 **Because everyone counts**

Minutes of the RHSWG

**Date: April 8th April 2020**

**ZOOM meeting**

**List of participants**

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**Agenda** – **RHSWG**

1. Response to COVID-19 crisis – at National level and field level
2. SRH monitoring tool developed by UNFPA
3. Training needs in SRH to health care providers and non-health providers.
4. Development of IEC material on RH in light of COVID-19
5. **Response to covid-19 crisis**
6. **Response to COVID-19 crisis at National level**

8 pillars in the COVID-19 response are discussed regularly by holding coordination meetings for each pillar.

National coordination pillar

This is the pillar where coordination platforms are conducted to discuss the coordination modality between different stockholders and the advocacy with the government and with other funding agencies regarding COVID-19 related issues.

Risk communication and community engagement (RCCE) pillar

Discussion about campaign, IEC material and other activities related to COVID-19 are held under this pillar. Below are the activities that are being implemented.

* Development of guidelines on the assessment of facility/building that can be used as isolation spaces. This activity is being done with the syndicate of social workers, the order of nurses, the Prime Minister Office and with the Ministry of Interior and Municipalities. The guidelines will be shared with municipalities so that they can assess facilities and buildings to be used as isolation spaces.
* Designation of a number of clinics all over Lebanon. Unicef, WHO and MOPH-PHC department are working on a list of PHCs that would be assigned as clinics where people can be screened and advised on type of care needed.
* Support of severe cases that need to be hospitalized. The MOPH is working on case management of severe cases. Support is being solicited for the hospitals in order to make sure that they are properly equipped for severe cases.

Infection prevention and control pillar.

* In this pillar, discussion are taking place about all activities pertaining to training of health care providers on IPC measures. IPC ToT for nurses working in hospitals and PHCs have been conducted with the order of nurses. Virtual training will be disseminated to all dispensaries/ PHCs that haven’t been trained.
* PPEs and supplies for infection prevention and control are being discussed also in this pillar to see which agencies can support health care providers by procuring these PPEs

Points of entries control pillar

Regarding points of entries, the needed PPEs for screening are being provided to the team in the airport to make sure that proper mechanism is followed with the return of Lebanese. Other points of entries are borders crossing points and these are supported by UNICEF were the screening team have been trained and supported with PPEs.

Supply and procurement pillar.

This is the pillar that explores the local market, the supply chain, and how to enhance the procurement of equipment, PPEs or other needed material.

Quick update about the services that are currently provided at the field level and the impact of the crisis on the service provision

1. **Response to covid-19 at field level**

This related to an update about the services that are currently provided at the field level and the impact of the crisis on the RH services provision.

In summary, participants reported continuity of health care services including for RH with decrease of consultations ANC and PNC). No shortage of RH drugs was reported to date. UNRWA highlighted the urgent need to replenish RH drugs and commodities in order to avoid stock out after 3months since RH drugs and commodities are provided to beneficiaries for 3 months as response to COVID-19. Health care providers are applying infection precaution measures and adopting appointment system and consultation rescheduling in order to organize the visits and reduce gatherings in the centers. Outreach activities and awareness raising sessions put on hold. Patient education on COVID-19 done in centers and information sharing through social media and phone calls, what’s up. Various RH actors are distributing hygiene, disinfection kits and food parcels. (Details from partners in annex I below)

1. **Monitoring SRH service delivery**

UNFPA developed an SRH monitoring tool to closely monitor the RH services and activities implemented at field level. It is suggested that RH actors complete the tool to be able to identify promptly challenges and provide support where possible as well as share best practices among all actors.

The SRH monitoring tool covers four main parts each part is divided into sub-sections as following:

1. SRH services delivered in PHCs :Schedule changes, variation of health care consultations, RH drug and supplies consumption, measures taken in response to COVID19
2. Activities implemented in response to COVID 19: In kind contribution/ distribution of Kits, sharing information on COVID-19, awareness raising activities on RH services, capacity Building initiatives.
3. Specific observations namely regarding adolescent pregnancy and home deliveries
4. Challenges, Best practices and lessons learned
* It was agreed that each organization update the SRH monitoring tool on weekly basis starting Monday April 13, 2020. Also to add one column on the working hours for SHR and phone number for appointment for the supported PHC centers.
* The SRH monitoring tool will be uploaded in google drive so that organizations could have online access to the updated data.
1. **Training needs in SRH to health care providers and non-health providers.**
* UNFPA partners with the Ministry of Public Health, the Lebanese Order of Midwives, the Lebanese Society for Obstetrics and Gynecologists under a technical committee established following a Ministerial decree to follow up on pregnancy and the COVID 19 crisis. The committee is entrusted with establishing a surveillance system, developing SOPs, training frontliners especially at hospital level and developing awareness material about COVID 19 and pregnant women
* The training modules developed by the committee cover three topics: Preconception to postpartum, contraception and sexual health and breastfeeding. The modules are tailored to health care providers and non-health care providers (social/outreach workers)
* TOT on SRH and COVID 19 to midwives from LOM was conducted by the national committee. The midwives trainers will train other midwives working in PHCs and hospitals under a collaboration framework between LOM and UNFPA.
* TOT on SRH and COVID 19 to medical students from LeMSIC was conducted by the national committee. The trained medical students will provide virtual training to social workers under a framework of collaboration between UNFPA, LeMSIC and.

* UNFPA aims to provide virtual training on SRH and COVID-19 to both health care providers and non-health care providers. The organizations/agencies that would like to take the training should register their staff by filling in the training registration form shared by UNFPA
1. **Development of IEC material on RH in light of COVID-19**

The national technical committee on Corona and pregnancy developed three sets of resources translated in three languages:

1. Question and answer document for OBGYN and health care providers on corona and pregnancy day to day issues.
2. Protocols on prenatal, intrapartum and post-partum care with algorithm for clinical practice.
3. Advocacy posters related to pregnancy, breastfeeding and contraception. These material will be distributed to all PHCs and governmental hospitals all over Lebanon

UNFPA in coordination with UNICEF, WHO, MOPH and LRC developed a set of advocacy and information material (flyers and posters) about the RH and COVID-19 in general.

All advocacy material, tools and protocols will be disseminated so that all organizations have standardized messages and adopt unified practices when it comes to RH specifically pregnancy, breastfeeding and contraception.

**Action points**

* To have RH SWG call every two weeks
* To have weekly update on the SRH monitoring tool (Every Monday)
* To share the below hotlines with all beneficiaries
* **Hotline for next care for life saving medical emergency admissions: 01 50 40 20**
* **Hotline suspected cases for COVID-19: 01-59 44 59.**
* **Hotline for refugees on cash assistance or food assistance:01594250**
* **Hotline for family planning counselling, pregnancy and breastfeeding: 70037739 from 6.00 am-00.00**

WHO to follow up with MOPH and to provide clarification about PCR testing prior hospital admission for cold cases without any COVID 19 symptoms. Which UNHCR expressed concern especially for pregnant who are admitted for delivery, the additional cost incurred would push refugees to seek home deliveries.

**Annex I**

Partners input on delivery of RH services in the past 2 weeks

Amel

All Social activities have been stopped. Information material on SRH and GBV in light with COVID-19 are being communicated with beneficiaries through social media and what’s up. The RH services are ongoing and appointment system is adopted to organize gatherings in the centers.

PU-AMI

The RH services are ongoing. The health care providers in the centers are following up with the pregnant women to come and get ANC services as well as the needed supplements according to their schedule and as per the ANC protocol.

IOCC

IOCC developed key messages on COVID-19 that are being communicated with beneficiaries through what’s up and social media. Moreover, IOCC are providing IEC material on COVID-19 to municipalities all over Lebanon to be distributed. They are also distributing hygiene kits (soap, hygiene pads, chlorine, and disinfectant). Through their Mobile unit in the North, they are screening for suspected cases of COVID- 19 and referring them to MOPH and LRC. On PHC level, there is continuity of services nevertheless the number of ANC, PNC and total gynecology consultations decreased.

LFPADE

The RH services in both centers in south Lebanon (Qanoun el Naher and Haoch el Herimeh) are ongoing. However the number of ANC and PNC consultations decreased. Hygiene items are distributed in the centers.

IMC

The Services are ongoing. However, there is a decrease in the number of consultations because beneficiaries are scared to come to the centers and not all the doctors are able to reach the PHCs. Community awareness sessions are conducted remotely through what’s up and phone calls in coordination with community influencers and key persons. In addition, patient education on COVID-19 and distribution of hygiene kits are done in the centers.

Makassed

Services are still ongoing. However, the number of ANC and PNC consultations decreased. Consultations rescheduling has been adopted to reduce gatherings. Patient education on COVID-19 done in centers on one to one basis and information sharing through social media and phone.

 Action against Hunger

Action against hunger are doing awareness sessions and providing hygiene, disinfection kits and food parcels and disseminating messages on breastfeeding and pregnancy in light of COVID-19. They are also sending awareness voice notes using UNICEF messages.

Plan International

Plan International in partnership with Amel are conducting awareness sessions remotely. In addition they are distributing hygiene kits, food parcels and IEC material on COVID-19.

Relief international

Services are ongoing in the centers with huge decrease in the number of ANC consultations. Awareness sessions on COVID-19 are provided to a small group of people in a well-ventilated spaces. In addition, hygiene kits are being distributed to beneficiaries.

UNHCR

UNHCR still covering all registered and unregistered pregnant women admitted for deliveries in hospitals.

Some hospitals are asking pregnant women to do PCR test prior to be admitted claiming that this is a MOPH mandatory testing. UNHCR is covering some of the tests. However UNHCR didn’t receive any SOP from MOPH that it is mandatory that all persons do a PCR test prior admission to hospital even if they don’t have COVID-19 symptoms

The WHO will follow up on this issue with MOPH and get back with clarification

UNRWA

The 27 UNRWA PHCs are open and services are ongoing but the number of consultations decreased due to COVID-19 crisis. And only patients suffering from urgent health disease come to the health centers. The number of patients dropped from around 4000 patients per day to around 900 per day. A screening system is implemented in order to separate patients coming for respiratory diseases from regular patients. Moreover, FP commodities are provided to beneficiaries for 3 months. Consequently, UNRWA will have stock out if FP commodities are not replenished. Education on COVID-19 is being provided to patients in centers on one to one basis and information is being shared through phone and social media. UNRWA with the support of MSF are working to identify some places for isolation for mild cases.