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

Inter-agency refugee HEALTH working group

Refugee emergency in the Republic of Moldova

- > Type of health care services offered in the country by
 - ☐ the national public health and health care providers &
 - □ international medical teams (EMTs, mobile clinics, NGOs, etc)
- Emergency care
- Primary health care, community, including MHPSS
- Hospital care
- Specialized care
- ➤ Medical evacuation third EU countries

Refugee health care provision in the Republic of Moldova - Daily weekly monthly - updates

(since 24 February 2022 as of 17 January 2023)

~15

PHC consultations per day

9 933

patients received primary health care

3 072

hospitalizations

297

pregnant women received primary health care

~41%

children among all PHC consultations

4 037

children received primary health care

1 487

children hospitalized

97

pregnant women hospitalized

Coordination and communication

- Ministry of Health focal point meetings (initial phase) coordination platform
- Coordination of health service delivery
 - MOH orders no 136, 166, 167, 168 etc
 - Contingency Plan approved by the MoH
- All health care services and supplies, including immunization free of charge
- Unique management center, created by the Government for coordination
- Green line for the Republic of Moldova 080080011
- Collection of the health system related Qs in the different phases of the emergency

Health system pillars and interventions

Health care service delivery

- Type of services, designation of the institutions
- List of essential medicines

Public health

Epidemic Preparedness and Response

- Regulation on refugee camp
- Immunization
- Outbreak prevention and response

Need assessment PSM

- Need assessment tool
- PSM chain and logistics
- Coordination of the procurement and delivery

Health System Response and Assurance of the Continuity of the Health Services

- Refugee and migrants
- Population of the country

Principles of the health care:

- Addressed to the target groups
- Primary health care is first level of care
- Not parallel systems and build on existing structures
- Equity of care and access between refugee and host populations
- Referral is a medical decision
- Transparency of process through consultation, clear communication and wide spread dissemination

Health System Response and Assurance of the Continuity of the Health Services

Health facilities and health services planning

- a) estimating health needs
- b) Immunization service delivery
- c) Identification of area for case management and possible extension of services
- d) case management including referrals protocols
- e) supplies: stockpiles, local sourcing etc...

Public health

Surveillance, early warning and response

- a) surveillance e-form fore refugees was developed (screening of migrants & health care services provided)
- b) training of staff
- c) protocols and pathways for laboratory services

Social mobilization, health information and education

- a) Health education activities related to potential outbreaks
- b) health messages: what messages to give out, how and where
- c) Risk communication

Protection of personnel (IPC) & COVID-19

- a) Infection prevention and control
- b) disease specific protection

Outbreak detection and management

- a) list of potential epidemics by camp, depending on local situation and past history
- b) guidelines on the way a specific disease outbreak will be responded to

Next steps

Update the Contingency plan for emergency preparedness and resp

Donor&partner combined need assessment

- Financial protection
- Coordinate the supplies management and distribution

Continuous risk assessment and adjustment of the scenarious

Thank you

