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Covid Stories. Hope and resilience. Cross border projects in first line of combat

Even if the coronavirus pandemic seemed to have stopped the whole world, for some people this new virus and its rapid spread has put life as we know it on fast forward. The so called first line and red zones heroes carried the burden of keeping the world moving, implementing without delay new and strict measures, protocols and techniques never used before. While entire communities were cautiously staying home and putting their lives on hold, envisioning the progress of our future projects, the medical

professionals were handling things for us, exposing themselves and their families to the unknown. Here are the stories of three of our beneficiaries, medical institutions that have faced the ordeal while still holding onto terms, deadlines and implementation pace of their ongoing projects.

Chernivtsi Regional Clinical Hospital is currently implementing the project "Improving the quality of medical services on minimally invasive procedures in Romania-Ukraine cross-border area" (2SOFT/4.1/93), and in the meantime has fought the virus in the first line of combat. Until recently, Chernivtsi region, the smallest region in Ukraine, topped the list by the number of patients with coronavirus. By the end of July, more than 5,600 cases of COVID-19 infection were recorded in the region. The main medical institution in which patients with moderate and severe coronavirus have



been admitted since the beginning of the epidemic. There has never been a situation in the city where all hospitals were filled with patients. The critical situation has affected an already fragile medical system, as the public health system in the programme area faces a number of limitations generated by the low quality of the infrastructure, the accessibility to health services and the lack of access of physicians to trainings and specializations.

As such, the project financed by Romania – Ukraine program is aiming at addressing, at least to a certain extent, these urgent needs. Therefore, the slogan "Common borders. Common solutions" sounds very accurate. The hospital is cooperating and will continue to work with colleagues on the other side of the border to improve the quality of medical services.

In mid-July, quarantine was scaled-down in the Chernivtsi region. "We are confident that thanks to the EU-funded project in the framework of the Romania-Ukraine 2014-2020 Programme, hospital staff will improve their skills to meet future challenges, and purchased medical equipment will make life easier for both doctors and patients" – stated Serhii Tsyntar, director of Chernivtsi Regional Clinical Hospital.

Central City Clinical Hospital of the Ivano-Frankivsk City Council has been also in the first line of combat during the recent events and spread of the pandemic. As life is sometimes ironic, this infectious crisis has become an unwanted and early exercise for the exact objective of their cross border collaboration - reducing epidemiological hazard in the Ivano-Frankivsk and Romanian homologues Sighetu Marmatiei municipalities through the implementation of infection prevention activities. The hospital implements CBC project "*Infection-free hospitals*" (2SOFT/4.1/11) envisaging to improve the capacity of medical entity to work effectively.



Ivano-Frankivsk Central City Clinical Hospital was one of the first to receive patients with COVID-19 in Ivano-Frankivsk region. In Ivano-Frankivsk, the citv authorities reacted immediately. They listened to the advice of doctors and bought personal protective equipment, allocated funds for antibiotics, so that hospitals were at least provided with a minimum.

Volunteers joined the work people organized themselves

and started helping. This process continues even today. Volunteers help with personal protective equipment, medicines and disinfectants. Local businessmen, especially the construction business, also

responded well.

Now the situation is already systematized. There are protocols, methods of protection balanced and Although, treatment. the hospital's specialists managed to adapt to the treatment of this pathology from the first days. Even in the absence of all the medication. necessarv showed good results.

Ideally, they will make the best out of this crisis, revamping the way they think, the way we care about our environment; and we'll produce something better and increasingly humane.



The pandemic caused by the SARS-CoV-2 (COVID-19) virus took its toll on another medical team that was fighting to improving the response of the health local system to the real need of the area and generate significant cross border impact and added value. Măcin City Hospital is the beneficiary of an large medical infrastructure project implemented by the Tulcea County Council, Romania "Cross border health infrastructure". Their main objective is enhancing the access to health in the border area of Romania and Ukraine, more specific within the Lower Danube Euroregion, throughout improving the healthcare infrastructure and joint activities of rehabilitation and endowment of four hospitals: Măcin (Romania), Tulcea (Romania), the Danube Regional Hospital (Ukraine) and the Izmail City Hospital (Ukraine) and raising awareness among the cross-border community on the importance of permanent health monitoring in the early identification of medical conditions and on the prevention policies. The present crisis revealed that medical system had lots of limitations, but it also showed the devotion of the medical personal to battle the virus, to help the persons infected and to stop the spreading of the virus.

Măcin city hospital learned a lot from this pandemic, one of these things is that the rigorous organization can the key to success. Of course, the reorganizations of the hospital took same time and it was made



step by step: the circuits has been reorganized, additional sorting points have been set up, the disinfection of spaces and access roads, both medical personal, as well as the administrative one learned together how to properly wear the protection equipment, practicing long hours in order to do it correctly, to avoid contamination and to stop the speeding of the virus.

The Tulcea County Council faced the same challenges and the partnerships forged within the CBC Health project increased the collaboration between the management teams.

Everything had to be adapted to the new reality: the process, the regulations, the online environment was also involved in the new context. The hospitals used the online environment, different applications important to treat some of the patients from distance, as well as helping infected people and to treat them carefully as well, to isolate the virus. It was important to stay connected to specialized doctors from other hospitals that

were indented in treating the patients with the virus to know the new information regarding the virus and to know how to contain it better.

One positive thing is that there wasn't a single case of infection in the medical personnel. In the state of emergency period, March – June, they had patients hospitalized, all of them in serious conditions. Also, in the emergency room there were a number of 2,640 of patients that had to be treated. Depending

on their conditions, they were hospitalized, transferred or they were released home with recommendations and treatment. In the ambulatory there were treated 2,487 patients after a serious sorting.

The virus still hasn't disappeared and it will be a long time until it does, so the hospital's battle continues. All medical teams faced the challenges of working remotely, the human connections being an important factor that was missed. It was a period from which coordinating teams were able to assess the organizations vulnerabilities and in the process, identify new opportunities (testing online platforms to choose the best suited scenario, increased the connection with colleagues, exchanging ideas and plans for not only surviving, but also being sustainable). Also the strategic approach of all project implementation (management, health strategy approach) and future development changed and remains to be seen how the resilience of human kind will rearrange the paradigm of life as we know it.



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