

National Health Coordination Meeting



Date: Thursday 25th Jan

Venue: WHO

Time: 10:00 – 12:00

Agenda:

1. Introductions
2. Review of last meeting action point
3. Situation Update
4. Health Sector Achievements 2017 / PPP
5. Services Advisor – Current status and way forward / PPP
6. Knowledge transfer PPP / La Chaîne de l'Espoir
7. Health Agencies Update
8. Subsector working groups – Reproductive Health (UNFPA), Mental Health (IMC/ WHO), Nutrition (Save the Children Jordan/UNICEF), Community Health Task Force (Medair/IRD)
9. Proposed Assessment/Research
10.AOB

2. Review of action points of previous meeting

	<p>Reviewing the agenda of the previous meeting:</p> <ul style="list-style-type: none">✓ UNCHR to share Caritas presentation with all partners: Done✓ CDE to share the factsheet for the coming mission in FEB: Done✓ SAMS to share their upcoming mission factsheet: Pending
Action Points	N/A

3. Situation update-UNHCR	
Iraqis Refugees	<ul style="list-style-type: none"> - Total registered: 66,081 - 205 registered in January 2018
Yemeni Refugees	<ul style="list-style-type: none"> - Total registered: 9,627. Total registered in January 2018 is 177
Sudanese Refugees	<ul style="list-style-type: none"> - 4,051 Sudanese registered with 14 arrived in January 2018
Somali Refugees	<ul style="list-style-type: none"> - 806 Somali with no arrivals in January 2018
Others	<ul style="list-style-type: none"> - 1,618 (no significant increase)
Syrian Refugees	<ul style="list-style-type: none"> - Total Registered: 656,692. - 1,146 newly registered in 2018 of which 7 arrived in January 2018 and the rest are new born registration. - 79,000 Zaatari with no significant increase. - Azraq camp 54,000 with minor decrease in the last month due to bail out process and voluntary repatriation. EJC with slight decrease with total population of 7,057
Urban Verification	<ul style="list-style-type: none"> - As of 31st Dec, a total of 435,242 cards were issued in different security centers. Of the total, there are 403,332 individuals registered with UNHCR, while there are 31,910 individuals who are not registered. - 78% of urban refugees issued new Mol cards.

Berm Updates	<ul style="list-style-type: none"> - A one exceptional distribution of life-saving emergency assistance to persons living in Rukban commenced on 8th Jan 2018 successfully concluded on 12 Jan 2018. - Assistance included winterization kits (Plastic sheets, blankets, and children’s clothing), solar lamps, and jerry cans, essential food items, and hygiene and dignity kits. - Delivery was undertaken using total of 63 trucks, facilitated by cranes transporting the items to trucks coming from Rukban to increase delivery capacity, which reached 6,740 families from 28 different tribes, subtribes and areas. - To date, 20528 consultations have been conducted at the health clinic and 860 emergency cases have been admitted to hospitals in Jordan for further treatment, facilitated by UN. - The MoH has just authorized the administration of routine vaccinations to all patients treated at the UN health clinic to commence at the end of the coming week. -
	<p style="text-align: center;">N/A</p>

4. Health Sector Achievements 2017 / PPP	
Goals:	<ul style="list-style-type: none"> ▪ Present full picture of members work over 12 months

Key Achievements	<ul style="list-style-type: none"> ▪ Recognize Team Achievements ▪ Building and maintaining an effective, self-assured team ▪ Capacity building of human resources at MoH ▪ Provision of essential drugs, reproductive health and family planning commodities and critical equipment at MoH hospitals and health centres. ▪ Responding to the immediate health needs of new arrivals and berm population. ▪ Maintain essential package of health services for camps refugees ▪ Quality sexual reproductive health services provided. ▪ Community health interventions including IYCF maintained. ▪ Mental health services provided through PHC clinics and community mental health workers. ▪ Sector Response Plan 2017/2018 developed and published ▪ Sector Work Plan developed and tracked ▪ JRP/3RP produced and submitted timely
Action Points	<ul style="list-style-type: none"> ✓ UNHCR to share the Health Sector Achievements for 2017 with all partners.

5. Services Advisor – Current status and way forward / PPP	

Definition and how to it helps:	<ul style="list-style-type: none"> ▪ Services Advisor is a simple, intuitive web app for Refugees, Humanitarian Organizations and Coordinating bodies, which provides up-to-date information about availability of humanitarian services. ▪ Services Advisor allows people to view available services on a map and in a service directory, where they can filter by category/sector, region, service provider and other features. ▪ Improves access to information on services provided to refugees by over the Humanitarian Organizations. ▪ Highlights critical gaps and redundancies in services to service providers and coordinating. ▪ Helps in preventing duplication on activities by sharing the details of each one. ▪ Following step will be introducing the system into the main audience, (the refugees). In order to achieve this goal in the best possible way and before starting the information campaign. series of Focus Group Discussion sessions were held with the refugees where the system were shown to them followed by an open discussion on the system then some specific questions ▪ Changing the URL to a new shorter address (not confirmed yet but most likely http://advisor.unhcr.jo) ▪ Adding an email address for on the main page for inquiries (please use: joramimco@unhcr.org)...similar to Turkey version ▪ Expand the (region/location) filter into admin level 2 ... like Turkey. ▪ Moving the (Service provider/organization) to the main page ... again like turkey. ▪ Change the map layout into the same background used in turkey. ▪ Remove the referral part from the “more filter” section
Source:	<ul style="list-style-type: none"> ▪ HeRAMS is an approach for monitoring health facilities, services and resources availability in emergencies. <p>Current status: Reported Organizations: 19 3RP partners: 12/23 Location: 12 governorates Entries: 781</p>
Conclusion and next step:	<ul style="list-style-type: none"> ▪ Service Advisor still valid tool to map health services country wide. ▪ Service Advisor is Real time reporting tool ▪ Service Advisor live tool can be accessed any time anywhere. ▪ Level of details available can serve mapping function but also guide POCs ▪ Current information is incomplete or not accurate and need fixation ▪ All organizations entered information advised to review their entry and modify as needed ▪ Non respondent need to start data entry and complete within 2 weeks. ▪ UNHCR will provide technical support as needed and will follow up with individual organization. ▪ Once data entry is completed sector will analyze inputs and produce narrative and visual reports

Action Points	<ul style="list-style-type: none">✓ UNHCR to share the presentation with all partners.✓ UNHCR will be having a training for all partners on the Services Advisor System (Dates to be confirmed later)

6. Knowledge transfer PPP / La Chaîne de l'Espoi	
	Introduction:

- La Chaîne de l'Espoir (CDE) is a public health organization committed to providing access to healthcare for the most vulnerable children worldwide.
- In 2017, CDE operated health and education programs in 25 countries and hosted more countries through services offered in France
- Every year, 100,00 children benefit from CDE's health programs (5,000 through operations), and 11,000 children benefit from its education programs.
- Two thirds of the world's population is without proper access to surgical care, mostly occurring in lower and middle income countries¹.
- According to the WHO, in the Middle East between 2-5% of children are born with some kind of congenital disease.
- In Jordan, CDE's program "Orthopedic and Cardiac medical and surgical program for Syrian refugees and vulnerable children" works to address some of these acute needs.

Work In Jordan:

- Our case manager identifies, facilitates initial screenings for patients, works with referrals and collects patient files
- Operations take place during missions of specialized volunteers from within the CDE network
- Post-surgery – post-op consultations are held with our local partners, patients' progress is followed up on and referrals are made to other organizations, depending on patient needs.
- CDE accept patients from all over Jordan
- CDE currently perform operations in two hospitals in Amman: Cardiac – Gardens Hospital & Orthopaedic – Makased Hospital

Work In Jordan 2017:

- CDE carried out five orthopaedic and three cardiac missions, along with two early detection clinics for DDH, in Jordan in 2017.
- 237 orthopaedic and 144 cardiac consultations conducted
- 92 orthopaedic surgeries and 46 cardiac surgeries performed
- 200+ children were examined for
- Developmental Dysplasia of the Hip

Our Criteria-Cardiac:

- Be a refugee (registered or unregistered) or vulnerable Jordanian residing within the Kingdom of Jordan.
- Be unable to afford the services required to resolve the identified condition requiring surgery.
- Be under the age of 18
- Weight of 10 kilograms or more
- **Atrial Septal Defect (ASD)**
- **Ventricular Septal Defect (VSD)**

	<ul style="list-style-type: none"> ▪ Tetralogy of Fallot (TOF) ▪ Patent Ductus Arteriosus (PDA) <p>Our Criteria-Orthopedic:</p> <ul style="list-style-type: none"> ▪ Be a refugee (registered or unregistered) or vulnerable Jordanian residing within the Kingdom of Jordan. ▪ Be unable to afford the services required to resolve the identified condition requiring surgery. ▪ Be under the age of 18 ▪ Weight of 10 kilograms or more ▪ Developmental Dislocation of the Hip (DDH); ▪ Recurrent dislocations of the patella; ▪ Club foot; and other deformities of the foot ▪ Malformations and deformities of the upper limb (such as polydactylies, syndactylies) ▪ Deformities of the lower limbs (such as genu varum, genu valgum) ▪ War injuries and complications of fractures of the limbs (from accidents) <p>Main Challenges:</p> <ul style="list-style-type: none"> ▪ Awareness of our services ▪ Capacity of Program ▪ Ensuring effective referral network <p>Good Practices:</p> <ul style="list-style-type: none"> ▪ Over communication and frequent updates about our work ▪ Partnering with and getting to know other organizations who do complementary or adjacent work ▪ Patient follow-up is key ▪ Collect the right information
Action Points	<ul style="list-style-type: none"> ✓ UNJHCR to share CDE presentation and IRD will be doing the next presentation
7. Health Agencies Update	
	<p>UNFPA:</p> <ul style="list-style-type: none"> ▪ Recommendation on RH services in Camps emerged from the Emergency Obstetric Care (EmOC) training course and report have been discussed. Adoption of the new recommendations has been agreed on with a comparison to the national procedures followed. Donors and implementing partners at the SWG also agreed on ways for following up.

- Mapping of RH services for 2018 will be focusing of Service Advisor as the main tool to use. SWG will make sure that all members use and update their information and services on the system.
- HumaniTerra:**
- Done their first mission in Dec it was for burn complications and it was in cooperation with MoH and now looking for another mission next month between 15-22Feb in Al Basheer Hospital and Al Hanan Hospital, the criteria is more specific.
- JPS:**
- JPS continues its activities in support for the Syrian war-wounded. JPS supported 39 cases (incl. 12 Ophthalmic cases, 5 multi-injury case, 8 Neurosurgical cases, 6 Orthopaedic cases, 3 Chest injury cases) so far, 10 cases in January (5 new entries into Jordan through coordination with MOH).
 - JPS continues its General Referral project in support of BEmOC, CEmOC & NNC cases from Syrian refugee camps. JPS supported 29 CS, EOC & NNC cases in January - 61 cases in total since November, 2017.
- MEDAIR:**
- Fund was received and will continue their project cash for health in Irbid, Mafraq, Zarqa and East Amman. And now open for referrals.
 - Referral email was changed to: referral-jor@medair.org
 - cases that could be eligible (depending further on Medairs SOPS)
 1. Be a Syrian refugee with or without a MOI, old MOI or camp MOI
 2. Be a Jordanian (for pregnancy cases)
 3. Vulnerability of 3 or 4 from the Basic Needs scoring system or through individual case assessment and recommendation.
 4. A household member must have one of the following medical conditions
 5. A pregnant member – expecting either an uncomplicated delivery or caesarean section
 6. A member with another urgent medical need. This includes emergency surgeries that left untreated would lead to disability or other serious cases such as recovery from heart attack, stroke and epileptic seizures.
 7. A Non-Communicable Disease (NCD) that requires recurring medical treatment. This is mainly diabetes and hypertension.
 8. Must not be receiving cash assistance for the same need by another agency – this will be checked on RAIS and in direct coordination with agencies known to be providing cash-for-health.
- CDE:**
- Finished a mission last week, consultation were given to 65 children, and carried 21 operation.
 - Two upcoming missions in Feb **Paediatric ORTHOPEDIC surgery (upper limbs)** and **Paediatric CARDIAC surgery**

UNFPA:

- Providing SRH services including comprehensive for most of the areas.
- In Zaatari camp will be having a training center supported by IRD and it will be functioning soon to train all NGOs and UN agencies who are functioning in Zaatari Camp on all topics need to be trained on. More details will be shared during the coming meetings.
- Some referrals are from outside the camp and not followed outside the camp.
- For Azraq camp, all RH services and SGBV are being provided through the IPS in Village 3, 5 and 6, with a possibility to serve village2 in the future.
- A distribution to the people at the berm was conducted and UNFPA have distributed dignity kit within the distribution plan for women after delivery.

WHO:

- The step survey will be completed by end of 2018, and currently working on finalizing the planning phase and working together with MoH and Department of Statistics.
- For the cVDPV outbreak in Syria, the total number of cases now is 74
- With regards to the berm, an approval was received from MoH which authorized UNICEF and WHO to conduct routine immunization at the UN clinic at the berm, more updates in the coming meetings.
- WHO and MoH will conduct the first health emergency tabletop simulation exercise in the **Public Health Emergency Center** on 29th Jan.

IRJ:

- 34 general and Cleft –lip surgeries, 10 patients for hemodialysis in Amman and Irbid for the coming 3 years, new clinic in the south is under preparation, 120 beneficiaries in 3 awareness sessions was held in the previous two months covering several health topics like winter disease and Diabetes.
- 1000 first aid kits will be distributed along this year after conducting awareness session.
- Upcoming missions:
General Pediatric (March)

QRC:

- For the Kidney Dialysis program for Syrian Refugees out of camp settings: The allocation of HPF will end mid of February and in order to ensure continuous running of this life sustaining program, we secured from internal fund of QRC the necessary resources and running cost for another month till (mid-March) for activities of this programs.

	<ul style="list-style-type: none"> ▪ We hope by then that we got a reply for a proposal previously submitted to secure 7 months of the program, hopefully till the end November 2018. ▪ Qatari Clinic in Zaatari: QRC secured funds till the end of May 2018, the clinic within the scope of the this fund is directed through Nedaa Eil Khair, ▪ Starting from June 2018 we are working to secure resources to directly implement the activities our self. ▪ We are working for a second Qatari campaign in mid-April for Cardiac Catheterization and PCI, details will be shared later.
Action Points	<ul style="list-style-type: none"> ✓ CDE to share the factsheet for the coming mission in FEB ✓ SAMS to share their upcoming mission factsheet ✓ IRJ to share their factsheet for the coming missions ✓ HumaniTerra to share their factsheet for the coming missions. ✓ WHO to involve UNHCR in step survey to address issues related to refugees components.

8. Subsector working groups – Reproductive Health (UNFPA), Mental Health (IMC/ WHO), Nutrition (Save the Children Jordan/UNICEF), Community Health Task Force (Medair/IRD)	
RH (UNFPA)	<ul style="list-style-type: none"> ▪ Recommendation on RH services in Camps emerged from the Emergency Obstetric Care (EmOC) training course and report have been discussed. Adoption of the new recommendations has been agreed on with a comparison to the national procedures followed. Donors and implementing partners at the SWG also agreed on ways for following up.

<p>Mental Health (IMC/WHO)</p> <p>Nutrition (Save the Children Jordan/UNICEF)</p> <p>Community Health Task Force (Medair/IRC)</p>	<ul style="list-style-type: none"> ▪ Mapping of RH services for 2018 will be focusing of Service Advisor as the main tool to use. SWG will make sure that all members use and update their information and services on the system. ▪ The National Mental Health and substance Use plan (2018-2021) has been finalized and the draft document was shared with MoH for review and comments, after which WHO will translate the final document into Arabic and share it officially with stakeholders. ▪ IMC has finalized a comprehensive mental health and psychosocial assessment, a follow up workshop will take place to discuss the recommendations. ▪ The working group is discussing the online (E version) of the 4Ws to be used for 2018 ▪ The Nutrition sub working group is working on the malnutrition questionnaire ▪ JHAS is currently handing over to Caritas as per UNHCR directions, and will be implementing nutrition services in Zarqa and South. ▪ MEDAIR to step down chairing the CHTF and IRD, still looking for partners to take the responsibility of the task force.
<p>Action Points</p>	<ul style="list-style-type: none"> ✓ UNHCR to share the updated service guide with all partners as soon as partner network settled ✓ UNHCR and Medair to decide future of CHTF and way forward to maintain coordination

<p>9. Proposed Assessments/Research</p>	
	<p>N/A</p>
<p>Action Points</p>	

10. AOB -	
	<p>Resources sharing:</p> <ul style="list-style-type: none"> - Health sector member are encouraged to share information about their resources situation, any over stock or under stock in medication or medical commodities can be shared with sector chairs who will be working with the group to maximize use of those resources. - Any organization is encouraged to drop an email at any time if they are out of stock or over of stock that might be lost for certain reason or another.
Action Points	Next HSWG meeting will be 22 nd Feb at UNHCR