



Acute Operations

Sit Rep – Ukrainians Under Temporary Protective Directive 2022

Sit Rep Date:

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1. Situation Overview (summary)

- Total arrivals to date are over 15,000 Ukrainians. Tables below outline gender / age profiles and ports of arrival as at 29.03.22.

Arrivals to Ireland	15,294
Males	4,815
Females	10,072
Under 18	5,415
Over 18	9,060

- Over 13,000 of the arrivals have been into Dublin with additional arrivals in Rosslare (>1,000), Shannon and Cork.

2. Key updates / information for dissemination to hospital operations

(if you have not read this Sit Report before, please consult Appendix I for previous updates which contain additional information / resources / updates of relevance)

General health system updates:

- The interim health service support model that has been operational in Dublin Airport is now being replaced with a stable model under the governance of CHO 9. Along with the provision of generic health information, CoVid safety packs and support with medical card queries, the HSE are providing the following core health supports to those presenting as unwell:
 - Immediate medical assessment/ provision of prescriptions for existing conditions
 - Management of minor ailments and first aid requirements
 - Identification of immediate complex health issues which require pathways into secondary acute or community services (e.g. cancer and disability services)
- The HSE, in consultation with the IMO, has prepared a range of bespoke options for the provision of GP services to those in IPAS accommodation. CHOs are in the process of implementing the approaches which best suits local needs in the context of availability of GPs, numbers, and geographical distribution. In addition Safety Net are providing GP clinics to facilities located in Dublin and Out of Hours services are accessible to Ukrainians as required. Those in private accommodation can register with local GPs in the normal way under the GMS.
- Public Health Advice for Community Health Organisations in responding to the health needs of Ukrainians has been disseminated to all CHOs for operationalisation. A copy of this advice accompanies this report. Note Section 4 of PH Advice which states “**Guidance on health assessment for blood-borne viruses and TB will be provided in the coming days.**” A copy of this advice will be circulated when available.
- A streamlined Medical Card application process for the Ukrainian population is now in place. Given the volume of applications, there is a delay in the current processing time following application. The HSE website medical card section is replicated in Russian and Ukrainian and a Ukrainian and Russian version of the medical card form is available on the relevant replicated parts of the website. Ukrainian version application form https://www2.hse.ie/services/healthcare-in-ireland/medical-card-form_mc1-u-form_ukrainian.pdf

Translation Materials / Services Available in Ukrainian:

- A Ukrainian Interpreter / Translation Service has been contracted by the HSE for use by hospitals and other health services. The procedure for accessing interpretation / translation services is detailed below.
- The HSE has a range of translated booklets and posters available in Ukrainian for download at <https://www.hse.ie/eng/services/covid-19-resources-and-translations/translated-covid19-information/ukrainian-covid19-info.html>
- An emergency multi-lingual booklet (in Russian) which allows patients to point and indicate a range of demographic, clinical, maternity and discharge information is available at <https://www.hse.ie/eng/services/publications/socialinclusion/ema-russian.pdf>. This booklet is currently being translated into Ukrainian and will contain an additional section on COVID related information.

Hospital Specific:

- **Where queries arise about pathways to hospital care, hospitals (in their communications with GPs/Primary Care services) should emphasise that the standard referral pathways should be employed for referrals to secondary / tertiary care services.** No additional or alternative pathways are considered necessary at this stage.
- The registration of refugees with GPs is currently on-going but it is likely that hospitals will encounter presenting refugees without a registered GP. In such instances, hospitals, following treatment and at discharge should give a copy of the discharge summary / letter to the patient to present to the GP when they register. If the patient requires re-attendance at a hospital, this should be made clear to the patient at discharge (i.e. the need to return to the hospital or another hospital if they move locations in the interim). It is anticipated that the number of unregistered presenters should decrease in the near future as the system of GP registration increases.
- Guidance on the activity tracking of Ukrainians presenting to hospitals under the Temporary Protective Directive is currently being prepared by the HSE (in line with GDPR requirements). This guidance will be relevant for both BIU reporting and HIPE coding purposes. To introduce a rapid but practical system of data capture, the HSE will be proposing that system administrators introduce an additional item under the Nationality Code to include “Ukrainian – Temporary Protective Directive 2022”. The current “Ukrainian” nationally item should be left to distinguish those ordinarily resident in Ireland. This should be the common term used where system administrators introduce a registration item within the system workflows. In anticipation of this guidance, system administrators should commence consideration of the optimal introduction of a tracking item/field within their system.
- Guidance on the tracking of costs of Ukrainians presenting to hospitals has been issued to hospitals by HSE Corporate Finance. A standardised template for cost tracking has been circulated for implementation.
- It is recognised that whilst awaiting their medical card, some individuals may need access to prescription medicines. As an interim measure, while Ukrainian refugees are processed for medical cards in their own right as individuals, each CHO has been issued with a generic medical card so that pharmacy claims can be seamlessly reimbursed for essential medicines and costed back accurately to the Refugee crisis. Community pharmacies have been made aware of these generic numbers. Once the person has obtained their PPSN, they can apply for a medical card in their own right.
- Ukrainians seeking care under the Temporary Protective Directive are considered EU nationals and meet the criteria of “Ordinarily Resident in Ireland”. For access to other drug related schemes and to high tech drugs as part of their care, hospitals should follow the normal referral and application processes.
- Trauma Informed Care – Where hospital clinical services wish to know more about developing a trauma informed care approach within their service a number of short video presentations can be accessed. Links to these are: <https://www.youtube.com/watch?v=fdsuHGPzBJI> (approx. 8 mins) or https://www.youtube.com/watch?v=6_hyGmtXYc (approx. 1 hour).
Module 3 of the Intercultural E-learning Programme on HSE Land (https://www.hseland.ie/ekp/servlet/ekp?PX=N&TEACHREVIEW=N&PTX=&CID=EKP000002615&TX=FORMAT1&LANGUAGE_TAG=0&DECORATEPAGE=N) contains information on trauma informed care as well.
- Psychosocial supports are available on the HSE website at <https://www2.hse.ie/services/mental-health/services-search/> or via the HSE YourMentalHealth Information line at Freephone 1800 111 888.

Booking process

1. Book in advance where possible. If not possible, due to an unscheduled or emergency presentation, please contact **021 431 6022 (24hrs)** and the request for interpretation will be endeavoured to be met within a 1 hour period for face to face interpretation (dependent on geographical location) or within a 30 minute period for Telephone/video conferencing interpretation. Interpretation is available on a 24/7 basis. Information below outlines the service provider commitments

For an interim period, the HSE will incur the costs of required Ukrainian / Russian Translation services for all HSE / Voluntary Hospitals.

2. To book an interpreter with the appropriate language, phone Access Translations: **021 431 6022**. Access Translations will confirm the appropriate procedure to follow to access an interpreter. The procedure will be similar for scheduled and unscheduled interpretation services, differing only in the required timeframe for the session.

3. Those booking the service must provide the following information for the purposes of monitoring quality and audit expenditure:

- Name of Staff Member
- Job Title
- Contact Telephone Number
- Email address
- Department Name
- Location/Address of Department
- Patient Name
- Patient Hospital Number or Date of Birth or Order Reference Number
- Type of service required e.g. phone, video conferencing or onsite*

**In very exceptional circumstances, it may be necessary to have an interpreter on site, for example to convey bad news regarding a patient's health. The on-site service, however, is very costly and should only be used when absolutely crucial.*

4. Following the completion of the interpretation session, the hospital will need to confirm with Access Translation that the service has been provided. This will be undertaken as follows (the reference number being the most significant administrative detail to capture):-

- The hospital should email info@access-translations.com with the reference number provided by the Interpreter and confirm date and time of service.
- On site interpretation: Sign Record of Attendance provided by the Interpreter

5. In the event that the Interpretation Service needs to be cancelled, this must be done at least 24 Hours in advance of the booking appointment, otherwise cancellation charges will be incurred.

Steps on conducting an interpretation session

- When the interpreter makes contact with the health service, check his/her identification and record the interpreter's name and ID number in the clients notes.
- Brief the interpreter as to what is required.

- Introduce the interpreter to the client.

Service Provider Commitment

- The Service Provider guarantees that they are contactable by phone at all times 24/7.
- The Service Provider, will, in the event of non-attendance by an interpreter, provide a replacement within a 1 hour period for Consecutive Interpretation or within a 30 minute period for Telephone Interpretation.
- All telephone interpretations will be monitored by a third party.
- The Service Provider agrees that each request for interpretation will be serviced from the nearest available interpreter.
- The Service Provider agrees that in the event of separate departments, at the same or nearby locations, requiring the same language interpretation, that in the interest of economy, the same interpreter will be used, where possible.
- The Service Provider will maintain a Record of Attendance or Confirmation of Service Provision for all Interpretation jobs undertaken.

Additional

NOTE: Please see the support available on the Emergency Multilingual Aid section of the HSE web site (<http://www.hse.ie/eng/services/Publications/SocialInclusion/EMA.html>) and also “On Speaking Terms: Good Practice Guidelines for HSE staff in the Provision of Interpreting Services” at (<http://www.hse.ie/eng/services/publications/SocialInclusion/emaspeaking.pdf>) These Guidelines have been compiled by the HSE’s Social Inclusion Unit (Office of the CEO) and the Health Promoting Hospitals Network – National Intercultural Hospital Initiative.

3. Activity Summary and Impact

	Impact	Additional Information
RCSI	A number of hospitals have had a small number of presentations to date	
IEHG	A number of hospitals have had a small number of presentations to date	
DM	A number of hospitals have had a small number of presentations to date	
UL	A number of hospitals have had a small number of presentations to date	
Saolta	A number of hospitals have had a small number of presentations to date	
SSW	A number of hospitals have had a small number of presentations to date	
CHI	Presentation to CHI services has been increasing in the last week. Inclusion Health Service is linking with community services to provide support.	
NCCP	Some referrals to date but no large impact	

4. Operational preparedness actions

Relevance	Issue	Additional Information
Patient System Administrators	Requirement to consider optimal system adjustment to track associated presentations / admissions under the Temporary Protective Directive	Guidance to issue shortly to detail specifics and reporting mechanisms via Acute BIU / HIPE
Finance Managers	Requirement to track costs associated with hospital related activity / expenditure	Finance managers should review guidance for implementation
All Hospitals	Public Health advice particularly relating to the identification, reporting and management of blood borne viruses / TB	Hospitals should ensure relevant PH advice is circulated to relevant clinical services and laboratory managers
All Hospitals	Translation services / materials	Hospital should ensure awareness of all staff but in particular unscheduled care services of translation service access procedure
All Hospitals	Hospitals should ensure CHO contact points for service issues that need escalation are known by relevant hospital staff (e.g. bed managers, discharge co-ordinators, social work services, outreach teams, etc.)	Hospitals should use the normal communication / escalation points to contact CHOs or raise issues via Hospital Group rep on ACMT
Hospital Pharmacies	Hospital pharmacies to be aware of the availability of CHO generic medical card process for patients discharged without a medical card requiring a prescription	Community pharmacies have been made aware of these generic numbers
All Hospitals	Hospitals should be aware of HSE Psychosocial Supports available for Ukrainians (and other patients)	See HSE website Mental Health Supports Page / Freephone number

Maternity Units	Awareness of Rotunda rapid access clinic for urgent obstetric referrals	See Appendix I 16.03.22 update for details
Social Work Services	SWS are aware of Ukrainian medical card application form and simplified process	SWS are also aware of PPSN application process

5. Media / communication issues arising

	Hospital	Issue	Additional Information
All hospitals		None at this point	
RCSI			
IEHG			
DM			
UL			
Saolta			
SSW			
CHI			

6. Issues requiring escalation / national input

	Hospital	Issue	Additional Information
All hospitals		None at this point	
RCSI			
IEHG			
DM			
UL			
Saolta			
SSW			
CHI			

Appendix I – Previous Sit Reports Updates

Key updates / information for dissemination to hospital operations @ 16.03.22

Overall:

- Health specific information about HSE services for Ukrainian refugees is now available on the HSE website at www.hse.ie/ukraine. This website page is available in Ukrainian (<https://www2.hse.ie/services/healthcare-in-ireland/ukraine-nationals-uk.html>) and Russian.
- A Ukrainian Interpreter / Translation Service has been contracted by the HSE for use by hospitals and other health services. The procedure for accessing interpretation / translation services is detailed below.
- An English / Russian phrase book to assist in medical situations is available at: <https://www.hse.ie/eng/services/publications/socialinclusion/ema-russian.pdf>
- Public Health are not currently recommending standard TB testing of presenting cases (in the absence of clinical suspicion / indications for testing).
- Further guidance on the tracking of Ukrainian Refugees on patient administration systems will follow shortly.

Hospital Specific:

- **Where queries arise about pathways to hospital care, hospitals (in their communications with GPs/Primary Care services) should emphasise that the standard referral pathways should be employed for referrals to secondary / tertiary care services.** No additional or alternative pathways are considered necessary at this stage.
- The registration of refugees with GPs is currently on-going but it is likely that hospitals will encounter presenting refugees without a registered GP. In such instances, hospitals, following treatment and at discharge should give a copy of the discharge summary / letter to the patient to present to the GP when they register. If the patient requires re-attendance at a hospital, this should be made clear to the patient at discharge (i.e. the need to return to the hospital or another hospital if they move locations in the interim). It is anticipated that the number of unregistered presenters should decrease in the near future as the system of GP registration increases.
- Where presentations significantly increase in the future, hospitals are reminded of the continuing availability of SafetyNet to facilitate additional overall hospital capacity where required. The standard referral and administrative processes should be used.
- The normal referral pathways for maternity cases will apply. However, in addition and as a supplementary urgent referral service, for pregnant women near term (> 32 weeks) or those who require urgent access for assessment, the Rotunda Hospital has put in place a Ukrainian specific access clinic. The details for referral point are: Fiona Hanrahan 087 056 8299 or ghanrahan@rotunda.ie. Hospitals in the Greater Dublin area may wish to promote the availability of this clinic in their Hospital / GP liaison committees.
- For other maternity cases, hospitals should schedule an appointment as soon as possible to establish contact and assess any additional health needs. Maternity services nationally have indicated their support for establishing early contact with attending women.
- Until formal guidance issued, the following should be used as the guiding approach for any refugees presenting at hospitals
 - Presenting refugees for care should be registered as EU nationals
 - No hospital related charges should be raised for care / admissions.

Additional:

- The Irish Cancer Society now have a page live (<https://www.cancer.ie/ukraine>) which hosts a range of information on cancer support services in Ukrainian. The ICS will also be shortly appointing a Ukrainian Cancer Coordinator. Details of contact points will follow when available.

Key updates / information for dissemination to hospital operations @ 10.03.22

Overall:

- The HSE has established a planning and operations group to oversee the development of a framework for managing the health related aspects of refugee needs
- The HSE will shortly issue guidance to the system on the care and administrative processes for all services to utilise. This will be circulated when available.
- HSE PCRS has commenced issuing temporary medical cards to arriving refugees
- The HSE is developing a system of access to Ukrainian translation services which will be made available once operational
- Public Health will be involved in the health assessment process and monitor requirements.
- In the short term, a number of designated GPs will see and refer patients in line with normal referral pathways.
- The HSE is developing an information website for refugees to provide relevant information on health services and access points

Hospital Specific

- All offers of support or any additional relevant information should be directed in the first instance to your HG designated lead for communication into the national operations group
- Hospitals should provide a basic summary of refugee related activity to their HG representative to ensure awareness of impact / operational issues arising
- Until formal guidance issued, the following should be used as the guiding approach for any refugees presenting at hospitals
 - Presenting refugees for care should be registered as EU nationals
 - No hospital related charges should be raised for care / admissions.