

Minutes Protection Working Group meeting (16.8.2022)

Agencies present: Patrir, Plan International, Hayata, Medicines du Monde, ANES, World Vision, ICRC, NRC, DRC, FONSS, Eeirb, Oxfam, Internews, UNHCR

Agenda points / main topics discussed:

- 1. Inter-agency referrals open floor discussion
- 2. Protection Working Group Action Plan
- 3. Updates from GBV sub-WG, AAP/CWC Task Force
- 4. AOB

Introduction and agenda points presentation by Protection Sector Lead Jorunn Brandvoll (UNHCR)

1. Inter-agency referrals – open floor discussion

- The Protection Sector Lead started by saying that UNHCR internally has started discussing having a proper tracking system for individual cases that receive counselling and are referred to other agencies for specialized follow up. There are discussions in UNHCR Romania about the introduction of the RAIS platform as a means of tracking hotline calls and referrals. This platform is already being used by a number of UNHCR offices in other countries. Participants to the WG were asked if they are actually using a referral system and if so, what system and how does it work?
- <u>Plan International:</u>
 - Plan International are conducting numerous referrals from parents and their children, mainly to governmental services (healthcare, legal services)
 - They do not have a current formal documentation system but use an internal tracking per referral sector.
- FONNS
 - FONSS presented the case of the 'Nicolina' accommodation and services center they manage together with their partners in lasi, where an assessment of basic and specific needs is conducted by three social workers. They refer to two types of services:
 - 1. Public system (residential/day care)
 - 2. Private
 - FONSS emphasised the good mapping of social services that they do at a county level and the fact that their social workers are up-to-date on this in order to do adequate referrals
 - **Health services** referrals are more difficult as they depend on access to family doctors which then refer to specialised doctors. This greatly varies by place and by case
 - Social services referrals on the other hand are much more harmonised
 - The **form** that the social worker uses whenever a person is referred is the one regulated by the law, the social service is required to report the person to their attention.
 - Replying to a question, FONSS affirmed that referrals are usually individual and based on the option selected by the person (whenever a choice is available). If the service is used by the entire family (such as legal information/aid), the entire family is referred to that service. The referral includes all details related to the profile of the service, availability of places, coordinates, contact person, etc.



• East European Institute for Reproductive health) in Mures county (GBV survivors, shelter)

- On the basis of an inter-institutional protocol between all relevant parties, they have designed a special form and a specific procedure. For GBV for instance:
 - 1. Referral options
 - 2. Get consent
 - 3. Referral itself (also contacting the institution to make an introduction, potential accompanying)
- They refer to other counties beyond Mures as they are part of a national network

Greg Cameron (Inter Agency Coordination Team)

- Looking at setting up networking events for the field offices in order to create a space for NGOs to connect and coordinate and allow them to learn about what the government and the UN are doing.
- <u>Ana Grozea (Protection UNHCR)</u>
 - AAP Task Force has been working on the complaint mechanism and it will be implemented asap, starting with Romexpo

Follow up actions:

- AAP Task Force tasked to look into referral mechanisms, including an inter-agency referral form

2. Protection Working Group Action Plan

• The PWG Action Plan was presented to the group with no follow-up comments

3. Updates from Ana Grozea (UNHCR)

- DSU meetings:
 - Ministry of Health representative a guide has been released on how to register TP holders for the National Health Agency and facilitate their access to the healthcare system. The guide is aimed at providing technical support to functionaries of the National Health Agency on how to overcome problems which arise when inserting the CNP (Personal Identification Code) that refugees are being given with the TP document
 - Issues are reported to be faced by refugees when attempting to open a bank account in Romania, diverse practices and outcomes. Raiffeisen Bank reported as being flexible
 - o 50/20 program due to be revamped and also adapted during the autumn time
- AAP/CWC Task Force
 - Feedback/complaint mechanism: A form for feedback and complaints has been created
 - Working on a similar document for Romexpo
- UNHCR Telegram channel
 - \circ Now live and operational
 - o Offer to take up any relevant messages to be disseminated
 - Follow-up point raised by **Jonathan Senna (UNHCR lasi Office)** on the importance of sharing eligibility criteria for cash assistance through telegram channel now after the three months to dispel misconceptions about cash assistance.



Further updates and follow-ups:

- Konstantina Loupeidou (PSEA Inter Agency Coordination Officer)
 - Trainings for government officials in the North (border police and police) will be held on GBV and PSEA
- Irene Scott (Internews)
 - An assessment of the barriers and preferences for information access for the response in Romania is currently being undertaken by Internews with data from four regions and will be published in three weeks