last 24hrs (May 24-25, 2022)

• **Entries** of Ukrainians and other third-country nationals (TCNs): **18,868**
  - 4,729 Ukr refugees & 14,139 other TCNs (including MDA citizens)

• **Exits** of Ukrainians and other TCNs: **19,300**
  - 5,038 Ukr refugees & 14,262 other TCNs (including MDA citizens)

• **1,370 children** among Ukrainian refugees entered and exited the country

Source: Government of the Republic of Moldova (Border Police)
Refugee emergency in the Republic of Moldova

Since February 24, 2022

- **Entries** of Ukrainians and other third-country nationals (TCNs): **471,287**
  - **431,670** Ukrainian refugees & **39,617** other TCNs

- **Exits** of Ukrainians and other TCNs: **372,155**
  - **338,784** Ukrainian refugees & **33,371** other TCNs

**To date**

- **Accommodated** in the country: **84,241** (44,839 under 18)
  - **80,560** Ukrainian refugee & **3,681** other TCNs

- **7,573 asylum applications** registered (both Ukr & TCNs)
- **90 RACs** with a capacity of 7,513 beds (4,056 occupied beds)

Source: Government of the Republic of Moldova (Ministry of Internal Affairs)
Refugee health care in the Republic of Moldova

24 May 2022 - average
~ 25 ~ 150 cases in the PHC - 50-60% children (emergency health care)
~ 10 ~ 50 patients, incl 60% children in hospital, 10 hospitalizations, incl 5 children (on 24 may)

International Medical evacuation (EU) - 23 patients & 32 relatives - EWRS (cancer, rare diseases) Romania, Ireland, Italy, Norway, Portugal, Spain, Luxemburg, Sweden..

Since 24 Feb 2022:
- 1667 patients hospitalized (782 children), 63 pregnant women
- 5537 patients, including 2155 children consulted by the Primary health care

Distribution by nosologies ARI, COVID-19, chronic illnesses, obstetric care, trauma...

• COVID – 86 cases, incl 25 children
• 506 Dialyses sessions
• > 222 oncology treatment is needed
• Treatment of CVD, diabetes
• 100 Births
• 10 deaths (hospitals)
Emergency Medical Team MDS Daily Reporting

The EMT Minimum Data Set (MDS) daily report has been officially activated on 19th March 2022 in Moldova.

Key information which are essential for coordinating EMT was collected by 262 daily reports, which includes data of 2880 consultations. (from 11th March – to 23 May 2022)

Contributing teams for the EMT MDS Daily reporting – 6 teams

- Samaritan’s Purse,
- SAMU EMT (Fundacion SAMU),
- Swiss SCT RMNCH (Swiss Humanitarian Aid)
- LEMAANAM ICHILOV,
- Magen David Adom Israel,
- BRF,
- INTERSOS,
- EMERGENCY
- Peace Winds Japan

- EMTCC 2 times/week coordination meeting
- Daily reporting
- Technical assistance & guidance of the EMTS in the fields
- Management of the EMTs (standby – 14 EMTs)
EMT reporting - EMT Minimum Data Set (MDS)

Sex

Total: 2895

- Male: 69%
- Female non-preg.: 30%
- Female pregnant: 1%

Relation to Event

Total: 2513

- Directly: 6%
- Indirectly: 59%
- Not: 35%

Classification by the EMT MDS:

- **MDS44** Directly: Patient visit with injury or illness directly caused by an emergency event.
- **MDS45** Indirectly: Patient visit caused or worsened by situational change after an emergency event. e.g.) Environmental exposure
- **MDS46** Not related: Patient visit not caused by the event. e.g.) NCD
Trauma cases

Health Events

Total: 2943

- Trauma: 66%
- Infectious disease: 22%
- Additional: 7%
- Emrg.: 3%
- Other key diseases: 2%

<table>
<thead>
<tr>
<th>Health Events</th>
<th>&lt;5 y.o.</th>
<th>&gt;=5 y.o.</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Major head / spine injury</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Major torso injury</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Major extremity injury</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Moderate injury</td>
<td>2</td>
<td>21</td>
<td>23</td>
</tr>
<tr>
<td>Minor injury</td>
<td>17</td>
<td>177</td>
<td>194</td>
</tr>
</tbody>
</table>
## EMT reporting - EMT Minimum Data Set (MDS) – Number of Infectious diseases

<table>
<thead>
<tr>
<th>No</th>
<th>Health Events</th>
<th>&lt;5 y.o.</th>
<th>&gt;=5 y.o.</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>Acute respiratory infection</td>
<td>110</td>
<td>347</td>
<td>458</td>
</tr>
<tr>
<td>10</td>
<td>Acute watery diarrhea</td>
<td>24</td>
<td>112</td>
<td>137</td>
</tr>
<tr>
<td>11</td>
<td>Acute bloody diarrhea</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>12</td>
<td>Acute jaundice syndrome</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>13</td>
<td>Suspected measles</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>14</td>
<td>Suspected meningitis</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>15</td>
<td>Suspected tetanus</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>16</td>
<td>Acute flaccid paralysis</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>17</td>
<td>Tuberculous Bronchitis (susp/confirmed)</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>18</td>
<td>Fever of unknown origin</td>
<td>12</td>
<td>36</td>
<td>48</td>
</tr>
</tbody>
</table>

**EMT MDS Gateway**  [https://www.mdsgateway.net/mda](https://www.mdsgateway.net/mda)

- Forms & Brief Instruction (PowerPoint)
- MDS Maker (Windows Excel Tool)
Health system strengthening, need assessments and resource mobilization
- IGSU Contingency plan health system component – will be presented by the Government
- Mass Causality management plan testing & evaluation
- Cancer care assessment report shared with MoH

IT platform will replace 5Ws – donor mapping have to updated on weekly base
Need assessment – Public health CBRN
Priority list of goods – is ongoing!!!
UNIC GOV Cell & UNHCR platform for discussions

Check updates !!!
Health system strengthening, need assessments and resource mobilization

• GBV – intersectoral work! – UNHCR, UNFPA, UN WOMEN, UNICEF, UNAIDS, WHO

• GBV and SHR are integral part of the health sector

Contingency plan

• Ongoing inter-sectoral assessments
  - Multi-Sector Needs Assessment (MSNA)
  - Primary health care access – tool developed and piloting will start next week
Public health

• **Risk assessment** – early detection of the PH threats

• **Surveillance, outbreak investigation, Laboratory component**

• **Immunization**
  • microplans & coalitions for immunization at the district and local levels
  • 10 face-to-face trainings were conducted for HCWs 37 administrative territories
    - increase awareness VPD risks and routine & COVID-19 immunization
    - enhance Vaccine preventable diseases surveillance
  • 21 national trainings on immunization
  • SOP and training for EMTs regarding vaccination of refugees

• **CBRN risk assessment and need assessment**
Procurement supply management

• **Medicines**
  o cancer treatment
  o 900 vials of Tocilizumab used for COVID-19 treatment cases among refugees.

• **Consumables** - surgical needles, catheters, syringes, infusion sets

• **IPC** - hand sanitizers consisting of 200,000 bottles

• **Medical devices** - 10 surgical tables, 20 mobile surgical lights, 30 trauma back packs and intraosseous infusion kits, instruments and equipment.
<table>
<thead>
<tr>
<th>Country</th>
<th>Category</th>
<th>Health Area</th>
<th>Indicator</th>
<th>Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moldova</td>
<td>Health &amp; Nutrition</td>
<td>Health</td>
<td># of the refugee received Emergency care offered by EMT</td>
<td>Individuals</td>
</tr>
<tr>
<td>Moldova</td>
<td>Health &amp; Nutrition</td>
<td>Health</td>
<td>% of the refugee children vaccinated with routine vaccination IPV MMR</td>
<td>Individuals</td>
</tr>
<tr>
<td>Moldova</td>
<td>Health &amp; Nutrition</td>
<td>Health</td>
<td># of the hospitals with Refugee emergency Contingency plan developed and tested/implemented</td>
<td>Individuals</td>
</tr>
<tr>
<td>Moldova</td>
<td>Health &amp; Nutrition</td>
<td>Health</td>
<td># of the guideline adapted and implemented on clinical case management and Infection prevention and control</td>
<td>Guidelines</td>
</tr>
<tr>
<td>Moldova</td>
<td>Health &amp; Nutrition</td>
<td>Health</td>
<td># of the health care workers enrolled in the capacity building with regards to clinical case management and IPC</td>
<td>Individuals</td>
</tr>
<tr>
<td>Moldova</td>
<td>Health &amp; Nutrition</td>
<td>Health</td>
<td># of refugees provided with health services</td>
<td>Individuals</td>
</tr>
<tr>
<td>Moldova</td>
<td>Health</td>
<td>MHPSS</td>
<td># of individuals provided with mental health and psycho-social support services</td>
<td>Individuals</td>
</tr>
</tbody>
</table>
Refugee response plan progress monitoring
Next steps

- Incident management MoH mechanism testing and integration in the UNIC coordination cell
- Donor&partner support coordination (bilateral)
- E-reporting - information system for refugees' health and medical services
- Coordinate the need assessment and priority list, supplies management and distribution – public health (CBRN risks)
- Continuous risk assessment and adjustment of the scenarios
Thank you