

Meeting Minutes

(Joint) National Health Sector Working Group

25 February 2022, 9-11am, Virtual

Topics of discussion

Introduction & Opening:

- Co-chairs: Dr. Jakob Arhem (UNHCR) and Mrs. Christina Bethke (WHO Health Sector Coordinator) welcomed all participants to the 2nd Joint National Health Sector Working Group.

1. Health sector situation overview and updates – Ms. Stephanie Laba, Health Sector Coordinator for the LCRP, UNHCR Inter-Agency

- Achievements and challenges for 2021: a) huge increased needs (by 225% between Q1-Q4 2021) b) increased demands due to the increased awareness of the availability of services; c) increased PHC consultations outside MoPH network, d) decreased access to routine vaccination for children <5 as (de-prioritization, hidden costs), e) decreased access among vulnerable population.
 - Recommendations and priorities: promotion of Long-Term Primary Healthcare Subsidization Protocol (LPSP), prioritisation of routine vaccination for children <5, focusing on capacity building, comprehensive packages, extension of hospital care support for vulnerable Lebanese, dialysis and blood disease support for the refugee population as no fund beyond April 2022.
 - Discussion:
 - Shortage of medication: as the need is increasing, more shortages are being faced in the national stocks of medication (YMCA).
 - Challenges related to beneficiaries' expectations at PHCs level: process and procedures, vaccination hidden cost (free of charge if applied by nurses, while some consultation fees may apply if vaccination is done by a doctor).
 - SOPs to support secondary care to be discussed in a small group.
 - Shortage of HCW due to the brain drainage and increased workload on remaining staff, noting that agencies are supporting MoPH with extra staff.
- ➔ All details relating to situation overview are included in the attached presentation.

2. Surveillance: Outbreaks & COVID-19 (ESU)

- Updates were provided by Head of Epidemiological Surveillance Unit (ESU), Dr. Nada Ghosn - MoPH
- COVID-19 surveillance slides were presented with key takeaways being:
 - Decrease in positivity rate yet still high.
 - Decrease in bed occupancy (Regular beds and ICU beds)
 - Decrease in Case Fatality Rate (0.9%) in ages up to 49 years, and daily rate plateauing.
 - Most affected areas by the current wave are Akkar, Beirut and Mount Lebanon
 - Contact tracing - prioritization of testing for people in areas with low vaccination coverage namely Akkar, Bekaa, Baalbek-Hermel and North.
 - Decrease in reproductive number (Rt): 1 case transmitting infection to 1 person
 - Sentinel surveillance: through week 6, 50% of samples were COVID-19 cases and zero influenza cases.

3. COVID-19 Response Updates (WHO & relevant agencies)

- Pillars 4 & 6: IPC & POEs – *Ms. Danielle Inaty, WHO*: New Civil Aviation Circular published 23-Feb-2022
 - All travelers wishing to come to Lebanon (except children under 12 and UNIFIL) should get registered on <https://pass.moph.gov.lb> to receive the MOPH PASS
 - Fully vaccinated passengers (received second or third dose no longer than 6 months ago) are exempt from performing a PCR test or Rapid Antigen Test in their countries of departure and also exempt from performing a PCR upon arrival to BRHIA, but are required to upload the official documents proving that on the MOPH PASS platform.
 - **Update after the meeting**: please note a new circular has been released 25 February which states that **all passengers** (regardless of vax status) coming to Lebanon are exempt from performing a PCR upon arrival to BRHIA. This will be further discussed in the next joint health sector meeting.
- Pillar 7: Case management – *Dr. Solara Sinno, WHO*: a slight decrease in total hospitals and increase of 97 beds in the past two weeks to reach 723 regular beds and 516 ICU beds. Bed occupancy for hospitalized covid-19 patients is stable at 62% for regular beds and around 73% for ICU beds this data is for 14 February 2022 noting that yesterday's report showed only 60% occupancy rate.
- Pillar 10: Vaccines – *Dr. Racha Hamra, WHO*:
 - Supply: Donations of Pfizer and Sinopharm newly received reaching a total of 8,214,380 doses.
 - Registration: 68.3% of target population 12 years and above of all Population residing in Lebanon registered. Increase registration among non-Lebanese in 4 weeks.
 - Administration: Around 5.4M doses administered. Lebanon is almost at 40% in vaccination coverage compared to other Eastern Mediterranean Region countries. 70% of doses received are utilized.
 - Moderna: starting next week, Moderna vaccine will be administered to 18+ individuals to accelerate the use of Moderna vaccine (mRNA) and Pfizer vaccine will be administered to 12-18 years.
 - Discussion:
 - Slowing of vaccination is due to many reasons: hesitancy, vaccination fatigue, people assuming that Omicron is mild and there is no need to get vaccine anymore, plus news from other European countries to lift preventive measures gave impression that covid is no more severe, it should be noted that these countries reached more than 80% vaccination rates.
 - J&J is still put on hold for further decision by MoPH.
 - WHO will start supporting hospital based vaccination sites with financial incentive per dose administered.
 - No specific numbers on people vaccinated with disability (could be requested from MoPH as not available publicly on IMPACT)
- Updates relating to migrants (IOM) and refugees (UNHCR)
 - Migrants – *Dr. Nada Najem, IOM*: 14,009 migrants registered and vaccinated. IOM continue its support with PPEs provision, hygiene kits and PCR testing as needed. 3 trainings on IPC measure provided to non-health staff at 3 PoEs (Dec-2021 & Jan-2022). Simplification approach with same-day outreach, registration, transportation, vaccination all together via pop up clinics and weekend events.

- Refugees – *Carmen Karim, UNHCR*: overview of COVID-19 cumulative cases (Pillar 7) and vaccination status. > 37,000 doses administered through the Mobile Vaccination Campaign (AMEL Association & MSF) targeting mainly locations with ITS/CSs (Bekaa & North). Planning for vaccination at schools is ongoing.
 - Discussion: IOM is in the process of resource mobilization to continue support to vulnerable populations to access vaccination beyond March 2022.
- ➔ *All COVID-specific response details are included in the attached presentation.*

4. Continuity of Care (Primary, Secondary, Tertiary & Community Healthcare) - All Frameworks

- **Nutrition** - *Mr. Amirhossein Yarparvar, Nutrition Sector Coordinator, UNICEF*
 - SMART Survey final report finalized: 5-9.5 % of mothers with acute malnutrition. 70% missing the Exclusive Breastfeeding.
 - Around 200,000 children are affected by a form of malnutrition which has a major burden on Lebanon's economy.
 - All systems must be better equipped and more accountable to deliver nutritious diets, essential nutrition services and positive nutrition to position Nutrition as a priority in the national development agenda.
 - Nutrition sector is working on a new strategy focusing on 5 strategic areas.
 - Discussion:
 - Promoting BF is a priority and raising awareness of the community on the danger of formula milk donation.
 - Nutrition Sector Strategy aims at guiding the response and will be informed by the National Strategy once launched.
 - The successful rates of initiation of BF were collected/measured from the nutrition survey, the indicator and question are standard for global IYCF Indicators.
 - **Child health and Expanded Programme on Immunization (EPI)** - *Ms. Doaa Kamal MoPH Primary Health Care Department*
 - Finalization of the update of national immunization calendar and dropout protocol.
 - Intensifying routine immunization in collaboration with LRC and UNICEF.
 - In Response to the regional threat of polio outbreak, a vaccination Campaign will target children under 5 years of age with IPV vaccine and OPV vaccine.
- ➔ *Details related to nutrition sector and EPI and are included in the attached presentation.*
- **Reproductive Health (RH)** – *Ms. Jouhayna Dawaliby, UNFPA (no presentation)*
 - No major variation for SRH services; Ongoing referrals and community awareness sessions conducted as part of maternal care and family planning services.
 - No shortage in RH drugs; only shortage in pap smear kits.
 - CMR taskforce discussed the gaps in CMR services. MoPH and CMR taskforce to select 1 CMR facility to be selected by Governate.
 - **Mental Health & Psycho-Social Support (MHPSS)** - *Ms. Nour Kik, MoPH National Mental Health Programme (no presentation)*

- Annual action plan is currently being finalized. Partners to reach out to MHPSS taskforce to align activities with the Action Plan and National MH strategy.
- Discussion with protection sector on joint areas of work.
- Pilot of emergency mobile MH response mechanism completed (Teams of psychiatrist and nurses mobilized to support MH emergency cases & transportation mechanism with LRC); results are positive under effectiveness of the module of care. Main challenges in scaling up is shortage in human resources in MH professionals, to build capacity of GPs to join the mobile teams. National Lifeline for emotional support/suicide risk de-escalation/referrals through the hotline: 1564 from 8:30 am – 5:30 am

Updates from Health Sector Partners

- Updates were provided by *Mrs. Hana Nimer, SAID NGO*:
 - Colorectal cancer awareness videos: <https://www.youtube.com/watch?v=U8vpfUsbxFU>
<https://www.youtube.com/watch?v=KIAX6JPeQyU>
 - March is the Month of colorectal cancer awareness: including hybrid awareness webinars including in-person activities (encouraging active lifestyle and early screening to prevent colon cancer).
- Updates were provided by *Mr. Imad El Hajj, Children Cancer Center of Lebanon (CCCL)*:
 - CCCL launched HPV Vaccine Program in April 2021 to promote awareness about HPV and ensure access and coverage of the HPV Vaccine.
 - Registration Open to Girls & Boys <15yo via link: <https://forms.gle/BaeBJFJ32mDGrAFY6>
 - HPV vaccines are free of charge based on eligibility criteria and stock availability
 - For information: 01351515 ext. 8024 or to register <https://forms.gle/BaeBJFJ32mDGrAFY6>
- EPI Updates provided by *Mr. Bhrigu Kapuria, UNICEF*:
 - Addressing the immunization gap: Focused intervention in areas with highest drop out of children.
 - MoPH in collaboration with UNICEF and LRC initiated a limited scale intervention for 2 months (Dec 2021 – Jan 2022) targeting 8 districts with the lowest coverage were selected for immunization (34,656 children vaccinated) ; including 3 activities: outreach, vaccination inside mobile units, awareness sessions.
 - Field implementation of integrated outreach will take place in 9 Qada during the 1st week of March aiming at targeting 100,000 children and adolescents between March-December 2022, including linking missed children to EPI points for next doses.
 - All sector partners are requested to spreading awareness, motivating parents, coordinating at PHC level for follow up on children during outreach activity.

➔ *Details from partners updates are included in the attached presentation.*

5. Updates and notices from response frameworks (ERP, LCRP & 3RF)

- ERP – *Ms. Christina Bethke, Health Sector Coordinator, WHO*
 - Reminding partners on reporting activities under ERP: reporting for January: 1-10 February.
 - Gaps are shown in the support to cold chain for non-covid vaccines, and non-covid hospital cost.
 - More support to hospitals is needed as the UN Humanitarian Fuel Support is ending in March 2022: no extension. Donors are requested to fill in the gap.

- Partners are requested to fill in the gaps in outreach in some locations and training on GBV and IPC.
- MSNA Health Sector PIN and Severity will be shared next week: 1.96M of People in Need for humanitarian health services.

Action points

Action point(s)	Focal point/agency	Timeline
To follow up with Nutrition Sector Coordinator on any indication on area distribution/differences in the SMART survey.	All Partners	Ongoing

Closing note

- The next meeting will be held on **exceptionally on Thursday, 24 March 2022, 9-11am.**

Annex: List of attendees

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