



Key considerations for on-site assessment of refugee transit points and accommodation centres in the EU/EEA in the context of the refugees fleeing the war in Ukraine

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Purpose

This guidance note aims to provide practical orientation to national and local authorities, United Nations (UN) and civil society organizations on public health, and water, sanitation and hygiene (WASH) measures at border entry points, reception and accommodation centres in surrounding countries affected by the Ukraine crisis. The guidance note does not cover overall management of those sites, specific measures related to epidemiological surveillance, or specific disease control programs for which other guidance documents exist.

Section I of the document provides an overview of tailored approaches to different situations, while Section II provides context and short technical guidance on specific public health and WASH considerations.

The Annex includes a checklist that has been developed as a companion, on-site tool to assist with the assessment of refugee accommodations or centres. The tool is divided into three sections, reflecting the three situations in which refugees may find themselves. A baseline assessment is critical to ensure minimum standards are met and follow-up assessments will ascertain that corrective actions are implemented in a timely manner. Users might consider developing an action plan to address the findings. The checklist is meant for use as a living document, which can be translated and adapted to the national context of the receiving countries.

I. Minimum service level at refugee hosting sites

Situation 1. Arrival/exit sites, way points, assembly points (bus/train stations) border crossings and reception centres (0-12 hours)

At locations where refugees and other people on the move choose to rest or are required to wait for a period of a few minutes to a few hours, a level of public health and WASH services equivalent to those commonly seen at bus/train stations or football stadiums will be expected.

The public health focus in this scenario should be on a) the provision of 24/7 emergency medical care, including referral; b) the establishment of a quarantine room/holding area in line with national guidelines; c) the provision of psychological first aid; and d) access to basic information materials in both the host country and the refugees' language(s) regarding access to national health services.

The WASH services focus on access to functional, clean, and accessible gender-separated toilets, hand hygiene stations and drinking water that meets national quality standards. All facilities must guarantee privacy and safety at any time of the day and night and will need to be cleaned and maintained regularly, including availability of basic hygiene supplies (i.e. soap, toilet paper). A design based on expected daily peak flows should be considered, and the facilities designed according to the international standards detailed in the Annex, Situation 1, or equivalent national standards. Adequate personal protective equipment (PPE), including medical masks, will be required for all personnel

working in the facility in line with the COVID-19 epidemiological situation and national regulations.

Situation 2. Reception sites, transit sites (with residual overnight caseload) (1- 10 days)

At locations where refugees and other people on the move are required to stay overnight and wait for several days while arranging onwards transportation or finding private accommodation, a level of WASH and health services similar to that in emergency mass accommodation/evacuation centres such as airports, communal centres/buildings, gymnasiums or converted empty buildings (e.g. shopping malls) should be expected.

A wider range of services is required to meet refugees' immediate needs, such as the provision of basic hygiene items, including menstrual hygiene management (MHM) products, nappies, and detergents. WASH services focus on the provision of functional, clean, and accessible gender-segregated toilets, hand hygiene stations and access to drinking water that meets national quality standards. In addition, gender-segregated showers, baby-changing facilities, and laundry facilities will be required to meet basic needs. All facilities must guarantee privacy and safety at any time of the day and night and should be cleaned, maintained regularly, and equipped with the necessary hygiene supplies (i.e. soap, toilet paper). Food preparation through on-site kitchens or catering will need to be provided along with appropriate food storage. Kitchen and/or catering staff must be adequately trained in safe food-handling practices. A design based on planned peak daily flows should be selected and the facilities designed accordingly.

As part of the public health response, first aid should be available on site and referral to health facilities will need to be ensured, including the availability of 24/7 ambulance services. Accommodation facilities should consider a quarantine room/holding area, and large facilities may require temporary primary healthcare points in line with national regulations. Staff and volunteers should be trained in psychological first aid, and basic information materials in both the host country and refugees' language(s) regarding access to national health services, vaccination, and other services are required. When or where required, adequate PPE, including medical masks, will need to be provided for all personnel working in the facility in line with the COVID-19 epidemiological situation and national regulations.

Situation 3. Collective accommodation centres, longer-term sites as defined by respective governments (> 10 days)

At locations where refugees and other people on the move will reside for extended periods of time with the purpose of longer-term accommodation, standards and services equivalent to those commonly seen at hostel accommodation will be expected. In this situation, families will likely be accommodated in individual rooms or units within the accommodation centre.

Individual family WASH facilities are recommended and access to basic hygiene items is recommended to be

covered through cash-based interventions¹. Where this is not feasible, WASH standards need to be adjusted to meet those of longer-term accommodations (see the Annex, Situation 3). All facilities must guarantee 24/7 privacy and safety, and should be cleaned and maintained regularly, including provision of necessary hygiene supplies (e.g. soap, toilet paper, MHM products, nappies, detergents). Food is expected to be prepared by families individually and provisions need to be made to ensure food safety in private/communal kitchens, including food cooling. An appropriate system for daily cleaning and maintenance of the WASH and kitchen facilities and other common areas will need to be established and managed.

Access to health and other social services needs to be ensured through linkages to national services, and first aid kits will be required on site as well as access to 24/7 ambulance services. Staff and volunteers should be trained in psychological first aid and referral to additional services and at least one person in the facility should be trained in applying first aid. Basic information materials on access to national health services, vaccination and other services are required. When or where required, adequate PPE, including medical masks, will need to be provided for all personnel working in the facility in line with the COVID-19 epidemiological situation and national regulations.

II. Immediate and mid-term public health measures at refugee hosting sites

The following section provides guidance for public health measures and the types of interventions that may be used for immediate emergency response, and then the types of interventions that may be suitable as facilities are developed for the longer term. The public health measures include individual and environmental measures², as well as PPE for health professionals providing healthcare services and related minimal infrastructure.

Health services

- Ensure access to first aid on site and emergency referral to national health facilities 24 hours per day, seven days per week. Standby ambulances are highly recommended for border crossing points and any centre/facility with large numbers of refugees passing through and being accommodated.
- Quarantine room on site with doors and adequate ventilation system (natural or mechanical ventilation), PPE for staff.
- Access to psychological first aid through trained staff or volunteers at border crossing and reception/accommodation centres with referral for further care.
- Provide leaflets and display visual aids in both the host country and refugees' language(s),

with basic information regarding access to national health services, including vaccination, ambulance services, health and hygiene education.

- Consider primary healthcare service points for larger accommodation centres in line with national standards.

Accommodation standards

- Space: minimum 3.5m² living space per person (excluding common spaces such as washing area, kitchen).
- Ensure at least 1m distance between beds as soon as the situation allows in short-term accommodation and 1.5m in shared long-term accommodation.
- Provide area for breastfeeding, changing nappies and adequate disposal.
- Provide regular change of linen, including after the departure of every person.
- Regular cleaning, disinfection and maintenance of the space is required.
- Adequate natural or hybrid ventilation at a minimum recommended ventilation rate of 10 litres/sec/person.
 - Natural ventilation refers to the result of only natural forces, such as wind pressure or differences in air density, through doors, windows or other intentional openings in the building.
 - Mechanical ventilation is the active process of supplying air to or removing air from an indoor space by powered air movement components.
 - Consider the use of portable air cleaners with minimum efficiency reporting value (MERV) 14 (ISO ePM1) 70-80% filters or higher. Facilities that choose to use air cleaners should follow the manufacturer's instructions, including on recommended cleaning and maintenance procedures for HEPA filters. Otherwise, the use of portable air cleaners with HEPA filters can lead to a false sense of security as their performance decreases due to filter loading.

Water supply

- Immediate (in case municipal water supply is not available): water dispenser, bottled water or similar for immediate access.
- Longer term: municipal water supply providing drinking water meeting national standards, water bottle refilling taps connected to municipal water supply, with suitable drainage to stormwater drains or soakage pits.

¹ Cash-based interventions are programmes currently implemented by organisations working with refugee and migrant populations and involve providing cash or vouchers to refugees for goods or services. For more information, see: [https://www.unhcr.org/cash-](https://www.unhcr.org/cash-based-interventions.html)

[based-interventions.html](https://www.unhcr.org/cash-based-interventions.html) and <https://www.iom.int/cash-based-interventions>

² Individual and environmental measures: performing hand and respiratory hygiene, wearing a mask, physical distancing, cleaning and disinfecting surfaces and areas, improving air ventilation, etc.

Toilets

- Immediate: Portable Chemical Toilets (e.g. Mobilpipi, Toi Toi, Boxi) with minimum twice daily cleaning, disinfection, and refilling of hygiene supplies.
- Longer term: flush toilets installed in prefabricated buildings/containers, or other suitable structures. Connection to water supply and sewer network, or holding tank with pump to sewer network, or septic tank with soakage.
- Hand-washing stations should be installed in the immediate vicinity of the toilets – for both immediate and longer-term solutions.
- All toilets must have safety locks from inside and all fittings should be heavy-duty/vandal-proof.
- Regular minimum cleaning/maintenance contracts required for all toilets.
- Lighting must be installed, functional and switched on, especially during dark hours.
- Accessible toilets need to be provided for people with mobility limitations.
- Gender-neutral toilets should be considered in accommodation facilities.

Showers

- Immediate: portable gender-segregated shower facilities.
- Longer term: showers installed in prefabricated buildings/containers, or other suitable structures. Connection to water supply and sewer network, or holding tank with pump to sewer network, or septic tank with soakage. Hot water heating by solar, electricity or gas.
- All fittings to be heavy-duty/vandal-proof.
- Minimum cleaning/maintenance contracts required for all showers.

Infection prevention and control measures

- Immediate: Alcohol-based hand rub (ABHR) sanitizer; temporary washing basins with drainage where feasible to install and connect to drainage systems.
- Longer term: Wash basins equipped with taps, liquid soap dispensers, mirrors (for handwashing, tooth-brushing, shaving, etc).
- Minimum daily cleaning/maintenance contracts required for all hand hygiene facilities.
- Ensure appropriate baby-changing facilities in the toilet, shower area, or laundry facilities.
- Medical or non-medical masks should be provided according to the COVID-19 epidemiological situation and national guidance to site personnel, refugees, and other people on the move.
- Adequate access to PPE and hand hygiene supplies to maintenance personnel should be available, including heavy-duty gloves, aprons, masks, eye protection, etc.

Laundry

- Install laundry tubs and/or coin-operated heavy-duty washing machines. Install drying lines and/or coin-operated electric drying machines, or heated drying rooms.
- Provide free access to soap and detergent.
- Daily cleaning/maintenance contracts required for all laundry facilities.
- Non-food items (NFIs) such as blankets, clothes, sleeping mats, shoes should be cleaned and re-used if in good condition for continuous use or re-distribution to refugees.

Solid waste management

- Organised collection of waste in bags/bins. Disposal into larger bins/skips. Collection by municipal waste collection services for disposal/recycling.
- Segregation and recycling of paper, plastic, metal, and composting of food waste should be undertaken where possible in line with national requirements.

Suggested hygiene items

Distribution of hygiene items should only be considered in Situation 2 and 3 sites, where refugees are required to stay overnight. In Situation 3, hygiene items should be included in the Minimum Expenditure Basket calculation for cash-based interventions rather than provided in kind. Where possible, refugees should be given the opportunity to choose the hygiene items they want to take, based on their needs and preferences, rather than receiving a pre-packaged kit. Relevant hygiene items will need to be agreed at local level based on consultations with refugees and taking into account locally available products. Items that could be considered for distribution include:

- Toothbrush, toothpaste – 100g
- Disposable razor, shaving cream
- Soap, shampoo
- Laundry soap/detergent
- Menstrual hygiene management items
- ABHR sanitizers
- Disposable nappies (children and adults)
- Disposable wipes
- Medical or non-medical masks

Kitchens

- Ensure kitchen staff is trained on the five keys to safer food³
- Ensure appropriate food storage, including cooling facilities
- Ensure access to appropriate infant and young child food
- Install dish-washing facilities including drains with grease traps.
- Install facilities for management of kitchen solid waste.
- Daily cleaning/maintenance contracts required for all kitchen facilities.

³ The core messages of the five keys to safer food are: (1) keep clean; (2) separate raw and cooked; (3) cook thoroughly; (4) keep food at safe temperatures; and (5) use safe water and raw

materials. Five keys to safer food manual. World Health Organization (2006). Available at: <https://apps.who.int/iris/handle/10665/43546>

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Annex. Checklist tool for on-site health inspections in refugee accommodation centres/sites

Situation 1. Arrival/exit sites, way points, assembly points (bus/train stations) border crossings and reception centres (expected duration of stay 0-12 hours without overnight stay)

Name/contact details site/centre manager: _____

Name/contact details of site assessor: _____

1. Physical Infrastructure

	Standards	Comments	Findings
1.1. Number of people temporarily accommodated		Review whether capacity of site is adequate to provide temporary rest to refugees, particularly for the daily peak flows.	
1.2. Capacity		Describe surge mechanism in place, if any	
1.3. Outlets for device charging		Consider <ul style="list-style-type: none"> • Rules for charging (e.g. 1h/per person in daytime) • Standardised DC (5 V) USB slots • Multiport chargers • A variety of common adapter wires 	

2. Water and Sanitation

	Standards	Comments	Findings
2.1. Number and condition of toilets	<ul style="list-style-type: none"> • 1:50 ratio women and 1:50 ratio men • 1:250 ratio disabled accessible toilet 	Review cleanliness, accessibility, privacy, (lockable doors), safety (illumination), availability of supplies, waste basket for menstrual hygiene management. In case portable/temporary toilets, confirm safe handling of human waste. Review queuing time.	
2.2. Number of hand hygiene stations	In several places throughout the site at critical points, in particular including at toilet areas and food stations	Review functionality, availability of hand hygiene products (water, soap, alcohol-based hand rub (ABHR)). Review queuing time. Stations should be distributed in several places around the centre.	

		Alcohol-based hand rub sanitizers should contain 60-80% alcohol.	
2.3. Water supply	1 tap/dispenser: 100 people	Confirm uninterrupted availability of clean drinking water that meets national standards, or alternatively availability of dispenser or similar devices. Review queuing time	
2.4. Solid waste management	1 waste bin: 200 people	Waste bins near all waste generation sites. Review general cleanliness.	
2.5. Cleanliness condition		Rooms, main reception, and hosting area should be cleaned at least once per eight-hour shift.	
2.6. PPE for cleaners (goggle, masks, heavy-duty gloves, apron)	1 set/person	Review availability of heavy-duty gloves, aprons, boots.	
2.7. Individual items			
Sanitary pads/tampons	Ensure that these items are freely accessible.	Check availability so that people do not have to ask for them.	
Nappies and disposable wipes	Ensure that these items are freely accessible.		
Baby changing station(s)			
ABHR sanitizers	Dispenser available within 5m of toilets Consider travel-size items for distribution per person (50ml)	Should be distributed in several places around the centre and contain 60-80% alcohol.	
Face masks	2-3 available per person/day	Medical and non-medical masks, according to local COVID-19 epidemiology and national guidance in place.	
3. Healthcare services			
	Standards	Comments	Findings
3.1. 24/7 First aid capacity	24/7 capabilities	Capacity to refer to national health facilities needed.	
3.2. Exam room	One per site desirable, but may not be feasible due to the high turnover of people through these sites.	A room or tent with a closing door	
3.3. PPE for patient care (gloves, masks, gowns, goggles as appropriate)	Gown and goggles as needed – minimum five sets per shift available	Gloves and mask recommended for each medical exam should be freely available.	
3.4. ABHR sanitizers	One by each exam bed in the room		
3.5. Waste bins, sharp boxes	One by each exam bed in the room Minimum one per room		
3.6. Soap and disinfectants for environmental cleaning and disinfection	Monitor cleaning of exam bed after each patient		
3.7. Quarantine area for a potentially infectious patient	Desirable for this situation, but not critical; may not be feasible due to	Room with a door and adequate ventilation. Can be formed with a tent outside the main facility	

	the high turnover of people through these sites.	Procedures and capacity to refer to national health facilities are needed.	
3.2. Psychological first aid	Depending on the flows	Capacity to refer to national mental health facilities may be needed 24/7.	
4. Health information			
	Standards	Comments	Findings
4.1. Basic health information (posters etc) available in the relevant languages (of host country and country of origin of refugees)		Assess presence throughout the site Review key information available on ambulance hotlines, health hotlines in Ukrainian (posters, leaflets, QR codes or similar).	
4.2. Posters/leaflets with information about infectious diseases/symptoms of concern available in the relevant languages (of host country and country of origin of refugees)		Requirements may change according to the epidemiological situation.	
4.3. Information on vaccines offered in the relevant languages (of host country and country of origin of refugees) available in the relevant languages (of host country and country of origin of refugees)		Assess presence throughout the site.	

Situation 2. Reception sites and transit sites (expected duration of stay 1- 10 days)

Name/contact details site/centre manager: _____

Name/contact details of site assessor: _____

1. Physical Infrastructure

	Standards	Comments	Findings
1.1. Number of people accommodated			
Bed capacity	Assess absolute numbers and current occupancy		
Surge capacity		Describe surge mechanism in place, if any	
1.2. Bed linen per person	1-2 sets per person		
1.3. Spacing between beds	At least 1m distance		
1.4. Ventilation			
Natural ventilation	Minimum recommended ventilation rate: 10 L/s/person		

Mechanical ventilation	Minimum recommended ventilation rate: 10 L/s/person		
Portable air cleaners with MERV 14/ISO ePM1 70-80% filters	Desirable but not required	Air cleaner capacity should at least cover the gap between the minimum requirement and the measured ventilation rate – compare the device clean air delivery rate (CADR) (m ³ /hr) with the room ventilation rate.	
1.5. Outlets for device charging		Consider <ul style="list-style-type: none"> • Rules for charging (e.g. 1h/per person in daytime) • Standardised DC (5 V) USB slots • Multiport chargers • A variety of common adapter wires 	
2. Water, Sanitation and Hygiene			
	Standards	Comments	Findings
2.1. Number and condition of toilets	<ul style="list-style-type: none"> • 1:50 ratio women and 1:50 ratio men • 1:250 ratio for disabled accessible toilet 	<p>Review cleanliness, accessibility, privacy (lockable doors), safety (illumination), availability of supplies, waste basket for menstrual hygiene management.</p> <p>In case portable/temporary toilets are used, confirm safe handling of human waste.</p> <p>Review queuing time.</p> <p>Consider higher proportion of female refugees travelling compared to males.</p>	
2.2. Number of hand hygiene stations	In several places throughout the centre at critical points, including in/at toilet areas and/or canteen areas	<p>Review functionality, availability of soap, queuing time.</p> <p>Should be distributed in several places around the centre.</p> <p>ABHR sanitizers should contain 60-80% alcohol.</p>	
2.3. Water supply		<p>Confirm uninterrupted availability of clean drinking water from municipal supplies meeting national quality standards.</p> <p>Review queuing time.</p>	
2.4. Solid waste management	1:50 people (waste bin)	<p>Waste bins near all waste generation sites.</p> <p>Review general cleanliness.</p>	
2.5. Cleanliness condition		<p>Rooms, main reception, and hosting area should be cleaned and disinfected at least once per day.</p> <p>Review whether linen and reusable items are changed/cleaned before new occupant.</p>	

2.6. Number of showers	1:50 people (gender-segregated)	Review cleanliness, accessibility, privacy, safety, lighting, availability of supplies. Consider higher proportion of female refugees travelling compared to male. Review queuing time.	
2.7. Hygiene kits (toothbrush/paste, soap, towels) and eating utensils	One per person	Ensure easy access and replacement as needed.	
2.8. Laundry facilities	1:250 people	Review functionality, availability of washing powder, drying facilities/machines.	
2.9. PPE for cleaners (goggle, masks, heavy-duty gloves, apron, boots)	1 set/person	Review availability of heavy-duty gloves, apron, boots, etc.	
2.10. Other individual items		Inspect while visiting washrooms/bathrooms.	
Change of clothing			
Sanitary pads/tampons		Ensure that these items are easily accessible (and people do not have to ask for them).	
Nappies and disposable wipes		Check for availability of baby and adult nappies. Ensure that these items are easily accessible .	
Baby changing station(s)	At least 1-2 per site	Review cleanliness, accessibility, privacy, safety, lighting, availability of supplies. Review queuing time. ABHR sanitizer or hand washing station should be close by or in the same area.	
ABHR sanitizers	In several places throughout the centre at critical points, including in/at toilet areas and/or canteen areas	Should be distributed in several places around the centre and contain 60-80% alcohol.	
Face masks	2-3 available per person/day	Medical and non-medical masks, according to local COVID-19 epidemiology and national guidance.	
3. Healthcare services			
	Standards	Comments	Findings
3.1. 24/7 First aid capacity	24/7 capabilities needed	Procedures and capacity to refer to national health facilities needed.	

3.2. Exam room	At least one per site	Room with a closing door.	
3.3. PPE for patient care (gloves, masks, gowns, goggles as appropriate)	Gown and goggles as needed – minimum five sets per shift available	Gloves and mask recommended for each medical exam. These PPE items should be freely available.	
3.4. ABHR sanitizers	One by each exam bed in the room	Should contain 60-80% alcohol.	
3.5. Waste bins, sharp boxes	One by each exam bed in the room Minimum one per room		
3.6. Soap and disinfectants for environmental cleaning and disinfection		Monitor cleaning of exam bed after each patient Cleaning of exam room by professional cleaners at least once per eight-hour shift.	
3.7. Quarantine room for a potentially infectious patient	One such room needed for this situation	Room with a door and adequate ventilation. Can be formed with a tent outside the main facility. Procedures and capacity to refer to national health facilities needed. Procedure available to notify centre coordinator and local public health about detection of possible outbreak.	
3.8. Psychological first aid	24/7 capabilities needed	Capacity to refer to national mental health facilities may be needed 24/7.	
3.9. If other health services are provided (consultation including mental health and psychosocial support, prescription etc)		Separate room needed or stations at least 1.5m apart. Consider use of separating screen(s).	
4. Health information			
	Standards	Comments	Findings
4.1. Basic health information (posters etc) available in the relevant languages (of host country and country of origin of refugees)		Assess presence throughout the site Review key information available on ambulance hotlines, health hotlines in Ukrainian (posters, leaflets, QR codes or similar).	
4.2. Posters/leaflets with information about infectious diseases/symptoms of concern available in the relevant languages (of host country and country of origin of refugees)		Requirements may change according to the epidemiological situation.	
4.3. Information on vaccines offered in the relevant languages (of host country and country of origin of refugees) available in the relevant languages (of host country and country of origin of refugees)		Assess presence throughout the site.	

Situation 3. Collective accommodation centres and longer-term sites, as defined by respective governments (expected duration of stay > 10 days)

Name/contact details site/centre manager: _____

Name/contact details of site assessor: _____

1. Physical Infrastructure

	Standards	Comments	Findings
1.1. Number of people accommodated			
Bed capacity		Absolute numbers and current occupancy.	
Surge capacity		Describe surge mechanism in place, if any .	
1.2. Bed linen per person	2 sets per person		
1.3. Spacing between beds	At least 1.5 m distance	Does not apply to family accommodation, use standard for mixed accommodation of e.g. refugees traveling alone. Segregate male/female people traveling alone.	
1.4. Ventilation			
Natural ventilation	Minimum recommended ventilation rate: 10 L/s/person		
Mechanical ventilation	Minimum recommended ventilation rate: 10 L/s/person		
Portable air cleaners with MERV 14/ISO ePM1 70-80% filters	Desirable but not required	Air cleaner capacity should at least cover the gap between the minimum requirement and the measured ventilation rate – compare the device clean air delivery rate (CADR) (m ³ /hr) with the room ventilation rate.	
1.5. Outlets for device charging		Consider <ul style="list-style-type: none"> • Rules for charging (e.g. 1h/per person in daytime) • Standardised DC (5 V) USB slots • Multiport chargers • A variety of common adapter wires 	

2. Water, Sanitation and Hygiene

	Standards	Comments	Findings
2.1. Number and condition of toilets	• 1:20 ratio women and 1:20 ratio men	Only applicable if not provided as family accommodation with bathrooms. Review cleanliness, accessibility, privacy (lockable doors), safety (illumination), availability of supplies, waste basket for menstrual hygiene management.	

	<ul style="list-style-type: none"> • 1:250 ratio for disabled accessible toilet 	<p>In case portable/temporary toilets are used, confirm safe handling of human waste. Review queuing time. Consider higher proportion of female refugees travelling compared to males.</p>	
2.2. Number of hand hygiene stations	In several places throughout the centre at critical points, including in/at toilet areas and/or canteen areas	<p>Only applicable if not provided as family accommodation with bathrooms. Review functionality, availability of soap. Should be distributed in several places around the centre. Alcohol-based hand rub sanitizers should contain 60-80% alcohol. Review queuing time.</p>	
2.3. Water supply	1:50 people	<p>Confirm uninterrupted availability of clean drinking water from municipal supplies meeting national quality standards. Review queuing time.</p>	
2.4. Solid waste management	1:50 people (waste bin)	<p>Only applicable if not provided as family accommodation. Waste bins near all waste generation sites. Review general cleanliness.</p>	
2.5. Cleanliness condition		<p>Only applicable if not provided as family accommodation. Rooms and common areas including kitchen and bathroom should be cleaned at least once per day. Review whether linen and reusable items are changed/cleaned before new occupant.</p>	
2.6. Number of showers	1:20 people (gender-segregated)	<p>Only applicable if not provided as family accommodation with bathroom. Review cleanliness, accessibility, privacy, safety, lighting, availability of supplies. Consider higher proportion of female refugees travelling compared to male. Review queuing time.</p>	
2.7. Hygiene kits (toothbrush/paste, soap, towels)	One per person/month	<p>Only applicable if not covered by cash-based interventions. Ensure easy access and replacement as needed.</p>	
2.8. Laundry facilities	1:100 people	Review functionality, availability of washing powder, drying facilities/machines	
2.9. PPE for cleaners (goggle, masks, heavy-duty gloves, apron, boots)	1 set/person	Review availability of heavy-duty gloves, apron, boots etc	
2.10. Other individual items			
Change of clothing		Ensure clothes are washed before distribution	
Sanitary pads/tampons		If not provided under cash-based interventions: Ensure that these items are easily accessible (and people do not have to ask for them)	
Nappies and disposable wipes		If not provided under cash-based interventions: Check for availability of baby and adult nappies. Ensure that these items are easily accessible.	
ABHR sanitizers	In several places throughout the centre at critical points, including in/at toilet areas and/or canteen areas	Should be distributed in common areas in line with the epidemiological situation and national guidelines and contain 60-80% alcohol.	

Face masks	2-3 available per person/day	Medical and non-medical masks, according to local epidemiology and national guidance.	
3. Healthcare services			
	Standards	Comments	Findings
3.1. 24/7 First aid capacity	24/7 capabilities needed	Procedures and capacity to refer to national health facilities needed.	
3.2. Exam room	At least one per site or in line with national regulations	Room(s) with a closing door.	
3.3. PPE for patient care (gloves, masks, gowns, goggles as appropriate)	Gown and goggles as needed – minimum five sets per shift available	Gloves and mask recommended for each medical exam. These PPE items should be freely available.	
3.4. ABHR sanitizers	One by each exam bed in the room	Should contain 60-80% alcohol.	
3.5. Waste bins, sharp boxes	One by each exam bed in the room Minimum one per room		
3.6. Soap and disinfectants for environmental cleaning and disinfection		Monitor cleaning of exam bed after each patient. Cleaning of exam room by professional cleaners at least once per eight-hour shift.	
3.7. Quarantine room for a potentially infectious patient	At least one per site	Room with a door with adequate ventilation. Can be formed with a tent outside the main facility. Procedures and capacity to refer to national health facilities needed. Procedure available to notify centre coordinator and local public health about detection of possible outbreak.	
3.8. Psychological first aid	24/7 capabilities needed	Capacity to refer to national mental health facilities may be needed 24/7.	
3.9. If other health services are provided (consultation including mental health and psychosocial support, prescription etc)	One room per site	Procedures/arrangements for referral to national and/or civil society services. Separate room needed or stations at least 1.5m apart. Consider use of separating screen(s).	

4. Health information			
	Standards	Comments	Findings
4.1. Basic health information (posters etc) available in the relevant languages (of host country and country of origin of refugees), including pictograms		Assess presence throughout the site Review key information available on ambulance hotlines, health hotlines in Ukrainian (posters, leaflets, QR codes or similar).	
4.2. Posters/leaflets with information about infectious diseases/symptoms of concern available in the relevant languages (of host country and country of origin of refugees)		Requirements will change according to the epidemiological situation.	
4.3. Information on vaccines offered in the relevant languages (of host country and country of origin of refugees) available		Assess presence throughout the site.	
4.4. Cultural mediators	Collect absolute numbers and details as needed	Review access to cultural mediators or translators either on site or through existing network mechanisms.	

Key overarching resources

- SPHERE Handbook 2018. Available at: <https://spherestandards.org/wp-content/uploads/Sphere-Handbook-2018-EN.pdf>
- UNHCR Global Public Health Strategy 2022–2025. Available at: <https://www.unhcr.org/publications/brochures/612643544/unhcr-global-public-health-strategy-2021-2025.html>
- Handbook for public health capacity-building at ground crossings and cross-border collaboration. Geneva: World Health Organization. Available at: [2020
https://www.who.int/publications/i/item/handbook-for-public-health-capacity-building-at-ground-crossings-and-cross-border-collaboration](https://www.who.int/publications/i/item/handbook-for-public-health-capacity-building-at-ground-crossings-and-cross-border-collaboration)
- EASO Guidance on reception conditions: operational standards and indicators. Available at: https://euaa.europa.eu/sites/default/files/publications/EASO_Guidance_on_reception_conditions_-_operational_standards_and_indicators%5B3%5D.pdf

Physical infrastructures

- ECDC, Heating, ventilation and air-conditioning systems in the context of COVID-19: first update. Available at: <https://www.ecdc.europa.eu/en/publications-data/heating-ventilation-air-conditioning-systems-covid-19>
- ECDC, Guidance for the prevention and control of COVID-19 in temporary reception centres in the context of the large numbers of people fleeing Ukraine. Available at: <https://www.ecdc.europa.eu/en/publications-data/guidance-prevention-control-covid-19-temporary-reception-centres-people-fleeing-ukraine>
- UNHCR Regional WASH Strategy for Emergency Refugee Response in Europe 2015 – 2016/UNHCR WASH Manual. Available at: wash.unhcr.org
- WHO, Roadmap to improve and ensure good indoor ventilation in the context of COVID-19. Available at: <https://apps.who.int/iris/handle/10665/339857>.

Healthcare services and health information

- Information to guide individual health assessment of refugees fleeing the war in Ukraine - Considerations for healthcare workers. Available at: <https://www.ecdc.europa.eu/en/publications-data/information-guide-individual-health-assessment-refugees-fleeing-war-ukraine>
- Infographic: Infectious diseases to be considered for differential diagnosis among displaced people. Available at: <https://www.ecdc.europa.eu/en/publications-data/infographic-infectious-diseases-considered-for-differential-diagnosis-displaced-people>
- Guidance on vaccination and prevention of vaccine-preventable disease outbreaks for countries hosting refugees from Ukraine, April 2022 update. World Health Organization. Regional Office for Europe. Available at: <https://apps.who.int/iris/handle/10665/353408>.
- Infographic: Vaccinations to be offered in the absence of documented evidence of prior vaccination. Available at: <https://www.ecdc.europa.eu/en/publications-data/infographic-vaccinations-offered-absence-documented-prior-vaccination>
- Five keys to safer food manual. World Health Organization. Available at: <https://apps.who.int/iris/handle/10665/43546>