

## CONTEXT AND METHODOLOGY

To inform humanitarian programmes responding to the COVID-19 Outbreak in Ukraine, the Rapid Health Facility Assessment (RaFHA) was launched in the Government-Controlled Areas of Donetsk and Luhansk Oblasts to evaluate health facility readiness and identify current health-related needs at the facility level. For analytical purposes, facilities were disaggregated by level (primary, secondary, tertiary, emergency care). The RaFHA was developed in coordination with the Health (WHO) and Water, Sanitation and Hygiene (UNICEF) Clusters and received approval from the Ministry of Health and local authorities. From the 27<sup>th</sup> of March to the 3<sup>rd</sup> of April, REACH enumerators conducted 473 Key Informant Interviews (KIIs) with service providers, to assess planning, preparedness, and availability of basic hygiene and health supplies for most facilities in the conflict areas in Donetsk and Luhansk.<sup>1</sup>

## KEY FINDINGS

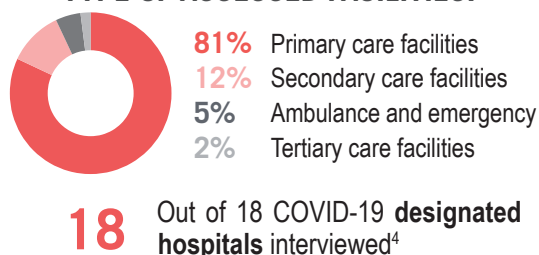
RaFHA findings show that most health service providers in Donetsk & Luhansk Oblasts face challenges concerning COVID-19; given the limited availability of personal protective equipment and a high proportion of facilities (89%) reporting suspected cases,<sup>2</sup> a large number of healthcare workers and patients could be at risk of infection. Findings show a low capacity in collecting and referring samples for testing, where gaps reportedly exist in terms of established referral mechanisms, equipment and supplies, staff knowledge, access to information, and logistical capacities. In addition, 69% of primary facilities had no personal protective equipment (PPE) for patients, and 9% lacked PPE for healthcare workers, which will likely affect their ability to implement effective infection prevention and control measures. Only 1 in 3 facilities reported screening suspected cases before entering the facility.<sup>3</sup> Overall communication with national authorities was satisfactory, while around 1 in 5 facilities did not have a response plan for the crisis. Selected indicators are available at the facility level on a web map (see overleaf) for further operationalisation and the study replicated in any other areas.

### ASSESSMENT COVERAGE:

**245** Healthcare facilities in  
**Donetsk** oblast

**228** Healthcare facilities  
in **Luhansk** oblast

### TYPE OF ASSESSED FACILITIES:



### ESTIMATED NUMBER OF BEDS:

**10,982** Total inpatient

**1,369** Isolation ward

**342** Intensive care

## LABORATORY

- At the time of data collection, **76%** of secondary and tertiary facilities reported being able to perform Rapid Diagnostic Tests (RDT), with an additional **7%** reportedly able to refer samples for laboratory testing.
- Few primary facilities reported testing capacity (**1%**), however **14%** were able to refer samples for laboratory testing.
- 68%** of facilities had none of the required resources for collecting samples, this proportion was highest for rural health posts.
- 5** out of **18** designated hospitals reportedly did not have the capacity or equipment required to collect samples.

## INFECTION PREVENTION AND CONTROL

- Suspected cases of COVID-19 had reportedly sought care at **89%** of facilities, including all 18 designated hospitals.
- 33%** of facilities dealing with suspected COVID-19 cases screened the patient before entering the facility - tertiary facilities, and to a lesser extent, primary facilities reported relatively lower levels of screening compared to secondary facilities.
- 8%** of facilities, excluding ambulance, did not have surgical face-masks for staff at the time of data collection.
- If operating at full capacity, **63%** of primary healthcare facilities, **49%** of secondary and tertiary healthcare facilities (including **4** of **18** designated hospitals) would reportedly deplete their stocks of surgical face-masks for staff within 10 days.
- 71%** of secondary healthcare facilities would not have enough disinfectant, masks or shoe covers in the admittance area if working at full capacity for longer than two weeks, including **9** of **18** designated hospitals.
- 72%** of facilities had limited access to alcohol-based hand sanitizer and **11%** of facilities reported no stock.
- 41%** of facilities reported disposing of infectious waste via regular garbage disposal, including **5** of **18** designated hospitals. **32%** of facilities did not have an infectious waste management plan in place.
- 29%** of facilities reported problems with their main source of water for cleaning,<sup>5</sup> including **2** of **18** of designated hospitals.

## COMMUNICATIONS AND PLANNING

- Of the **62%** of facilities requiring communication with national authorities, **94%** were satisfied with frequency and clarity of communication.
- 22%** of primary healthcare facilities reported not having a response plan to be operationalised during the COVID-19 outbreak.
- 51%** of secondary and tertiary facilities reported sharing information with neighbouring hospitals, including **12** out of **18** designated hospitals.

<sup>1</sup> One key informant was interviewed per assessed facility.

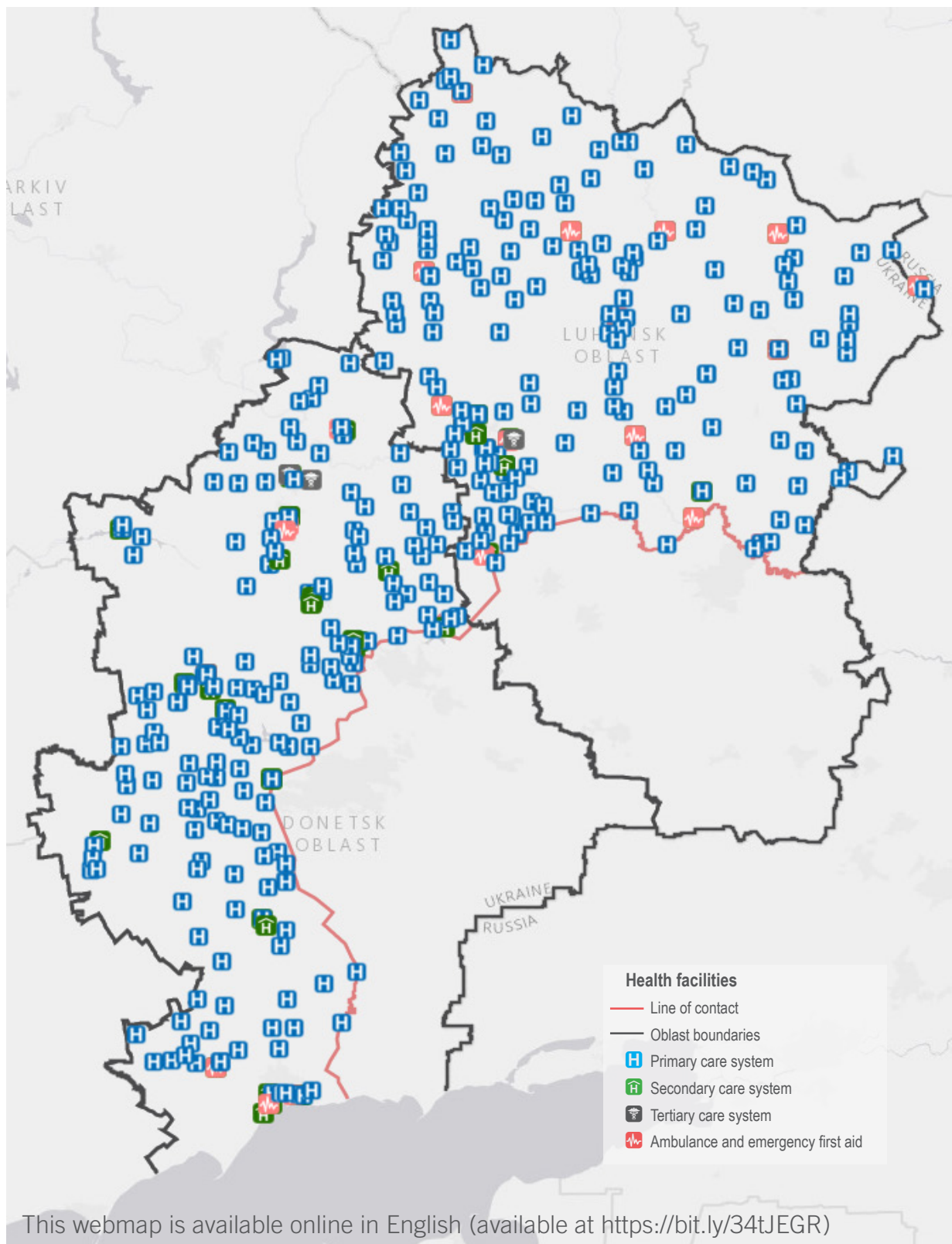
<sup>2</sup> It was left to the respondent to determine what constituted a suspected case.

<sup>3</sup> However, 42% of facilities reported asking suspected COVID-19 cases to wait in a separate area from other patients, while 29% asked patients them to wait in an isolation room.

<sup>4</sup> Included in the 56 assessed secondary care facilities were all of the 18 hospitals in Donetsk and Luhansk Oblast designated by the government to respond to the COVID-19 outbreak.

<sup>5</sup> Commonly reported problems with water sources for cleaning included poor quality or contamination, an unreliable water supply, or old or broken water infrastructure.

Assessed healthcare facilities



**ABOUT REACH**

REACH Initiative facilitates the development of information tools and products that enhance the capacity of aid actors to make evidence-based decisions in emergency, recovery and development contexts. REACH is a joint initiative of IMPACT Initiatives, ACTED and the United Nations Institute for Training and Research - Operational Satellite Applications Programme (UNITAR-UNOSAT). Since 2015 REACH in Ukraine has implemented more than 15 assessments in the Eastern conflict affected regions. As of April 2020, REACH in Ukraine has 25 staff and a yearly budget of above 1 million USD. For more information, please visit our website at [www.reach-initiative.org](http://www.reach-initiative.org), contact us directly at [geneva@reach-initiative.org](mailto:geneva@reach-initiative.org) or follow us on Twitter at [@REACH\\_info](https://twitter.com/REACH_info).