

<p>Action points from previous meeting:</p> <ul style="list-style-type: none"> • Abortions: It has not been possible to arrange meeting with Papageorgiou Hospital, yet. Ippokratio Hospital continues to refuse the procedure. • Dental care: MdM have contacted Zagliveri's Health centre, who are willing to see patients but transportation is the issue. No other actor has identified health centre they could support with materials to provide dental care. • Infant feeding materials: Save the Children have shared their materials. UNHCR in the process of contacting Institute of Child's Health to obtain permission to translate Greek materials into PoC languages • AMIF staff: EKEPY has not shared job descriptions, it is unclear whether they have been defined. • Site coverage: SAMS is establishing presence in Grevena and Veria Hotel and is undertaking a field assessment at Koutsohero. • SGBV-sexual assault management handbook clarifications regarding inconsistency with Greek law are to be clarified with MoH directly. <p>Clarifications regarding medication prescriptions to PoCs</p> <p>PoCs are entitled to having electronic prescriptions issued by hospitals, but this is not possible in the absence of an AMKA number or KYPA card. Also psychiatric and neurologic medications are supposed to be dispensed by the hospitals, but this is not happening either, very likely for the same reasons.</p> <p>AMIF staff integration in camp work schedules</p> <ul style="list-style-type: none"> • Staff have started working in some camps. There will be adjustments to where they go, as camps have closed, others will open in March (Kavala, Drama, Serres). 	<p>Action point: Continue efforts to meet with Papageorgiou Hospital's director of obstetrics.</p> <p>Action point: Actors to continue efforts to identify Health Centres that could provide dental care if supported with materials.</p> <p>Action point: First draft to be submitted by UNHCR at next meeting.</p> <p>Action point: UNHCR to check what action has been taken and whether clarifications have been given.</p> <p>Action point: All actors to ask their headquarters in Athens what action is being taken to resolve the issue. Consider stepping up pressure for an answer, positive or negative.</p> <p>Action point: EKEPY to share team compositions with UNHCR, who will then disseminate the information to all actors</p>
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- Their job descriptions will be shared with actors, once they are finalised. Their work schedules will be agreed with EKEPY, but will be communicated by EKEPY to the medical teams.
- As most of them lack experience they will have to follow the medical actor's instructions, but the medical actor can not refuse to accept them in their team.
- They will not use the medical clinic premises or equipment when the medical team is not present. Where there is army presence, they may establish an after-hours or weekend office, only for the administration of first aid.
- In case of security evacuation, they are to follow the medical team's decision. Any issues to be reported to EKEPY directly.
- Psychologists, social workers and sociologists should work with PSS and other similar activity providers, rather than the medical teams, as again they should function without clinical supervision.

Common code of conduct

In Softex and N. Kavala, there is already a draft code of conduct circulated within the actors. This, as well as security focal points and evacuation plans are SMS actor's responsibility. Actors were encouraged to approach SMS actors and to participate actively in the formulation of common codes of conduct at site level, rather than having them imposed on them.

Information sharing

- Medical actors were encouraged to participate in establishing rules at site level, to assist communication with other actors. This is already happening during site coordination meetings, but is important also to be established in hotels.
- MSF informed participants that they will be moving closer to the medical team in Softex.
- Medical passports. The template has been shared with all.

Updates from other working and subworking groups

- Hygiene. The situation in Softex remains an issue, with accumulated free sewage material, but the site has been chlorine sprayed and latrines have been established to be shared by two containers each. Red Cross commended that compliance with using those rather than the ones in the containers is improving.
- PSS. Issues with psychiatric patients who are violent being discharged from hospitals recently (two separate cases). EKEPY is not able to intervene and it is highly unlikely that psychiatric departments would share their protocols, even for the medical actor's information. Also related to these patients are the medication issues mentioned earlier.
- Clarifications were requested regarding ability of PoCs to be registered to Redestos/Vasilika. This has also been raised during protection meetings.

Other matters

- Kitrinos had cooperation with Dental Coop, who are however leaving next week.
- Two organisations, EREC and DocMobile have expressed interest in registering with the authorities and are awaiting approval. This will have to be from MoH at Athens level. The former is offering to provide gynaecological and ophthalmological care. The latter mostly primary health. Until registration is complete and permits have been granted, they can not enter camps or other sites. Red Cross and SAMS reported that there had been issues with poor communication between Doc Mobile and the medical teams, with distribution of inappropriate medications.
- A mobile unit consisting of minivan with staff including driver and nurse will be available for Alexandria. There are plans for two similar units to be stationed in Thessaloniki. Their purpose will be non-urgent patient transportation. It was indicated that Alexandria camp is fully covered for transportation by the medical

Action point: MoMP to clarify issues related to registration into camps.

Action point: Until registration is granted or denied officially, there has to be a communication with those actors, which will be undertaken by UNHCR, regarding the importance of coordinating any of their activities with the other medical actors, even those outside of sites. That is necessary to establish appropriate continuity of care and in the interest of patient safety.

Action point: EKEPY will consider stationing the mobile unit in another area of the same regional authority, in more need of transportation. Possible locations are Western Thessaloniki and Grevena.

<p>team, St. Elisabeth's University/Slovak Medical team.</p> <ul style="list-style-type: none">• There is going to be a preparedness exercise next week, organised by EKEPY and the Bulgarian authorities. Unfortunately there is no space for NGOs to be invited as observers.• There is a misunderstanding of Polycastro Health Center, regarding the scope of the MoU between UNHCR, Ippokratio and MdM, which resulted in them referring patients from N. Kavala to MdM for Pap smears.	<p>Action point: UNHCR will clarify this issue directly with Polycastro, health actors in Nea Kavala and MdM.</p>
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