

Health Sector Working Group Meeting, July 2024

Minutes of Meeting

Date: 25 July 2024

Place: UNHCR Amman Branch Office

Chaired by: Dr. Ruwaida from MOH and Dr. Adam from UNHCR

Attendees: MOH, USAID, UNHCR, UNFPA, UNRWA, WHO, SAMS, Caritas Jordan, IRC, IMC, HI, Medair, JCDC, CDE, SCJ, Qatar Charity, Health Appeal, CVT, RHAS, IOCC, JHASi, and AMR.

The meeting started with welcoming and partners introduction, then review the meeting agenda.

Agenda:

- Introduction and review of actions points from last HSWG meeting.
- WHO update.
- Operational update by UNHCR
- Sub Working Groups updates.
- Updates by the members of the HSWG
- A.O.B

1- Introduction and review of action points

- Introduction of attendance completed at the beginning of the meeting and previous action points reviewed as the following:
- MOH will attend the sector meeting regularly. In this meeting no update from MOH but more listening to the briefing from the sector members.
- Ruwaida from MOH start welcoming the attendees and insured that they will keep in touch and continuous following the updates with UNHCR and other partners.
- WHO represented by Dr. Oday Ibrahim who attended the HSWG for the first time preferred to postpone the WHO updates to the next meeting and keep his participation limited to understand the Jordan's context and the dynamic of coordination.
- **Action Point:** WHO to present the final summary of finding related to the publication of the refugees and migrant health system review. final paper that published by WHO, agreed to postpone for the next HSWG.
- **Action point:** related to the WG members reporting gaps on both data-based Jordan financial tracking system and activity info, some of partners reach Saud from IAC unit and they trying to fix their reporting the gaps for the Q1 & Q2 of 2024 and the other waiting to fix their gaps of reporting.
- **Action point:** HCAC the partner the UNFPA presented the finding of EmONC assessment and requested from UNFPA to share the full report with HSWG. >>> **Done**

- **Action Point:** Interagency coordination unit to present quarter one and quarter two findings in the next working group meeting. >>> **Done**

2- Operational Updates:

UNHCR

- Due to funding situation and budget cut during 1st half of the year, UNHCR been involved with Qatar Fund for Development (QFFD) just to trying to accommodate for the need for the future especially for the secondary health services as the most impacted area because of the recent budget cut, positive feedback received from QFFD that almost 4.3 million will be accredited to the secondary health care. UNHCR worked jointly with QRC who the recipient of the fund is, still there is a discussion to agree on the segregation of duties for refugees in camps, which is expected to start by October, that will maintain the essential secondary lifesaving services for both camps until end of 2025.
- Qatar charity will be providing dialysis services for ESRF cases inside and outside the camp.
- UNHCR has been contacted by QFFD to support the medical referrals in Zaatri camp.
- UNHCR and Medair conducted a meeting in Al Basheer hospital as part to improve the level of communication between governmental hospitals and Medair projects just to expand the umbrella of coverage because Medair receiving substantial amount of Money under their CFH, to fill at least some gaps and working side by side with major governmental hospitals just to have things smoothly, with a big thanks for MOH team for facilitate this smooth implementation of the projects that would support the refugees from one side and the health care system to maintain the financing of major activities at the secondary health care system.
- Cash assistances back to the norm which is the total number of the beneficiaries 23.000 and will be started from August to be resumed. It will somehow help in the essential needs for the refugees.
- As a part of UNHCR strategy to have the coordination responsibility and to build the capacity over all the sector member, their where a suggestions to have presentative from either NGOs and INGOs in part of discussion with MOH to discuss their presence and the outcome of that meeting for HSWG meeting to be hosted by MOH, specifically for the members for the nomination their will be an email send for nomination, everyone can nominate separately and anonymously online voting, and next meeting will announced who will be co-chair based on the outcome of that exercise. And will help to support and build the capacity for who will be sit for the co-chair and the TOR for this group will be shared with the group, just to be oriented to the responsibilities and duties of expectations from the one who will be in this position.
- A follow-up meeting with MOH to discuss three major things.

1. MOH involvement in the sector coordination group and the HSWG meeting, and MOH received our suggestion to host HSWG meeting in future.
 2. The policy manual update, UNHCR and MOH decided jointly to update the policy manual, the first revision sent to the MOH, and engineer Huda committed to take it forward internally for the MOH have a new version with a new update because there has been a lot of updates to the policies and accessing during 2022,2023, and now 2024. And after the update completed, we selected about 218 PHCCs based on our mapping exercise those centers how've been the greatly accessed centers by the refugees where most of the refugees sitting in the catchment area of those centers.
 3. This is part of UNHCR strategy to improve the awareness of the refugees not only the MOH staff about their privilege when they come to the PHCCs.
- The last house survey finding where found one quarter of the refugees having the white card which give them the accessibility at the PHCC services at non-insured rate, our aim to update the policy manual awareness raising of the front liner of the MOH as will as the refugees to improve the access of the refugees and minimize some barriers when the access the PHCCs, a quick catch-up with RHAS has some projects focusing on community health components country wide, and we will be happy to be part of the training for the community volunteers country wide to improve the accessibility of refugees.
 - Back to the health access and utilization survey as apart of discussion, MOH kindly asked us last year to consult them on the tool itself. These consultations already happen, there are some questions already added to the survey this year, and mainly the question is to get more information about the refugee's access for the MOH what the barriers would be, so we can better identify the access barrier side, and address them all. The tool revision completed, the programming and testing expected to take place next week, maybe during the first half of August we will have the data collection from urban side, we still waiting the camps finding it's completed and waiting the report, hopefully next meeting will be able to present the results.
 - UNHCR/PHU Implement the health access and utilization survey

UNFPA:

- The SRHWG, the custodian for the SRH strategy for the 2030 presented a background of the strategy itself, and how Jordan perceived strategy as a breakthrough in the SRHR agenda, the integration of the refugees in the national health system. And the specific needs of the refugees when come to the SRH services.
- The monitoring framework for the strategy itself, and the SRH components, and needs for Family planning services for refugees and raise awareness.

USAID:

- USAID support piloting the 1st telemedicine PHCCs at the MOH, selected Zarqa hospital and connected with 4 comprehensive health care centers (the scope of services includes RMNCH services, Family planning and child development) through this services it will decrease the

referrals from comprehensive health center and decrease the load on the hospitals. Tow part USAID working on it about that:

- 1st thing is to complete the instructions came out from the by law, to make it legal services within MOH through specific fees and everything related to the telehealth, legal services for telemedicine. 2 lawyers working on it.
- 2nd part the piloting within the service delivery, working with the primary health care administration, through health system strengthening, (capacity building through the staff training and centers innovation), first part targeting 4 PHCCs.
- The 2nd part USAID awarded a new project HEMAYA, it's a GBV focused project, and it's cross cutting between health and GBV services. And special capacity building for the staff within the public and private services providers to address the GBV cases.
- The 3rd thing is for health care providers CBD hours, as a part of the G-to-G agreement with MOH for continuity of professional development, MOH launched the 31st electronic licensing service for health care provider, this will enable the health care providers to get the license from the system and it's expected to be completed by next October. It's part of governmental electronic services a platform for the purpose of health care staff continuous development

SAMS:

Health Program Updates:

1. **Rehabilitation:** SAMS will begin coordinating to provide rehabilitation services in Al Hashmi with support from the MoH. Additionally, our team is offering awareness sessions in collaboration with CBOs.
2. **Diabetes Management:** SAMS will provide a one-year supply of glucometers and testing strips to 500 beneficiaries with Type 1 Diabetes under 30 years old across 11 governorates.
3. **Zaatari:** SAMS has established an ophthalmology clinic in Zaatari and will soon begin providing medical services.
4. **School Health:** SAMS is coordinating with MoH and MoE to initiate a dental school health project in Zaatari camp.

Medical Mission July 2024.

SAMS recently completed its second medical mission of the year, hosting 84 volunteers from around the world. Together, we achieved the following:

1. **Surgical Procedures:** The mission delivered surgical care to 344 patients in cardiology, ophthalmology, general surgery, plastic surgery, dental surgery and gastrointestinal surgery.
2. **Patient Care :**Comprehensive care was provided to 2,434 patients across different specialties. This included 941 internal medicine consultations and 410 dental appointments. The mission addressed both acute and chronic conditions such as hypertension, diabetes, and respiratory infections. Additionally, the mission placed a significant focus on mental health support, with 29 referrals for specialized care.

3. **Medical Education and Volunteering:** A total of 351 medical students benefited from educational and volunteering opportunities during the mission. This included 142 students who participated in educational sessions at Prince Hamza Hospital, 147 students who supported the mission on-site, and 62 international medical students who joined to gain experience.
4. **Dental Education in Zaatari Camp:** The mission also focused on dental education for 119 Syrian refugees in the Zaatari camp, emphasizing the harmful effects of smoking and the importance of oral hygiene, including regular brushing, flossing, and a low-sugar diet.

UNFPA/JHASi:

- In Zaatari camp, 2 operational SRH clinics outside the Main maternity clinic will be stopped due to budget limitation. One is Z1 in D1, and the other is Z4 in D8, the beneficiaries will be shifted to the other SRH service providers inside the camp and the high-risk pregnant women will be referred to Z3 main clinic.

Highlighting:

- MOH need to monitor jointly with UNHCR the private health sector projects and programs inside the camps and the impact of it on the donors' projects, and beneficiaries.

CVT:

- The fund secured for 2 years.
- They update referral pathway for MHPSS services.
- The services are working as usual for 2 years.

JCDC:

- Have online health care training platform. With subsidized training fees.
- Have national research committee, started receiving request from different universities and publishing studies.
- Finished inhouse Mapping study about NCDs related documents and will be disseminated on their website. After launching workshop.
- The west Nile fever working with the MOH, RCCE Risk communication coordination engagement national committee that is hosted by the JCDC in coordination with the MOH, till now everything under control and health communication messages will be disseminated and a lot of scenarios discussed with MOH.

IMC:

- IMC plan to do the on-job coaching and training for the IMC staff and other partners within the MOH hospitals for doctors and invite the MOH to nominate the training attendees.
- The nutrition training especially on the MUAC screening.
- Disengagement of the community program and collecting data on the impact of this on the community especially on the children who impacted on this program.

- Communication from Taiwan embassy they showed their interest to organize a medical mission in Zaatari and Azraq camp and communicate with them about the modality.

Qatar Charity:

- QC has Cancer patient project which will be ends in September 2024, and will update UNHCR and MOH for ant expanding updates.
- For hemodialysis now in the tendering process and will update us with the situation.

Health Appeal:

- HA providing CBD program for the health care service providers continuous education online and face to face licensed courses, free of charge.
- Expanding services by adding Dermatology and physiotherapy specialists.

Caritas Center

- Mafraq and Zarqa centers are engaged with the HCAC accreditation program funded by UNFPA, for Women friendly health care centers (WFHCC) project. As a part of MOH accreditation program for 150 PHCCs.

Hope Chain:

- HC sign an agreement with AMR and JHASi for screening for the children with congenital deformities in upper and lower extremities, and urban it's conducting a campaign in a partnership with MOH for national screening targeting the children with DDH.

UNRWA:

- UNRWA providing PHC services for Palestinian refugees in Jordan, through 25 centers, last year served around 1million Palestinian refugees, and 20,000 refugees from Syria.
- UNRWA ran a camp clinic with JHASi.
- UNRWA now suffering from financial constraints, looking for partnership with health care providers, signed an agreement with SAMS, Jordan breast cancer program, and an agreement signed with celiac disease society, providing an ID card for celiac disease beneficiaries provided a deducted amount on the cost of the special dietary products.

IOCC:

- In coordination with MOH, finished a training for 182 of the MOH staff receiving a training on the basic sign language, and aiming to advance training and TOT training on the following second and third year.
- Working on accessibility adjustment for 5 schools in Amman, Rosefish, Zarqa, Karak and Irbid, directorates, hoping lunching them in the following month August 2024.
- All the other services rehabilitation, ophthalmologist, ENT, and prosthetic devices for lower extremities, continuously will be done in the following year.

IRC:

- Under BPRM, IRC provide Cash for Health for NCD patients. The current grant ends on August 31, 2024. And now a two-year proposal submitted to BPRM and waiting for their response. Will update us with the result soon.
- IRC are conducting a study titled Breaking Gender Barriers in RMNCH services. the data collection process finished and expected to finalize the report in September. Will keep us updated.

HI:

- A new rehabilitation department has been established at Abu Ubaida Hospital in Northern Jordan Valley to serve patients in need of rehabilitation services.
- Referral to our partners in various regions continue, where beneficiaries are assessed and treated accordingly. Evaluations are conducted in the physical therapy, occupational therapy, and psychological services departments.
- It has been agreed to hold a rehabilitation platform meeting in September to discuss the developments and achievements made towards the national strategy.

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