



FREE PALLIATIVE CARE HOW AND WHERE TO APPLY?

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INTRODUCTION

Providing palliative care is an approach aimed at improving the quality of life of patients (adults and children) and their families who face problems due to life-threatening illnesses. Early diagnosis, proper assessment of the patient's condition, and the possibility of pain relief, as well as overcoming other physical, psychosocial or spiritual problems, can prevent and alleviate suffering.¹

According to the European Association for Palliative Care, around 4.4 million people in the European region, including 140,000 children, need palliative care every year.

Palliative care is an important part of integrated and person-centred healthcare. It should be provided by a specially trained team of doctors, nurses, and other professionals who work alongside the patient's doctors to provide an extra layer of support.

Palliative care can be provided alongside regular medical care at home or in hospital at any age and at any stage of a serious illness. The main goal is to improve the quality of life of patients, alleviate suffering and support loved ones, while taking care of their dignity.

In Ukraine, palliative care as a separate type of medical care has been enshrined in law since 2011.

In addition, in accordance with its current organisational and legal form, palliative care can be provided by social protection bodies in what is related to palliative care. The content, scope, standards and norms, conditions and procedure for the provision of social palliative care services, as well as quality indicators are determined by [The State Standard of Palliative Care](#), approved by the Ministry of Social Policy's Decree #58, dated January 29, 2016.²

This publication describes the procedure for receiving palliative care in the healthcare sector.

¹ World Health Organization: Palliative Care. <https://www.who.int/ru/news-room/fact-sheets/detail/palliative-care>

² The State Standard of Palliative Care. <https://zakon.rada.gov.ua/laws/show/z0247-16#Text>



GENERAL LEGISLATIVE FRAMEWORK

Palliative care³ is a set of measures aimed at improving the quality of life of patients of all ages and their families who have faced problems related to life-threatening illnesses. This includes measures to prevent and alleviate patient suffering through early identification and assessment of symptoms, pain relief and overcoming other physical, psychosocial, and spiritual problems.

Palliative care is designed to alleviate the condition of people of all ages with a serious or terminal illness and their families, as well as to improve the quality of life of patients.

This assistance is included in the state-funded programme of medical guarantees and is free of charge for the patient.

Palliative care is divided into:

- ✓ **general**, which is provided, particularly, by a family doctor.

General palliative care – palliative care is provided on an outpatient basis or at the patient's place of residence by general practitioners – family doctors, general practitioners, paediatricians and other specialist doctors, junior specialists with medical education or in healthcare facilities that provide specialised medical care.

- ✓ **specialised** care provided by a multidisciplinary team both in inpatient settings and at the place of residence/stay of the palliative patient.

Specialised palliative care – palliative care is provided by a multidisciplinary team of a healthcare facility that provides specialised medical care in an inpatient setting or at the patient's place of residence.

If necessary, the family doctor can involve a multidisciplinary team for consultations and adjustments / creation of a palliative care plan for the patient.

The multidisciplinary team includes medical specialists and specialists in various fields (social workers, social workers, psychologists, volunteers, lawyers, clergy, etc.).

As of 2024:

- ✓ general palliative care is provided as part of **the Primary Care** package;
- ✓ Specialised care – as part of **the Inpatient Palliative Care for Adults and Children** and **Mobile Palliative Care for Adults and Children** packages.

When providing palliative care, in order to ensure pain control, the attending physician assesses the intensity of pain and, based on its results, may prescribe narcotic drugs, psychotropic substances, and precursors to patients of all ages.

³ The Procedure for the Provision of Palliative Care, approved by the Decree of the Ministry of Health of Ukraine #1308, dated June 6, 2020. <https://zakon.rada.gov.ua/laws/show/z0609-20#n22>



WHAT PATIENTS NEED PALLIATIVE CARE?

Patients in need of palliative care are patients of any age with life-limiting and/or life-threatening diseases.

Life-threatening illnesses are illnesses that are probable to result in premature death.

Life-limiting diseases are illnesses that will inevitably lead to premature death.

Palliative care is provided in accordance with the criteria established by the Ministry of Health of Ukraine⁴ for adult patients and paediatric patients. These criteria include a list of diseases and their features, as well as a list of conditions, clinical indicators, and functional disorders.

What is the difference between palliative and hospice care?

Like palliative care, hospice care provides comprehensive comfort care and family support, but hospice care stops trying to cure a person of the disease.

At some point, a serious illness cannot be cured or the patient refuses certain treatments, so hospice is created for such situations.

A patient who starts treatment in hospice realises that his or her illness does not respond to medical attempts to cure or slow its progression. More and more people are choosing hospice care at the end of their lives. This involves the care, comfort and maintenance of an appropriate quality of life for a person with a serious illness at the end of life.

⁴ Annexes 2 and 3 to the Procedure for the Provision of Palliative Care, approved by the Decree of the Ministry of Health of Ukraine #1308 dated June 4.2020.
<https://zakon.rada.gov.ua/laws/file/text/81/f496922n108.doc>



HOW TO APPLY FOR FREE PALLIATIVE CARE?

For free general palliative care services, you can directly contact a primary care doctor.

Specialised palliative care provided by mobile multidisciplinary teams can be obtained by

- ✓ referral from a primary care physician who has been selected under a declaration of choice of a physician;
- ✓ referral from the attending doctor;
- ✓ transfer from another health care facility (HCF) / clinical unit of a HCF under the supervision of palliative care specialists.

Specialised inpatient free palliative care is provided by:

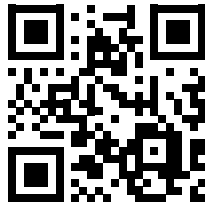
- ✓ referral from a primary care physician chosen under a declaration of choice of a physician;
- ✓ referral from the attending doctor;
- ✓ referral from a doctor of the mobile palliative care service;
- ✓ transfer from another healthcare facility / clinical unit of a healthcare facility.



HOW TO FIND PROVIDERS OF FREE PALLIATIVE CARE?

Palliative care can be provided free of charge as part of the National Health Service of Ukraine (NHSU) packages.

To search for providers of palliative care, please visit the NHSU website: <https://nszu.gov.ua/>



In the section “E-data”, select “Analytical panels (dashboards)” and go to the dashboard “Concluded Contracts for Medical Care of the Population under the Medical Guarantee Programme.”

On the third page, in the filter field in the “Region and Community of Registration” indicator, please select the region and/or community, and in the “Direction>Service package” indicator, select the “Palliative care” group or the required package “Mobile palliative care for adults and children” or “Inpatient palliative care for adults and children;” and in the list of categories, click “Registration address.” The dashboard will show all entities that have a contract for the relevant package of medical services, as well as their registration address.

In addition, you can search for palliative care providers through the Contact Centre of the National Health Service of Ukraine by phone: **16 – 77** or through the Contact Centre of the Ministry of Health of Ukraine by phone: **0 800 602 019**.

Palliative care can be provided free of charge as part of NHSU packages and on a paid basis in private medical institutions. Information about them is publicly available on the Internet.



HOW IS THE PROVISION OF PALLIATIVE CARE PLANNED?

To determine the plan and scope of palliative care, the **observation plan for a patient** in need of palliative care is designed according to the approved form⁵ (for children, the observation plan has a different form⁶).

The observation plan is drawn up in two copies. At the time of discharge, one copy of the observation plan is retained by the provider of the relevant medical service, and the other is given to the patient or his/her relatives.

The observation plan is reviewed on a regular basis, as determined by the provider of the relevant medical service and in the event of a change in the patient's clinical condition or wishes.

⁵ Annexes 1 to the Procedure for the Provision of Palliative Care, approved by the Decree of the Ministry of Health of Ukraine #1308 dated June 4.2020.
<https://zakon.rada.gov.ua/laws/file/text/81/f496922n108.doc>

⁶ Annexes 4 to the Procedure for the Provision of Palliative Care, approved by the Decree of the Ministry of Health of Ukraine #1308 dated June 4.2020.
<https://zakon.rada.gov.ua/laws/file/text/81/f496922n108.doc>



WHAT ARE THE MAIN FEATURES AND FREE SERVICES OF GENERAL PALLIATIVE CARE?

Within the framework of the medical guarantees programme, in particular during primary health care, **patients can receive general palliative care free of charge (Primary Health Care package).**⁷

Terms of service: on an outpatient basis and/or at the place of residence/stay (by decision of the primary care physician) and/or using telecommunication means.

Grounds for providing the service:

- ✓ declaration of choice of a primary care doctor;
- ✓ self-referral in the event of an emergency state (regardless of the availability of a declaration on the choice of a doctor).

As part of this package, patients are guaranteed free of charge:

- ✓ general primary healthcare services;
- ✓ regular assessment of the seriously ill patient's condition and identification of his/her needs;
- ✓ assessment of the degree of pain and treatment of the pain syndrome;
- ✓ prescribing prescriptions for the treatment of pain, including strong opioids and other medicines defined in the National List of Essential Medicines;
- ✓ prescribing treatment to overcome concomitant symptoms (constipation, nausea, choking, and others);
- ✓ counselling and education of the patient's carers;
- ✓ Coordination and cooperation with other facilities to meet the medical, psychological, social, and other needs of the patient;
- ✓ adherence to the principles of barrier-free and inclusive environment;
- ✓ observance of human rights by the healthcare provider in accordance with the recommendations of the Ukrainian Parliament Commissioner for Human Rights, the provisions of the Convention for the Protection of Human Rights and Fundamental Freedoms, the Convention on the Rights of Persons with Disabilities, the Convention on the Rights of the Child, and other international treaties ratified by Ukraine.

The full content of the Primary Health Care package (in terms of the scope of medical services that the provider undertakes to provide under the contract in accordance with the medical needs of the patient (specification)) can be found in **Appendix 1** of this booklet or on the website of the National Health Service of Ukraine (NHSU).

⁷ Specification and terms of procurement of medical services package #12 "Primary Healthcare." https://contracting.nszu.gov.ua/storage/editor/files/pervinna-medichna-dopomoga_1699954216.docx



WHAT ARE THE MAIN FEATURES AND FREE PALLIATIVE CARE SERVICES PROVIDED BY MOBILE MULTIDISCIPLINARY TEAMS?

The Medical Guarantee Programme also includes a comprehensive palliative care service for adults and children provided by mobile multidisciplinary teams (the Mobile Palliative Care for Adults and Children package⁸).

Terms of service: at the patient's place of residence and using telecommunications (both in a hospital or hospice, and at home or at the place of residence of a seriously ill person).

Grounds for providing the service:

- ✓ referral of a primary care doctor chosen according to the declaration on the choice of a physician;
- ✓ referral from the attending physician;
- ✓ transfer from another healthcare facility / clinical unit of a healthcare facility under the supervision of palliative care specialists.

Inpatients can undergo therapy for 7-14 days and then return to their homes if they wish. Multidisciplinary teams will work at the patient's place of residence to provide palliative care services.

The multidisciplinary palliative care team visits the patient at least once a month and communicates via telecommunications at least once a week. All this is free of charge.

In addition, as part of this package, patients are guaranteed free of charge:

- ✓ Assessment of patients' condition, including somatic condition and detection of dysfunctions of vital organs and systems, psycho-emotional state (with psychological assistance if necessary), and chronic pain syndrome and its prevention;
- ✓ Collection and transportation of biological material to the laboratory of the facility;
- ✓ instrumental examinations at the place of residence or in a medical facility;
- ✓ oxygen and respiratory support;
- ✓ pain relief at all stages of diagnosis and treatment;
- ✓ provision of medicines and assistive devices (wheelchairs, crutches, and others);
- ✓ rehabilitation services;
- ✓ Training of family members (legal representatives, carers) in the skills of caring for a seriously ill person;

⁸ Specification and conditions of procurement of medical services package #8 «Mobile Palliative Care for Adults and Children.» https://contracting.nszu.gov.ua/storage/editor/files/mobilna-paliativna-medichna-dopomoga-doroslim-i-dityam_1699953341.docx



- ✔ observance of human rights by the healthcare provider in accordance with the recommendations of the Ukrainian Parliament Commissioner for Human Rights, the provisions of the Convention for the Protection of Human Rights and Fundamental Freedoms, the Convention on the Rights of Persons with Disabilities, the Convention on the Rights of the Child, and other international treaties ratified by Ukraine.

The full content of the medical package “Mobile Palliative Care for Adults and Children” (in terms of the scope of medical services that the provider undertakes to provide under the contract in accordance with the medical needs of the patient (specification) can be found in Appendix 2 of this booklet or on the website of the National Health Service of Ukraine (NHSU).



WHAT ARE THE MAIN FEATURES AND SERVICES OF PALLIATIVE CARE IN INPATIENT SETTINGS?

The Medical Guarantee Programme also includes a comprehensive inpatient palliative care service for adults and children (the package of medical services “Inpatient palliative care for adults and children”)⁹.

Terms of service: Inpatient settings.

Grounds for providing the service:

- ✓ referral of a primary care doctor chosen according to the declaration on the choice of a doctor;
- ✓ referral from the attending physician;
- ✓ referral from a doctor of the mobile palliative care service;
- ✓ transfer from another healthcare facility / clinical unit of a healthcare facility.

As part of this package, patients are guaranteed free of charge:

- ✓ assessment of the patient’s condition;
- ✓ laboratory tests (blood, urine, bacteriological, etc.);
- ✓ instrumental examinations (ECG, ultrasound, X-ray, etc.);
- ✓ medical supervision and nursing care 24/7;
- ✓ assessment of psycho-emotional state and psychological assistance;
- ✓ oxygen support;
- ✓ respiratory support;
- ✓ pain relief at all stages of diagnosis and treatment;
- ✓ provision with medicines and assistive devices (wheelchairs, crutches, and others);
- ✓ rehabilitation services;
- ✓ accommodation in single or double rooms;
- ✓ Inpatient nutrition;
- ✓ Ensuring the right to stay with family members regardless of the patient’s condition;
- ✓ Training of family members (legal representatives, carers) in the skills of caring for a seriously ill person;
- ✓ Adherence to the principles of barrier-free and inclusive environment.

The full content of the medical package “Inpatient palliative care for adults and children” (in terms of the scope of medical services that the provider is obliged to deliver under the contract in accordance with the medical needs of the patient (specification) can be found in Appendix 3 of this booklet or on the website of the National Health Service of Ukraine (NHSU).

⁹ Specification and terms of procurement of medical services package #13 “Inpatient Palliative Care for Adults and Children”. https://contracting.nszu.gov.ua/storage/editor/files/statsionarna-paliativna-medichna-dopomoga-doroslim-i-dityam_1700053249.docx



HOW IS THE PLACE OF PALLIATIVE CARE DELIVERY SELECTED?

The choice of the place of palliative care for the patient is discussed and agreed with the patient and/or their relatives. The patient's wishes are prioritised and recorded in the care plan.

Palliative care for patients with open forms of tuberculosis is provided in specialised institutions.

Palliative care for patients with severe mental disorders is provided in psychiatric care facilities.

In the event of emergencies in patients of all ages, emergency medical care is provided by the Centre for Emergency and Disaster Medicine.



WHAT ARE THE LEGAL REQUIREMENTS FOR THE PREMISES WHERE PALLIATIVE CARE IS PROVIDED?

A palliative care provider must ensure the following conditions¹⁰:

- ✓ free access to the premises and their barrier-free use for people with reduced mobility in accordance with the State Construction Norms (DBN) B.2.2-40:2018 “Inclusiveness of Buildings and Structures”;
- ✓ Arrangement of single or double wards for patients on the first floors of the building, including their own sanitary rooms;
- ✓ Ensuring the possibility of free movement, walking, and receiving visitors in time periods convenient for the patient;
- ✓ available room for social and psychological assistance to patients and carers;
- ✓ available room for saying goodbye to the deceased (a cold room);
- ✓ available room for private communication;
- ✓ available room for religious activities for representatives of churches and religious organisations recognised in Ukraine in accordance with the patient’s needs;
- ✓ available staff room for psychological relief;
- ✓ Available and functioning lift (in case of rooms above the second floor).

¹⁰ Paragraph 13 of Section IV of the Procedure for the Provision of Palliative Care, approved by the Decree of the Ministry of Health of Ukraine #1308 dated June 4, 2020. <https://zakon.rada.gov.ua/laws/show/z0609-20#Text>



LEGAL AND REGULATORY FRAMEWORK FOR THE PROVISION OF PALLIATIVE CARE

Legal and regulatory framework for the provision of palliative care:

- ✓ The Law of Ukraine “Fundamentals of the Legislation of Ukraine on Healthcare”;
- ✓ The Law of Ukraine “On the State Financial Guarantees of Medical Care for the Population”;
- ✓ The Law of Ukraine “On the Public Health System”;
- ✓ Resolution of the Cabinet of Ministers of Ukraine #1394, dated December 22, 2023, #1394 “Some Issues of Implementing the Programme of State Guarantees of Medical Care for the Population in 2024”;
- ✓ Decree of the Ministry of Health of Ukraine #1308, dated June 04, 2020, “On Improving the Organisation of Palliative Care in Ukraine”;
- ✓ Decree of the Ministry of Health of Ukraine #643, dated April 06, 2023, “On the Approval of the Medical Care Standards ‘Chronic Pain Syndrome in Adults and Children’”;
- ✓ Decree of the Ministry of Health of Ukraine #360, dated July 19, 2005, “On Approval of ‘the Rules for Issuing Prescriptions for Medicinal Products and Medical Devices,’ ‘the Procedure for the Release of Medicinal Products and Medical Devices from Pharmacies and Their Structural Subdivisions,’ ‘the Instruction for the Procedure for Storage, Accounting, and Destruction of Prescription Forms’”;
- ✓ Decree of the Ministry of Social Policy of Ukraine and the Ministry of Health of Ukraine #317/353, dated May 23, 2014, “On Approval of the Procedure for Interaction of Entities in Providing Social Services of Palliative Care at Home to Terminally Ill Patients.”



Addendum 1.

PACKAGE OF MEDICAL SERVICES "PRIMARY MEDICAL CARE"

The scope of medical services that the provider undertakes to provide under the contract in accordance with the medical needs of the patient (specification)

1. Dynamic monitoring of the patient's health status using physical, laboratory, and instrumental examination methods in accordance with the healthcare standards.
2. Diagnosis and treatment of the most common infectious and non-infectious diseases, injuries, poisoning, pathological, and physiological (during pregnancy) conditions.
3. Conducting diagnostic examinations, treatment measures, as well as dynamic monitoring of a patient with chronic diseases in accordance with the healthcare standards.
4. Conducting laboratory diagnostics **in accordance with the healthcare standards**, in particular:
 - a. general blood test with leukocyte formula (erythrocytes, haemoglobin, haematocrit, platelets, leukocytes, basophils, eosinophils, segmented neutrophils, rod neutrophils, lymphocytes, and monocytes);
 - b. general urine analysis (colour, transparency, reaction (pH), relative density, protein, glucose, red blood cells, white blood cells, epithelial cells, cylinders, salts, bacteria, acetone (ketone bodies);
 - c. glucose in whole blood;
 - d. total cholesterol;
 - e. Rapid tests for pregnancy, troponin, HIV, viral hepatitis B and C, SARS-CoV-2.
5. Performing instrumental diagnostics, including electrocardiography, **pycnfluometry/spirometry**, otoscopy, ophthalmoscopy, and visual acuity measurements.
6. Dynamic observation of a woman with an uncomplicated pregnancy and referral to an obstetrician-gynaecologist (if necessary).
7. Conducting medical monitoring of a healthy child and providing recommendations to parents/guardians on the need for breastfeeding, proper nutrition, and care for a healthy child in accordance with industry standards in the field of healthcare.
8. Conducting screening for mental and behavioural disorders in the patient, in particular those arising from the use of psychoactive substances (if the patient applies within the provider's working hours). Referral, if necessary and with the patient's consent, to a psychiatrist and/or paediatric psychiatrist, and/or narcologist for the treatment of a patient with mental and behavioural disorders.
9. Identification of individual risk of infectious diseases (tuberculosis, HIV, viral hepatitis, etc.) and non-communicable diseases (cardiovascular, chronic respiratory, cancer, diabetes, etc.), in particular through screening questionnaires, assessment of overall cardiovascular risk by SCORE, body mass index, waist width, etc.



10. Carrying out preventive measures aimed at reducing infectious diseases among adults and children, including vaccination in accordance with the preventive vaccination schedule (age-based vaccination, health-based vaccination, vaccination for epidemic indications), emergency immunoprophylaxis (except for rabies), as **well as providing recommendations for vaccination against acute respiratory disease COVID-19 caused by the SARS-CoV-2 coronavirus.**
11. Prevention, diagnosis and early detection of socially dangerous diseases (HIV, tuberculosis, including latent tuberculosis infection (LTBI), hepatitis, sexually transmitted infections, etc.) Examination of TB contacts and referral for specialised medical care. Interaction with a phthisiologist and/or paediatric phthisiologist regarding the diagnosis and treatment of a patient with tuberculosis. Interaction with a phthisiologist regarding the prescription of preventive treatment for PTB in accordance with the healthcare standards.
12. Providing counselling to the population on healthy lifestyles, the consequences of unhealthy lifestyles, the importance of quitting smoking and the risks of alcohol abuse, as well as the importance of increasing physical activity and healthy eating, vaccination, and mental health support.
13. Raising awareness, encouraging and supporting people to maintain mental health and well-being.
14. Provision of separate palliative care services for adults and children, including: regular assessment of the seriously ill patient's condition and determination of his/her needs; assessment of the degree of pain and treatment of pain syndrome; prescription of prescriptions for the treatment of pain syndrome, including strong opioids and other medicines defined by the National List of Essential Medicines; prescribing treatment to overcome accompanying symptoms (constipation, nausea, suffocation, etc.); counselling and training of persons who care for the patient; coordination and cooperation with other institutions to ensure the medical, psychological, social, and other needs of the patient.
15. Prescribing medicines to the patient, as well as determining his/her need for medical **devices with the subsequent registration of** relevant documents for their receipt in accordance with the requirements of the law.
16. Issuing prescriptions for medicinal products under the reimbursement programme and for preferential provision of medicinal products to certain groups of the population for certain categories of diseases in accordance with the applicable law.
17. Issuance of electronic referrals for the necessary clinical, laboratory and instrumental tests, **consultations / teleconsultations / televideo consultations of a specialist doctor** in real or delayed time, **telediagnosics and other services at the level of specialised medical care** in accordance with industry standards.
18. **Provision of medical care by telemedicine means (teleconsultation / televideo consultation in real or delayed time, telediagnosics, observation in remote monitoring mode, telemetry), together with examination and application of other methods that do not contradict the law, with the obligatory creation of a medical record of medical examination, consultation or treatment in accordance with the Procedure for Maintaining the Register of Medical Records, records on referrals and prescriptions in the electronic healthcare system, as well as filling in accounting forms #001/tm and #002/tm and adding information to the "Journal of Telemedicine Consultations" (form #003/tm).**



19. **Ensuring the possibility of making an appointment with a doctor for a patient to receive medical care using telemedicine in person, by phone, e-mail or e-health systems, and other available technical means of electronic communications.**
20. Provision of emergency medical care to a patient in the event of a physical or mental health disorder, if such a disorder occurred during an appointment with a primary care doctor.
21. Calling an emergency (ambulance) team to a patient in a life-threatening condition and providing appropriate medical care before the team arrives within the working hours of the primary care provider and, accordingly, when determining such a need during the provision of medical services at the provider's location or the patient's residence/stay.
22. Issuance of certificates, medical reports on temporary disability, referrals for medical and social examination, as well as medical death certificates and other standardised documents required by the patient in accordance with the requirements of the current legislation within the working hours of the primary care provider.
23. **Adherence to the principles of barrier-free and inclusive healthcare provision, including the use of telemedicine methods and tools in accordance with the regulatory framework.**



Appendix 2.

PACKAGE OF MEDICAL SERVICES “INPATIENT PALLIATIVE CARE FOR ADULTS AND CHILDREN”

The scope of medical services that the provider undertakes to provide under the contract in accordance with the medical needs of the patient (specification)

1. Assessment of the patient’s condition for eligibility for palliative care and development of a follow-up plan for the patient in need of **palliative** care.
2. Assessment of the patient’s somatic state and monitoring of vital organ and system dysfunctions with subsequent revision of the patient’s observation plan as necessary.
3. Assessment of the patient’s psycho-emotional state and provision of psychological assistance, including psychotherapeutic interventions.
4. Assessment, prevention, and treatment of chronic pain syndrome (including the use of narcotic drugs, psychotropic substances, and precursors).
5. Timely pain relief at all stages of diagnosis and treatment: mandatory anaesthetic support during all invasive diagnostic and other treatment procedures that require it, round-the-clock access to non-narcotic and narcotic painkillers.
6. Assessment, correction, and control of nutritional status.
7. Conducting the necessary laboratory tests, in particular:
 - a. detailed clinical blood test;
 - b. determination of blood type and Rh factor;
 - c. biochemical blood test: total protein, alpha-amylase, aspartate aminotransferase (AST), alanine aminotransferase (ALT), bilirubin and its fractions (total, direct, indirect), creatinine, urea, uric acid; electrolytes: potassium, chlorine, sodium, magnesium; and **C-reactive protein**;
 - d. coagulation haemostasis: fibrinogen, and international normalised ratio (INR);
 - e. glucose in whole blood or serum;
 - f. general urine analysis;
 - g. bacteriological analysis;
 - h. Other laboratory tests in accordance with the healthcare sector standards.
8. Conducting the necessary instrumental examinations, in particular:
 - a. Electrocardiography (ECG) at the place of medical service delivery;
 - b. ultrasound examinations in a healthcare facility (HCF), under the terms of lease, contract, or other conditions of use of the relevant equipment;
 - c. X-ray examinations (in healthcare facilities, under the terms of lease, contract, or other conditions of use of the relevant equipment);
 - d. Other instrumental research in compliance with the healthcare sector standards.
9. Medical supervision and round-the-clock nursing care.
10. Provision of oxygen support.



11. Provision of respiratory support: CPAP therapy and/or non-invasive lung ventilation and/or invasive lung ventilation (if indicated).
12. Ensuring the right of the patient to stay with family members, regardless of the patient's condition, until the end of his/her life.
13. Provision of nutrition to patients in inpatient settings.
14. Providing the patient with assistive and technical means for mobility for the entire period of stay in the healthcare facility.
15. Referral of the patient for inpatient treatment and diagnostics in departments / healthcare facilities of the relevant profile of medical care, in particular, in intensive care (if indicated). Calling specialists to the healthcare facility where the patient is undergoing palliative care, if transportation is not possible.
16. **Provision of medical care by telemedicine means (teleconsultation / televideo consultation in real or delayed time, tediagnosics, observation in remote monitoring mode, telemetry), together with examination and use of other methods that do not contradict the law, with the obligatory filling in of accounting forms #001/tm and #002/tm and adding information to the "Journal of Telemedicine Consultations" (form #003/tm).**
17. **Transfusion** of drugs and blood components or referral of a patient to other healthcare facilities for transfusion (as prescribed).
18. Provision of rehabilitation services in the field of healthcare (as prescribed).
19. Provision of medicinal products, in particular for symptomatic therapy (pharmacotherapeutic, surgical and other treatments as indicated), which are supplied through centralised procurement by the Ministry of Health, other central and local budget programmes, as well as medicinal products defined in the National List of Essential Medicines, necessary medical devices and consumables in accordance with the healthcare standards and medical and technological documents.
20. Training the patient's family members (legal representatives and caregivers) in the skills of caring for seriously ill patients.
21. **Adherence to the principles of barrier-free and inclusive care during the provision of medical and/or rehabilitation care, including the use of telemedicine methods and tools in accordance with regulatory and legal acts.**



Appendix 3.

PACKAGE OF MEDICAL SERVICES “MOBILE PALLIATIVE CARE FOR ADULTS AND CHILDREN”

The scope of medical services that the provider undertakes to provide under the contract in accordance with the medical needs of the patient (specification)

1. Provision of palliative care to a patient (adults and children) at their place of residence, including inpatient care at home, if necessary, and/or using **telecommunications**.
2. Assessment of the patient’s condition for eligibility for palliative care and development of a plan for monitoring the patient in need of such care.
3. Assessment of the patient’s somatic condition and detection of dysfunctions of vital organs and systems with subsequent revision of the patient’s observation plan, if necessary.
4. Assessment of the patient’s psychological status and provision of psychological assistance, **including** psychotherapeutic interventions.
5. Assessment (using methods appropriate to the psychosomatic characteristics of the patient) of chronic pain syndrome and its prevention, treatment and control (including prescribing and writing prescriptions for narcotic drugs, psychotropic substances and precursors, non-narcotic painkillers and pain management).
6. Assessment and correction of nutritional status.
7. Collection, transportation of biological material to the laboratory of a healthcare facility or healthcare institution with which a contractor agreement has been concluded for the following laboratory tests, in particular:
 - a. detailed clinical blood test;
 - b. biochemical blood test: total protein, alpha-amylase, aspartate aminotransferase (AST), alanine aminotransferase (ALT), bilirubin and its fractions (total, direct, indirect), creatinine, urea, and uric acid;
 - c. international normalised ratio (INR);
 - d. glucose in whole blood;
 - e. general urine analysis;
 - f. faeces for hidden blood.
8. Issuance of referral and/or collection, transportation of biological materials for other laboratory tests in accordance with the healthcare standards.
9. Conducting the necessary instrumental examinations at the patient’s place of residence (if possible) and/or in the healthcare facility, under the terms of lease, contract, and other conditions of use of the relevant equipment.
10. Providing and monitoring symptomatic therapy and care.
11. Determination of indications for oxygen support and organisation of its provision at the patient’s place of residence.
12. Observation and control of a patient who is at home, **in particular** on oxygen therapy and/or respiratory support.



13. Assessment and determination of the patient's needs for mobility aids (mobility and toileting).
14. Provision of medicines in accordance with the National List of Essential Medicines, including narcotic drugs **(through prescriptions)**, medical devices and consumables during the team's visit to the patient's place of residence.
15. Referral of a patient to receive specialised medical care with the consent of the patient and legal representatives (if necessary).
16. Providing emergency medical care to the patient in the event of life-threatening conditions during the visit, as well as calling an emergency medical team (if necessary) and providing emergency medical care until it arrives.
17. Training the patient's family members (legal representatives and caregivers) in palliative care skills.
18. **Administration of medicines to patients with rare diseases at home (Home infusion).**



National Assembly of People with Disabilities of Ukraine

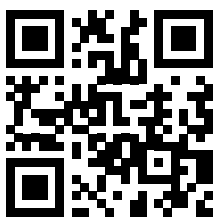
All-Ukrainian
Public
Association

The National Assembly of Persons with Disabilities of Ukraine (NAPD) was founded in 2001 and brings together more than 100 organisations created by people with disabilities who work in different regions of Ukraine to defend the rights of people with various disabilities.

Since the outbreak of the war, the NAPD member organisations have focused 60% of their activities on humanitarian assistance to people with disabilities and the elderly throughout the country, legal and psychological assistance, social rehabilitation, support for shelters established on the basis of organisations of people with disabilities, healthcare, social protection, community education, and more.

The NAPD advocates for the rights of civilians affected by war, veterans with disabilities, persons returning from captivity, families with children and youth with disabilities, women and men with disabilities, and the elderly. The inclusion of disability issues in humanitarian response and recovery is an important component of these activities.

The NAPD works to empower women and men with disabilities, children and youth with disabilities, and the elderly, and seeks to involve them in society as actively as possible through active participation in the development and implementation of policies that comply with the principles of the UN Convention on the Rights of Persons with Disabilities.



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