

National Health Coordination Meeting

Date: Thursday 9th June 2016

Venue: WHO Office-Amman

Time: 10:00 – 12:00

Agenda:

1. Introductions
2. Review of action points of previous meeting
3. Situation update –UNHCR
4. Health Projects submission and approval guidelines – presentation by sector lead
5. Health Assessment and research protocols and guidelines - presentation by sector lead
6. Healthcare Assessment Of Syrian And Iraqi Urban Refugees In Jordan – Presentation by IMC
7. Subsector working groups - RH (UNFPA), Mental Health (IMC), Nutrition (Save the Children Jordan/UNICEF)
8. Health Agency Updates
9. Subsector working groups - RH (UNFPA), Mental Health (IMC), Nutrition (Save the Children Jordan/UNICEF)
10. Task Forces Update: Community Health Task Force (Medair/IRC)/ NCD Task Force (WHO/MoH)
11. Proposed Assessments/Research
12. AOB

Minutes:

2. Review of action points of previous meeting	
	<ul style="list-style-type: none"> - UNHCR to share the MOH presentation on burden of Syrian Refugees on health care system – Shared - UNHCR: To re-send the invitation to partners to assign their focal point for service adviser training –Sent - UNHCR: To share IMC presentation on 4Ws mental health report with partners – shared - USAID: To share the fact sheet of JICA and USAID new health program – Shared

3. Situation update –UNHCR

Iraqis Refugees

- Total Iraqi refugees registered with UNHCR is 55,570 till end of May
- 700 on monthly basis new arrivals since the beginning of this year
- Total registered this year is 3,524
- 2,516 arrived in 2016 while 1000 arrived before but was registered in 2016

Syrian Refugees

- Total Syrian refugees registered with UNHCR is 655,062 till end of May
- 33,755 newly registered in 2106. Arrival in 2016 is 26,673 & 7000 have been in Jordan before 2016 but registered in 2016
- Stable population in Zaatari with 79,556 while there is significant increase in number of refugees in Azraq camp approximately 51000 & EJC 6,659

Border situation

- 72,000 refugees stranded between Rukban (60,000 refugees) while in Hadalat is 12,000 refugees. UNHCR registered 38,000 in both sides
- 20,000 refugees waiting to be registered, although refugees who are not registered are not able to get food assistances. UNHCR will resume Registration next week. And the focus will be in Rukban
- The authorities are facing difficulties to reach the daily quota which is entering 500 refugees to RAS and then to Azraq Camp
- The admission rate is 130-180 on daily basis
- In Azraq camp since the 7th March received 18,000 refugees till the 7th June
- The difficulties the hesitation among the Asylum seekers to enter the country because of the general fear of denial of access and deportation which will be at later stage. And the deportation will be through Tal Shehab area.

	<ul style="list-style-type: none"> - Continues increase in population at the berm, in Hadalat it's around 100 new arrivals per day and mostly they are coming from Rukban - 8 measles cases are confirmed reported in Azraq camp between the new arrivals. Last case was confirmed in the 2nd May - By the 5th Jun, 4 hepatitis cases were detected in Azraq camp because of the bad WASH situation at the berm. - UNHCR supporting referral services, however the number is low 1-2 cases/day to Ruwaished hospital. - Main gap in both sides (Rugban & Hadalat) still in PHC (24 hour working). The IATF sent joint letter to the Royal Medical Services in order to have 24 hrs services at the berm but still with no answer from their side about their willingness - MSF Holland already started providing primary health services in Rugban and they are focusing on women and children under 5 and planning to expand the service to include non-communicable disease - Jordan health aid society has been selected by UNHCR to provide primary health care services and primary health care package including RH, Nutrition & Mental health at the berm. (Waiting for approval from the authorities) - Regarding urban verification; total MOI cards issued till end of May 366,000 (66% of urban refugees) - 75% of Syrian refugees got their documents back from RAS. And by the end of the coming two months all Syrian refugees will get their documents back.
Action Point	<ul style="list-style-type: none"> ● NA

4. Health Project submission and approval guidelines – UNHCR

	<ul style="list-style-type: none"> - Objective: To provide clear guide on project submission process for health sector group members, national and international organizations who plan to implement health activities in Jordan. - Submission phase: <ol style="list-style-type: none"> 1- Submit project to MOPIC using standard form through Jordan Response Information System for the Syria Crisis (JORISS) http://www.jrpssc.org/systemlogin 2- Follow up directly with the Ministry of Health (MoH) through Planning Administration/Health Economy Directorate immediately after the submission and acceptance of the application by the electronic website JORISS 3- Fill up the required documents for the ministry of health project review committee. (Operational plan, annex, copy of agreement with the government, submit the license of the medical staff to the MoH, license of the organization itself and the identification card of the organization). 4- The MoH will send its recommendations within 2 weeks to the (MoPIC) 5- MoPIC and/or the Prime Minister will share the final decision taken
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	<ul style="list-style-type: none"> - Implementation phase: <ol style="list-style-type: none"> 1- In case of approval, the organization begins the implementation of the project in cooperation with the MoH/ Planning Administration/ Health Economy Directorate 2- The organization should coordinate with the relevant Health Directorate at the site of implementation and provide them with the approval document and the operational plan of the project. 3- Organization should be committed in submitting quarterly, semi-annual and annual reports of their projects performance using the standardized Ministry of Health form (see Annex 2). 4- The organizations should facilitate the field visits of MOH and Health directorate staff to the implementation sites. -
Action Point	<ul style="list-style-type: none"> • UNHCR: To share presentation with all partners

5. Health assessment and research protocol and guidelines - WHO

	<p>Outcome:</p> <ul style="list-style-type: none"> - Understand steps for approving health projects for INGOs working with refugees in Jordan - Submission of health projects through the Ministry of Planning and International Cooperation (MoPIC) - Facilitate follow up with MOH - Required documents for MOH project review - Timeframes <p>Coordination is an essential part of the humanitarian response to:</p> <ul style="list-style-type: none"> - Avoid unnecessary duplication of service delivery - Identify gaps where services are most needed - Strengthening of planning and coordination to ensure appropriate humanitarian response <p>The membership:</p> <ul style="list-style-type: none"> - Members to be nominated and selected, with the possibility of rotational membership every 6-12 months - Current members are MoH, UNCHR, WHO, UNICEF, UNFPA and USAID
Action Point	<ul style="list-style-type: none"> ● UNHCR: To share WHO presentation with partners

6. Healthcare Assessment Of Syrian And Iraqi Urban Refugees In Jordan – IMC	
	<p>Study objective</p> <ul style="list-style-type: none"> - Gauge on patients' general medical habits in terms of preferred touchpoints, hospitalization, medication and health facility selection criteria among others. - Identify chronic disease prevalence among Syrian and Iraqi households as well as identify the most prevalent diseases among each segment. - Understand patients' behaviors with regards to their chronic illnesses - Assess the medical aid received by refugees in terms of coverage (medicine, doctors, facilities etc....) - Identify the organizations on which refugees are reliant on when it comes to financial medical help - Assess patients' satisfaction with regards to the medical assistance received. - Assess the impact of medical expenses on the lives of refugees especially with regards to necessities - Gauge on awareness of organizations that offer medical assistance to non-Jordanians <p>Quantitative Research Methodology</p> <p>Computer Assisted Face-to-Face interviews were the basis of data collection for the study. The final questionnaire (25 minutes) was approved by the client before commencing fieldwork.</p> <p>Findings</p> <p>Please visit UNHCR web portal for full report</p>
Action Point	<ul style="list-style-type: none"> • UNHCR: To share IMC presentation with partners

7. Health Agency Updates	
	<p>SCJ:</p> <ul style="list-style-type: none"> - Updates regarding the nutrition status for the new arrivals passing RAS. During May; the total screened is 1,707 children 6-59 months, 11 severely malnourished and 47 moderately malnourished detected. - All of the cases were referred to IMC and SCJ are following up with the 47 children at the AZC - Most of the MAM children were suffering from diarrhoea and vomiting for the past few days due to the WASH conditions at the berm.

	<p>IMC:</p> <ul style="list-style-type: none"> - Regarding the situation in Azraq camp; there are 110 Leishmaniosis cases are treated in Azraq camp. - More cases are expected to come. IMC is controlling the situation at Azraq camp along with MoH - The Analysis report will be shared when it finished with health sector partner <p>EMPHNET:</p> <ul style="list-style-type: none"> - Established school health program in the Syrian camps in Jordan, this program was conducted in coordination with MoH & UNICEF - They targeted 8300 students in the camps to cover Azraq, EJC & Zaatari - Physical and dental examination in addition to vaccination. - The results will be shared in the next meeting
Action Point	<ul style="list-style-type: none"> ● NA

8. Subsector working groups - RH (UNFPA), Mental Health (IMC), Nutrition (Save the Children Jordan/UNICEF)

	<p>RH (UNFPA):</p> <ul style="list-style-type: none"> - UNFPA distributed contraceptives to their partners, other NGOs will request their needs from MOH on the condition that they should have training by MOH trainers to NGOs doctors. - RHSWG send a letter to his Excellency Minister of health to approve the training of NGOs Doctors on Intrauterine device insertion. <p>Mental Health (IMC):</p> <ul style="list-style-type: none"> - No updates <p>Nutrition (Save the Children Jordan/UNICEF):</p> <ul style="list-style-type: none"> - Conducting nutrition survey, which is planned to take place in September, now in the process of reviewing, adding questions and notes. - Meetings with WASH sector to include nutrition with their upcoming strategy
Action Point	● NA

8. Task Forces Update: Community Health Task Force (Medair/IRC)/ NCD Task Force (WHO/MoH)	
	<p>Community Health Task Force (Medair/IRC):</p> <ul style="list-style-type: none"> - Partners who haven't filled out the 4 W document are asked to do this before 12th of June and send it to Caroline/Elsa - Next CHTF meeting will be on 13th Jul at IRC <p>NCD Task Force (WHO/MoH): No Update</p>
Action Point	●NA

9. Proposed Assessments/Research	
	<ul style="list-style-type: none"> - No proposed Assessment
Action Points	

10. AOB	
	<ul style="list-style-type: none"> - Following OCHA-JHF call for proposal that was launched in April 2016, Three projects in the health sector received grants from OCHA-JHF, the projects and NGOs are the following; JHAS on general referral, Jordanian Paramedic Association on provision of acute health management for war wounded, and handicap international on rehabilitation, orthotic and assistive devices. Total approved amount is 1.2 million USD, and the projects are currently being processed by OCHA who will communicate with NGOs directly. - Next HSWG meeting will be held at UNHCR office on 14th July
Action Points	