Ukrainian Health Response High Level Update October 2022 Introduction and summary overview

This paper provides an update to the high level paper on the HSE planning and service delivery health response for displaced persons from Ukraine which was shared on 16th September 2022, on behalf of the HSE's Ukrainian Health Response Planning and Coordination Group. The focus of the work by this group has been expanded to include the health response for international protection applicants (IPAs) due to: the parallel surge in arrivals from this population; the common accommodation model employed by DCEDIY; equivalent eligibility for health services - all leading to similar increases in service demand.

The paper provides an overview of the current situation regarding volumes of displaced people arriving into Ireland and their accommodation arrangements. It also summarises the current operational response and planning work to deliver a future whole-of-organisation service delivery model in the context of the ongoing emergency response to the war in Ukraine and continuing arrivals. The updated risk register is included in appendix one.

Arrival Trends: Displaced Ukrainians and IPAs

The total number of displaced Ukrainians arriving in to Ireland stands at 53,239 as at 13th October 2022. There was a large increase in the number of arrivals in the last seven days: 5th October saw the largest number of arrivals in a single day since the 23rd June 2022. The Department of Justice (DoJ) are tracking this spike in arrivals to see if this is part of a longer term increasing trend.

DoJ analysis now estimates approximately 56,000 arrivals of displaced people from Ukraine into Ireland by the end of October 2022. There is a potential for a further increase in arrivals over the current anticipated figures as winter approaches. Currently, there are seven million people internally displaced within the Ukraine according to the International Organisation for Migration (IOM), United Nations. There are areas where the internal infrastructure has been destroyed. This has led to a range of significant problems, including health problems and food shortages within Ukraine. As winter approaches and hardships increase for the population, there may be a greater external displacement of people, leading to increasing arrivals into Ireland and elsewhere.

The demographic profile of Ukrainian arrivals into Ireland remains relatively stable with the majority being female (67%). Approximately 32% of arrivals are under the age of 18 years.

Arrival trends for IPAs are following similar patterns to those of the Ukrainian population. Approximately 11,000 IPAs have arrived into Ireland year to date, which is over 3 times higher than estimated average annual arrivals of 3,500 (White Paper on ending Direct Provision, DCEDIY 2021). The DCEDIY are projecting a total of 15,000 arrivals by year end.

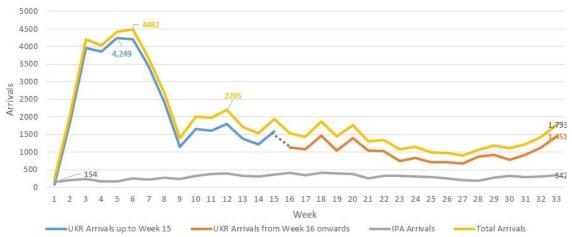


Figure 1. Arrival Trends since the start of the Ukr War; Ukr and IPA

Accommodation

Settings

To date 42,140 Ukrainians have sought State provided accommodation since arriving in Ireland and are now living in approximately 690 facilities across the country. Approximately 15,738 IPAs are accommodated within 132 facilities, some of which are shared with Ukrainians.

The DCEDIY has advised that sourcing additional accommodation to house new arrivals from both population cohorts is becoming increasing difficult and that the line of sight for accommodation coming on stream is now very short.

The accommodation model continues to pose significant challenges for Health teams. The distribution of facilities across Ireland continues to be uneven. The dispersal pattern makes it very labour intensive for health service teams to visit all sites to conduct a first health response. The access to primary and community care services is often more challenging in rural areas relative to urban centres, and this can be exacerbated due to inadequate transport options making it difficult for people to travel to urban centres for services. The unstable nature of accommodation is also an issue and can lead to disruptions in health care and may impact negatively on the health and wellbeing of those impacted.

The greatest challenge however continues to be access to GP services. Most CHOs are experiencing some localised challenges at a minimum although for many it is more widespread, with constraints being felt at county and across county level. Opportunities to enhance, augment and supplement GP services continue to be explored as part of the design work on the future whole-of-organisation' service delivery model for Ukrainian and IPA populations which is underway at present.

Congregated living arrangements continue to give rise to the risk of Covid-19 and other infectious disease outbreaks. In order to manage and mitigate this risk, the HSE opened an isolation accommodation facility in St. Itas, Portrane, from 19th September 2022, which is currently supporting patients with Covid and Monkeypox (not from IPA or Ukrainian population at this time, however; the service is available for all populations).

The DCEDIY in conjunction with Local Authorities (LAs) are working to address the near total reliance on serviced and congregated living arrangements for Ukrainians however there are acknowledged challenges in this regard which predominantly relate to the pace and scale at which modular homes, vacant homes and pledged accommodation can be brought on stream. This, coupled with the near

certainty of ongoing arrivals means that there will be a continued need for the HSE to deliver services into widely dispersed congregated living arrangements into the future.

HSE First Health Response Citywest National Transit Centre

The National Transit Centre in Citywest continues to be used by the DCEDIY for the processing of Ukrainian arrivals and as emergency accommodation for IPAs. Due to the pressure on accommodation, the volume of people on site regularly exceeds maximum levels and creates a challenging living and working environment. It is unlikely that there will be any material change to this situation in the short term.

There is a targeted health response on site for each population group. Ukrainians continue to be able to avail of clinical triage and intervention, complete individual health questionnaires and receive information on the Irish Health Services. The IPA model on site is now being expanded. In addition to clinical triage and support, IPAs will be able to partake in Infectious Disease screening and referral. Heretofore this would have been available to IPAs as they transmitted through the National Reception Centre (for asylum seekers) in Baleseskin, however this facility has predominantly been in use as an accommodations centre since the surge in arrivals commenced with very limited by new arrivals. Colleagues in Public Health will also be commencing a pilot of the health questionnaire with IPAs.

Ukraine and IPA Health Response Service Delivery Model

Health services continue to be delivered to the Ukraine and IPA populations by acute and community services as per previous reports. The design of the future 'whole-of-organisation' service delivery model for Ukrainian and IPA populations is progressing with a completion timeline of mid-end November 2022. Service model options will incorporate the first health response for people when they arrive at their accommodation, acute services, primary and community services, integrated Paediatric services, and public health and disease management programmes (infectious disease testing and catch up vaccinations).

In developing this model it is recognised that in the short to medium term it will continue to be shaped by the DCEDIY accommodation model and that the scope, access to and responsiveness of services will be impacted by ongoing and increasing demand and finite health resources.

Representatives of the HSE National Ukrainian Health Response Planning and Coordination Group have met with policy units of the Department of Health (DoH) to advise of the scale and complexity of the service delivery challenge for these migrant populations and to discuss the future funding model in the context of the whole of Government approach to the Humanitarian Crisis. This is part of ongoing frequent engagement with the DoH and other governmental partners as part of the health service planning response.

The HSE has submitted New Service Development bids to the Department of Health as part of the 2023 Service Planning process to help address resourcing requirements to deliver the necessary health service response. The HSE will have more granular detail on the 2023 costings for Ukraine and IPA services on the basis of the new model being developed which will also incorporate the existing level of service. This will feed into the estimates process for the health response. The HSE is currently experiencing capacity issues constraining the provision of access to some services, in particular GP services as referenced above, and this will be compounded going forward if adequate ring-fenced funding is not secured in the 2023 allocations.

Ukraine and IPA Emergency Response Risks

Risks and mitigating actions (at 14th October 2022) are set out in appendix one. Changes that have been made to risk descriptions, mitigating actions or RAG status are highlighted in the *Comment* column. Please note this risk register is a working document and is being kept under weekly review. The Risk Register is shared with the Department of Health on a weekly basis and with the Humanitarian SOG as requested.

On behalf of Dr. Stephanie O'Keeffe, Chair, HSE National Ukrainian Health Response Planning and Coordination Group

Appendix 1 Ukraine Health Response Planning and Coordination Group Risk Register (working document)

Ref No.	Risk Description	RAG	Mitigating Action	Owner	Comment
1	Risk of COVID-19 transmission and outbreaks of other illnesses/infectious diseases in high-density and dormitory style emergency accommodation where there is no capacity for isolation of those who are symptomatic. Linked to this, in Citywest Transit Centre is the challenge of being unable at this time to record bed assignment to facilitate contact tracing.		 Implementation of the guidance document Public Health Advisory REF No. 004 v1 (PH & Clinical priorities) Provide access to COVID vaccination clinics for people in temporary accommodation settings Public Health guidance documents have been developed by HSE PH, issued to the system, uploaded onto HPSC website and shared with Local Authorities. They are shared with facilities by Community health teams HSE Chief Clinical Officer escalated risk of outbreaks resulting from congregated living arrangements to SOG 18th May 2022. Mitigation proposed; implement Person in change model in all sites and provision of Isolation accommodation HSE CEO escalated risks associated with communal living arrangements and the need for isolation facilities to DoH on 8th July 2022. Address the current issue of those presenting with symptoms of COVID or otherwise being placed in congregated settings. Public Health Clinicians CHO 7 are working closely with DCEDIY to address public health requirements on site in Citywest including the requirement for a system to record bed assignment. HSE provided Isolation accommodation is opening in St Itas in Portrane from mid Sept to support the isolation 	External to HSE DCEDIY and HSE	Risk description updated 26/08/2022 Mitigating actions updated 08/06/22 and 26/08/22

2	Unstable Accommodation Model Ongoing risk that facilities providing accommodation to Ukr/ IPA will choose not to renew contracts with DCEDIY once they end Use of short term/ student accommodation which results in Ukr/ IPA having to be rehoused once the accommodation is required for its original use	requirements for those in Citywest and other centres. HSE is also working to identify suitable locations for the placement of 10 modular units that can function as isolation accommodation • Development and communication of a medium term accommodation strategy to set expectations for people living here and ensuring the next phase of accommodation is stable and allows for full community integration and settlement	External to HSE	Risk description updated 26/08/22
3	Risk to the effective delivery of the agreed service delivery model at the Citywest National Transit Centre due to decision to process/accommodate both Ukrainian arrivals and non-Ukr arrivals in Citywest.	 Escalate risks posed by decision to process and accommodate both Ukrainian arrivals and non-Ukr arrivals on site in Citywest to SOG and DCEDIY via DoH given impact on agreed service delivery model (escalated to DoH 24/06/22). Emergency tented accommodation opened in Gormanstown on 19th July to allow Ukr to be fast-tracked through Citywest. Closed as of 7th October. No immediate impact on Ukr transit through Citywest Dedicated health services are now being delivered to the Ukr and IPA populations separately in Citywest HSE Isolation accommodation opened in St. Ita's Portrane 19th September 2022 	HSE	New Risk added 24/06/22 and escalated to DoH 24/06/22 Mitigations updated 26/08/22 and 14/10/22
4	The ability of Irish health services to deliver a fit for purpose health response to the incoming Ukr and IPA	A working group has been established to scope and design a future 'whole-of-	HSE	New Risk added 15/09/22

	populations will be increasingly constrained in the context of their growing numbers and the resulting demand for services.	organisation' service delivery model to meet the health and social care needs of the incoming populations which takes account of; - Increasing arrivals and associated demand on health services		Risk mitigations section updated 14/10/22
		 accommodation model in use Uneven geographical distribution of populations across Ireland Specific health needs of 		
		incoming populations - Known health service capacity challenges. This model will have funding dependencies. HSE is working with DoH on the funding model for the Ukr and IPA service delivery model in 2023.		
5	Some people from the Ukraine are being located in areas with very poor service access, e.g. very rural locations. This may result in a reduced or emergency service only depending on location	 Liaise with DCEDIY on agreed vulnerabilities and work to locate people in urban areas close to health services where a specific need has been identified Guidance developed for DCEDIY and HSE regarding the location of Acute Hospital facilities and their specialties to inform the placement of individuals/ families with complex needs Establish a complex case review forum between HSE and DCEDIY to support the appropriate placement of individuals/ families with complex/ special needs A case co-ordination function is being established for Ukrainians who have an identified acute medical need and require assistance with information, signposting, 	Citywest health team and NSIO	Mitigating actions updated 27/04/22, 16/06/22 and 15/09/22

			accessing or linking with		
			accessing or linking with acute hospital care		
		_	Future Ukr/ IPA Service		
		•	delivery model will establish		
			standardized pathways and		
			referral protocols and seek to		
			leverage virtual services to		
			address regional and local		
			access gaps		
6	Localised inability to provide	•	Put measures in place to	Operational	Mitigating
	the necessary level of GP care		support retired GPs to return	Services	actions updated
	due to shortages of GP capacity to provide sessional services in		to work to provide services as		20/05/22
	shared accommodation or	_	needed in specific CHOs Establish interim GP		This risk was re-
	where GP lists are full in	•			rated to red
	locations with existing high		arrangements as per suitable options outlined in <i>Access to</i>		(high risk) from
	level of demand		GP Framework developed in		amber (medium
	lever or demand		conjunction, including		risk) 27/04/22
			weekend and OOH cover		,, , , ,
		•	Maximize Safetynet services		Risk desc.
			where available		updated
		•	Provision of additional clinics		16/06/22
			from GP OOH providers in		Actions updated
			agreement with CHOs		09/09/22
		•	ACMTs to monitor GP		
			capacity locally for early		
			identification of service		
			pressures and constraints.		
			Specific identified pressure		
			points will be escalated to		
			SOG via DoH as required		
		•	Full roll-out Citywest health		
			model; includes an Individual		
			health questionnaire		
			targeting all arrivals and is underpinned with GP		
			presence. This may alleviate		
			immediate/short-term GP		
			demand by addressing		
			immediate health needs and		
			influencing the immediate		
			accommodation allocation to		
			areas of appropriate health		
			service capacity as required		
		•	Future approach to the		
			delivery of GP services		
			delivery will be considered by		
			the future Ukr/IPA Health		
			Response Service Delivery		
			Group in the context of the		

		•	future whole of organisation operating model In conjunction with the Geo Mapping sub group of the Data SOG, analyse where health services have greater capacity and use this to inform the longer term accommodation plan	Data and Informatics Workstream	
7	People may find it challenging to navigate health services or know how to access services. This may result in less than optimal health outcomes	•	A Ukraine specific page on the HSE website provides the introduction to Irish health services and how to access them. Information is available in English, Ukrainian and Russian and is also delivered via a series of videos. It also includes resources for people who need specialist services like disability services, maternity and unplanned pregnancy care, sexual assault treatment and many more A wide range of health information resources have been translated, printed and distributed to services and facilities accommodating displaced Ukrainians A case co-ordination function is being established for Ukrainians who have an identified acute medical need and require assistance with information, signposting, accessing or linking with acute hospital care	Acute Operations National Strategic Comms	Risk added June 2022
8	A coordinated planning approach is required to support the movement of people with a high level of needs from congregated settings in UKR to Ireland. Without this, there is a risk that access to services or suitable accommodation will be sub-optimal	•	National disability services engaging with NGO umbrella groups to coordinate the response around people with specific needs from congregated settings in the Ukraine being brought to Ireland Gaining information on the requirements of the incoming population in order to better understand the	Disability Workstream	Risk description updated on 27/04/22

9	Localised risk to the delivery of National Service Plan priorities as services are redirected towards the Humanitarian response	•	services required and place accordingly Set out appropriate referral routes between community and acute secondary care services and specialist care/tertiary care Agree priorities for National Service Delivery Plan and communicate same with relevant stakeholders	Community Operations	Risk Description updated and rerated from red to Amber. Risk to the delivery of Service plan priorities is not manifesting at national level. More likely to be experienced at CHO level due to the need to mobilise an urgent health response
10	There is a risk that sub-optimal vaccination rates in Ukr and IPA children and adults resulting from low uptake rates or interruptions to vaccination schedules as a result of the war could result in outbreaks of vaccine preventable disease in communal accommodation settings and in the wider extant population. This would result in avoidable morbidity and mortality and increased pressure on health services	•	The testing and Vaccination Services Sub-Group of the National Ukr Health Response Planning and Co- ordination Group will scope and define delivery options for; a systematic Programme of Testing and referral of the incoming displaced Ukr population for Blood Borne Viruses (BBV) and a systematic Programme of age-appropriate vaccination for all migrant children, up to the age of 23 years, against vaccine preventable illness in line with the Irish Immunization Schedule	The Testing and Vaccination Services Sub-Group of the National Ukr Health Response Planning and Coordination Group	New Risk added 12/08/22 Mitigations updated 26/08/22 and 09/09/22
11	The incidence and prevalence of some Blood Borne Viruses are higher in Ukraine and in other migrant populations than in Ireland. Arrivals of large numbers of displaced Ukr and IPA will impact on the epidemiology of each of these diseases in Ireland	•	The testing and Vaccination Services Sub-Group of the National Ukr Health Response Planning and Co- ordination Group will scope and define delivery options for; a systematic Programme of Testing and referral of the	The Testing and Vaccination Services Sub-Group of the National Ukr Health Response Planning and Co-ordination Group	New Risk added 12/08/22 Mitigations updated 26/08/22 and 09/09/22

12	As Ukr and IPA arrivals increase, detailed understanding of service need and activity is required to plan a robust longer term model of services and supports, to report on activity to stakeholders and to secure funding for service developments	incoming displaced Ukr population for Blood Borne Viruses (BBV) and • a systematic Programme of age-appropriate vaccination for all migrant children, up to the age of 23 years, against vaccine preventable illness in line with the Irish Immunization Schedule • Activity reporting for Acute Hospital activity is in place • Ukr health response dashboard reporting capability has been developed • Activity reporting for Citywest health response model is in place • Community activity reporting including public health as relevant are required to be put in place (short term reporting for now while medium term automated options scoped) • National Health Intelligence Unit (NHIU) will analyse Heath Questionnaire data coupled with geographical distribution data to model future demand for services	New Risk added 12/08/22 Mitigating actions updated 26/08/22
13	Financial and spending risks and system development to provide estimates and track financial spending related to the emergency response	 Cost Centres issued to system to facilitate tracking of costs associated with UKR activity and enable financial reporting HIPE Coding in Acute Hospitals will facilitate ABF for UKR Activity. 	All mitigating actions updated 27/04/22
14	People with disabilities arriving into private, non DCEDIY accommodation may not be flagged to HSE services for assessments of needs	Information will be provided on HSE Ukrainian landing page on how Ukrainians with disabilities can self-refer to services	Mitigating action wording revised 28/04/22

15	Risk of people with disabilities being placed in temporary DCEDIY accommodation without access to specialist supports or in pledged housing/other without adaptations	 Other mitigations to be developed by the workstream. Pathway in place for notification of persons with disabilities via IPAS HoD will arrange for disability needs assessment to be conducted. Specific needs identified will be communicated to the Area Crisis Management team to inform the allocation of appropriate long term accommodation Other mitigations to be developed by relevant workstream. 	
16	Unstructured and uncoordinated approaches to Ukrainians in IPAS hotels by non-authorized groups/ self-nominated individuals, (vetting status unknown) with offers of support. This gives rise to an infection control and safeguarding risks	Risk escalated and discussed with the DoH (24 th March; 30 th March and 6 th April); DoH raised with SOG etc. DOH/IPAS/DCEDIY	Mitigating actions updated
17	Different expectations of incoming Ukrainian population regarding service availability e.g. the scope of termination of pregnancy services or waiting times to access other health services, such as, orthodontics, disability CDNT, MH assessments etc.	 www.hse.ie/ukraine. provides the introduction to Irish health services and how to access them as per risk #5 Complete translation of yourmentalhealth.ie Provide clear advice and information to Ukrainians in Citywest following the completion of individual questionnaires as to how services are accessed and where there may be delays in accessing scheduled care and other services 	Update to risk description and mitigating action 27/04/22 Additional mitigating actions added 16/06/22
18	This incoming population will give rise to increased demand on health services exacerbating existing waiting list and access challenges in some areas (i.e. disabilities, MH)	 Clear communication to the system on the management of UKR pathways in the context of extant waiting lists and access issues Demand and capacity modelling to understand the actual impact on services National Operational Services Data and Informatics Workstream 	Update to risk description and mitigating actions 28/04/22 Risk re-rated to amber from red 16/06/22

		National operational services		Challenges are
		to map services (with locations) already under		likely to be localised.
		significant service challenge, those approaching the		Analysis of accommodation,
		tipping point, need escalation		demographics
		pathway		and health needs data will
		 Communication of impact to DoH and other stakeholders 		provide greater
		 Prioritisation of urgent care and supports 		insight
19	The unstable accommodation	Escalated to DoH and raised	HSE	Risk description
	model is leading to the onward movement of Ukrainians from	at SOGDevelopment and		updated 16/06/22
	their accommodation	communication of a medium		
	placements. This may result in discontinuity of care where	term accommodation		Additional mitigating action
	services have already been put	strategy to set expectations for people living here and		added 16/06/22
	in place, inefficient use of heath	ensuring the next phase of		
	resources, delay in the assignment of Ukrainians to	accommodation is stable and		
	GMS panels and a detrimental	allows for full community integration and settlement		
	impact on the psychological	· ·		
	health and wellbeing of the Ukrainian people			
20	High and increasing levels of	• Redirect as appropriate	Operational	This has been
	staff sickness due to COVID are threatening core services at	COVID response teams to the	Services	re-rated from an amber
	community and acute levels	Ukrainian health response effort		(medium) rating
	and needs to be considered in	• Explore opportunities to		to a green (low)
	context of the local Ukraine service response	build capacity at local level		rating in line with reducing
	service response	through existing CPL and other panels		trend of
		Increased societal adherence	External to HSE	population
		to public health advice		infection on the 27/04/22. This
		regarding COVID prevention.		risk will be
				closely
				monitored as Covid
				hospitalisations
				are now
				increasing.