

During the critical phases when intensive care and treatment capacities were overloaded in Italy, Spain, France and Belgium, MSF teams stepped in and worked alongside medical staff, set up triage and isolation zones, and opened additional facilities to decongest emergency rooms and treat patients with mild or moderate symptoms. A major part of MSF's support to European hospitals consisted of training medical professionals

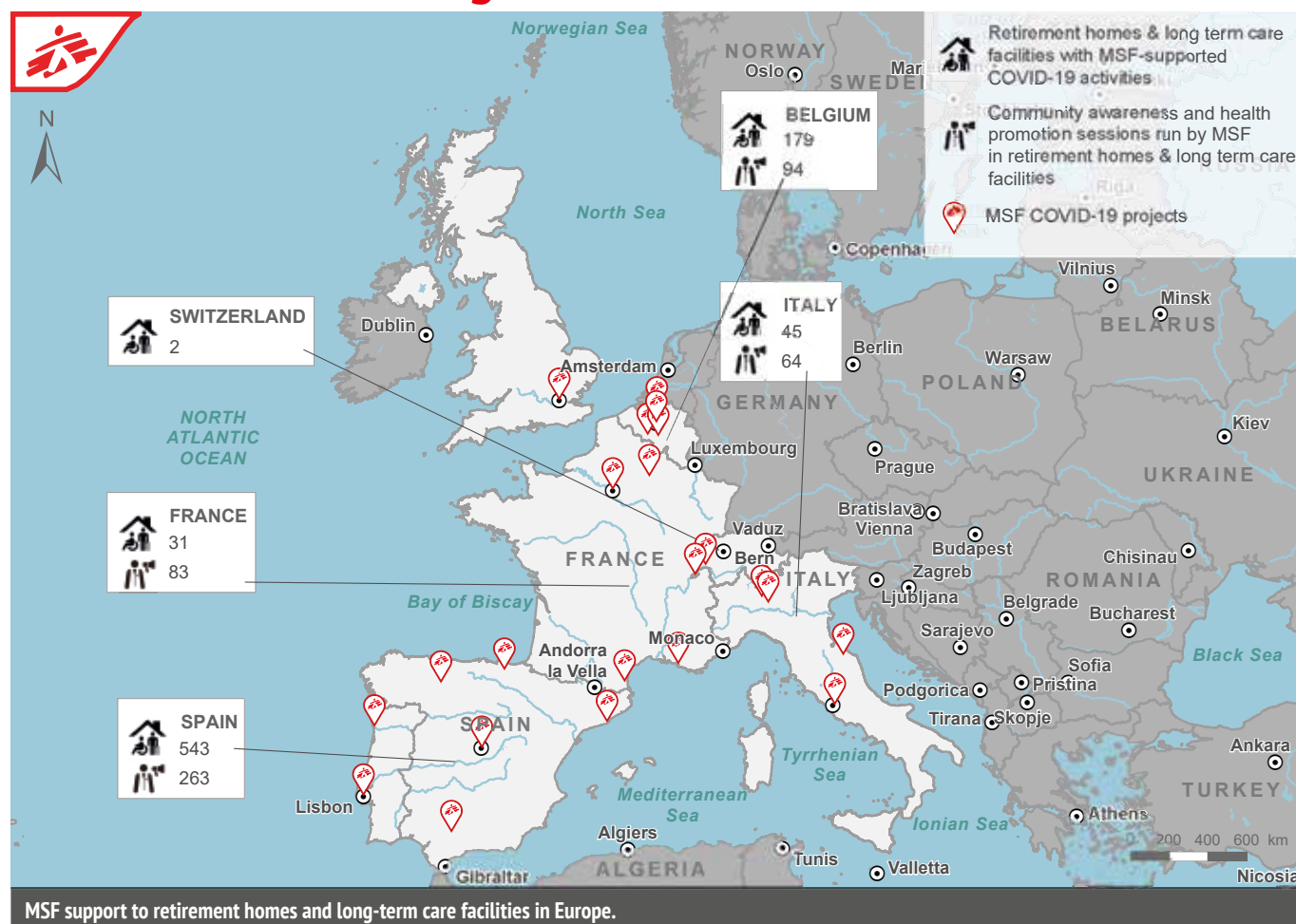
and hospital personnel on prevention measures and the correct use of personal protective equipment. When hospitals were able to handle their patient caseloads on their own, MSF directed its support towards filling critical gaps in care, including for vulnerable groups, or tailored mental health and psychosocial support to health workers, patients and families.

“One thing that particularly struck me about this extraordinary experience of working at the ICU in Geneva is the loneliness of the patients. The healthcare staff, nurses, doctors, are the only link between patients and their families.”

Katherine Zimmerman, MSF Geneva HQ staff



## Supporting residents and staff in retirement homes and long-term care facilities



The health crisis in several European countries took a major toll on retirement homes and long-term care facilities, where a substantial proportion of COVID-19-related deaths in Europe was recorded among elderly people and those with pre-existing medical conditions. In many of these care facilities in Italy, Spain, Portugal, France, and Belgium, staff lacked appropriate training, equipment, and medical support to protect themselves and residents from an infectious disease outbreak. Strict confinement and shielding measures, grief over lost residents, and a fear of unwillingly spreading the virus caused additional distress and trauma among staff of these facilities.

In **Italy**, targeted support to retirement homes was part of MSF's overall strategy to relieve pressure on the overstretched healthcare system and protect healthcare workers. Simultaneously with its engagement in hospitals in early March, MSF received requests for support from retirement homes in Lombardy and Marche. In both regions, retirement homes experienced mortality rates of up to 30%, while over half of their staff were absent due to confinement measures and fear.

In the province of Lodi, where most retirement homes are run privately, MSF assisted two elderly homes and a hospice for terminally-ill patients. In Marche, media reports of MSF's support to long-term care facilities led to a wave of similar requests, and MSF intervened in 39 homes during April and May, adapting isolation and shielding measures, establishing referral protocols for suspected COVID-19 patients, and training caregivers and cleaning personnel. MSF also identified the need for mental health support of staff and ran sessions on stress management.



While their colleagues were working at hospitals and temporary clinics, MSF teams in **Spain** started advising the management teams and caregivers of nursing homes with risk assessment and implementation of hygiene and protection measures in late March. When presence onsite was not possible, these trainings took place on virtual platforms. From March to April, MSF teams in Madrid, Catalonia, the Basque country, Castilla y Leon, Andalusia, and Asturias supported 543 retirement homes and



*“As a society, we will need to have a good think about why the priority in this pandemic has been hospitals and other medical facilities, and why barely a thought has been given to the most vulnerable.”*



Dr Ximena di Lollo, MSF care home coordinator, Spain and Portugal

thousands of health professionals and caregivers with tailored face-to-face and remote trainings.

Yet little outbreak preparedness, a lack of epidemiological surveillance, inadequate infection prevention and control, missing resources for primary and palliative care, and an increased workload for staff led to a drastic deterioration of the health situation among residents of many Spanish nursing homes.

In early April, MSF issued an urgent call on Spanish health authorities to allocate additional resources and ensure that care for elderly patients is appropriate and compassionate, and allows for dignified farewells with families.



In **Belgium**, the situation in retirement homes was equally alarming, and MSF started shifting its activities from hospitals to these long-term care facilities in early April. Nine MSF mobile teams, each with a nurse and health promoter, visited 174 retirement homes in Brussels, Wallonia and Flanders. These teams assessed local facilities and preparedness measures, often identifying a lack of knowledge of basic hygiene rules and safety and treatment protocols, as well as shortages of personnel and protective equipment. After developing tailored recommendations for each facility, MSF returned to the retirement homes with infection prevention and control recommendations and to conduct staff trainings.

These outreach visits gave caregivers a much-needed opportunity to voice their distress and grief following weeks of working in strict confinement, their fears of getting infected, and sadness about residents who lost their lives away from loved ones. Together with a psychologist, MSF teams offered counselling and ran group trainings on stress management, peer support techniques, and coping mechanisms. Based on its operational experience in Belgian retirement homes, MSF has started to collaborate with local partners and is advocating with Belgian health authorities to improve preparedness and response plans and create better support networks for caregivers.

**“ Retirement homes were asked to operate like hospitals, but not given the protective means and necessary personnel to do so. We witnessed a true humanitarian crisis in Belgian retirement homes.”**



**Stephanie Goublomme, MSF project coordinator, Belgium**



**An MSF mobile team arrives at a retirement home in Jette, Brussels.**

More than 1,000 care home managers and staff participated in MSF webinars and received support via email and phone.

As part of its partnership with the Henri-Mondor Hospital in Créteil, **France**, MSF started visiting residential care homes for the elderly in the Ile-de-France region in the beginning of April.

Some residents had not been examined by a doctor for months. In 33 retirement homes in the Val-de-Marne department, MSF teams provided technical guidance and hands-on assistance to improve infection prevention and control measures and provided consultations to residents. MSF also supported retirement homes in Hauts-de-Seine and Seine-Saint-Denis.