

## Health Coordination Meeting Minutes of Meeting

**Date:** 22 Nov. 2012

**Time:** 12:15 p.m.

**Venue:** UNHCR – conference room

**Attendees:**

UNHCR	<b>Snr. Public Health Officer</b> Ann Burton	Burton@unhcr.org
	<b>Associate Programme Officer</b> Gulnara Yanbukhtina	<a href="mailto:yanbukht@unhcr.org">yanbukht@unhcr.org</a> 0797921012
	<b>Assistant PH Officer</b> Ibrahim Abu Siam	<a href="mailto:abusiam@unhcr.org">abusiam@unhcr.org</a> 0798280343
	<b>Snr. Programme Assistant/ PH</b> Tala Tahboub	<a href="mailto:tahboub@unhcr.org">tahboub@unhcr.org</a> 0795640680
	<b>Snr. PH Assisstant</b> Duaa Rafee	<a href="mailto:Rafe@unhcr.org">Rafe@unhcr.org</a> 0795308801
WHO	<b>Emergency Coordinator</b> Dr. Nada Al Ward	<a href="mailto:alwardn@jor.emro.who.int">alwardn@jor.emro.who.int</a> 0797203746
French Government	<b>French Field Hospital</b> Frank Berger	<a href="mailto:frankdesp@gmail.com">frankdesp@gmail.com</a> 0775168927
IRD	<b>Program Manager</b> Muna Hamzeh	<a href="mailto:muna.hamzah@ird-jo.org">muna.hamzah@ird-jo.org</a> 0798899474
Medair	<b>Health &amp; Nutrition Proj. Mgr.</b> Liselotte Eberhard	<a href="mailto:Healthpm-jor@medair.org">Healthpm-jor@medair.org</a> 0796293895
	<b>Health &amp; Nutrition Advisor</b> Gabriele Fander	<a href="mailto:Prog-jor@medair.org">Prog-jor@medair.org</a> 0796294628
UPP	<b>Programme manager</b> Marta Triggiano	<a href="mailto:Marta.triggiano@unponteper.it">Marta.triggiano@unponteper.it</a> 0799926679
UNICEF	<b>Health &amp; Nutrition specialist</b> Carine Morel-Boyce	<a href="mailto:cboyce@unicef.org">cboyce@unicef.org</a> 0798556929
UNFPA	<b>Humanitarian Coordinator</b> Dr. Shible Sahbani	<a href="mailto:sahbani@unfpa.org">sahbani@unfpa.org</a> 0797779135
CVT	<b>Social Worker</b> Yousef Ghanimeh	<a href="mailto:yghanimeh@cvtjo.org">yghanimeh@cvtjo.org</a> 0797257102
JHAS	<b>Project Manager</b> Nicola Dababneh	<a href="mailto:pm@jordanhealthaid.org">pm@jordanhealthaid.org</a> 0775006015
	<b>M.D.</b> Dr. Tareq Yaseen	<a href="mailto:MD@jordanhealthaid.org">MD@jordanhealthaid.org</a> 0775006031
IMC	<b>Health Care Program Director</b> Lina Al-Hadid	<a href="mailto:lhaidid@InternationalMedicalCorps.org">lhaidid@InternationalMedicalCorps.org</a> 0796200099
Aman Association	<b>President</b> Nuha Al Majali	0777864666
	<b>Program Manager</b>	<a href="mailto:ssmirat@plannet.ca">ssmirat@plannet.ca</a>

	Samira Smirat	0795661088
Movement for Peace (MPDL)	<b>Head of Mission</b> Elena Vicario	<a href="mailto:Jordania@mpdl.org">Jordania@mpdl.org</a> 0795253407
Relief International	<b>Global Emergency Response Director</b> Mary Ana McGlasson	<a href="mailto:maryana.mcglasson@ri.org">maryana.mcglasson@ri.org</a> 0796407929
IOM	<b>Public Health Coordinator</b> Hiba Abaza	<a href="mailto:habaza@iom.int">habaza@iom.int</a> 0796246085
OCHA	<b>HAO</b> Asa Hyden	<a href="mailto:hyden@un.org">hyden@un.org</a> 0795401576
ICMC	<b>Program Manager</b> Giorgio H. Neidhatst	<a href="mailto:neidhatst@icmc.net">neidhatst@icmc.net</a> +39 3489533715
IOCC	<b>P.C.</b> Saad Gedeon	<a href="mailto:ssgedeon@gmail.com">ssgedeon@gmail.com</a> 0796401483
	<b>Program Manager</b> Felomain Nassar	<a href="mailto:fbatshone@iocc.org">fbatshone@iocc.org</a> 0796784256
MFH	<b>Moroccan Government</b> Dr. Jalal Kasouati	<a href="mailto:Jalalkasouati@yahoo.fr">Jalalkasouati@yahoo.fr</a> 0775769636
Iraqi Attaché Iraq Health Office	<b>Physician</b> Abdul Wahab Abbas	<a href="mailto:Iraqihealthoffice@yahoo.com">Iraqihealthoffice@yahoo.com</a> 0777333277
	<b>Physician</b> Ahmad A.R Rashid	<a href="mailto:Iraqihealthoffice@yahoo.com">Iraqihealthoffice@yahoo.com</a>
WFP	<b>Nutrition Consultant</b> Shannon Patty	<a href="mailto:Shannon.patty@wfp.org">Shannon.patty@wfp.org</a> 0798890760

#### Agenda:

1. UNHCR briefing (Za'tari camp and host community)
2. Nutrition update (UNICEF, UNHCR)
3. Partners update (Syrians and Iraqis programs) / 3min.max.each
4. Sector contingency plan
5. RRP
6. AOB

#### **UNHCR briefing**

Za'atri camp population now approximately 29,000 people; until receiving were 700 per night but this last ten days the numbers have slowed to 400 per night.

- Health Information system is in place but not all partners reporting yet. This is focussing in morbidity and mortality; other components including RH will be added soon. Morbidity data shows that there is a reasonably high rate of diarrhoea including in over fives accounting for 8% of the total consultations. Diabetes accounts for 8% of chronic health conditions. 25% of overall consultations are due to chronic health conditions. No reported deaths in the month of October and no diseases of outbreak potential.

- New arrivals health screening has been strengthened with more JHAS staff at the reception area and new arrivals screening protocols is being drafted focussing on detection of acute health conditions, chronic diseases requiring early medical care and measles vaccination. French update.
- Convalescent network has been out in place to provide support to those requiring nursing care under medical supervision using the Moroccan and French hospitals this will be piloted for the next month to see if meets needs.
- Referrals- issue with number of referrals with 515 referrals outside the camp in the month of October . Referral guidelines have been tightened and draft referral protocols will be discussed next week with all health agencies.
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- Briefing on host community: to be provided by Ibraheem

#### **Nutrition Update (UNICEF and UNHCR)**

- Nutrition assessment data collection is done; analysis will be done by end of November and is to be shared.
- IMC is organising a 5 days training on nutrition to take place in December.
- Finalised guidance on the use of breast milk substitutes which includes SOPs on management of unsolicited donations of infant formula and other milk products. This will be presented to the Health Coordination meeting at Za'atri on Monday, then the camp committee meeting as well as with other meetings with other actors in the camp. It would be very useful if these guidelines could be supported by a letter from the MoH

#### **Partners Updates**

##### **JHAS:**

- Continues to provide primary, secondary, and tertiary health services to all persons of concern,
- Services are provided to Iraqis in Amman, and to Syrians in Irbid, Ramtha, Mafraq, and Amman,
- Services are also provided to all other nationalities,

##### **Iraqis:**

- The main provider of services to Iraqis is Al Madina Clinic with a load of 70% in which the majority suffers from chronic diseases and the number of Iraqis requesting chronic diseases is increasing.

##### **Syrians:**

- Ramtha Clinic:

- Number of cases seen has doubled since October (compared with June) due to lack of services in Ramtha Governmental Hospital,
- Mafraq Clinic:
  - No remarkable increase in numbers noted
- Za'tari Camp:
  - The number of cases seen and services provided is increasing (under primary services),
  - Received 3 new ambulances; 1 for Za'tari cases, 1 for Dhlail, and 1 for border cases. The problem of duplicate services in the camp remains the same
  - An agreement is signed with JUH to send an ambulance to pick up cases from Za'tari camp,
  - An agreement is signed with Dhlail Hospital to cover dialysis for renal cases at a competitive price as a life-saving measure,
    - Clarification from UNHCR: renal dialysis services are provided to Syrians cases inside the camp only; no cases are covered outside the camp as these are covered through government services
- Main health gaps for Syrians include thalassemia, especially for the non-registered cases who do not have access to governmental facilities
- RRP 4<sup>th</sup> revision is now taking place and will be shared with partners to provide a description of services provided and covered among partners.

#### **CVT:**

- Have a mobile unit that works in Zarqa and Rusaifeh, soon will have one in Mafraq to provide physiotherapy and psychosocial counselling
- Will start providing physiotherapy in the near future,
- Work in coordination and collaboration with HI and MSF France
- Aim at increasing knowledge of target population to maximize referrals; this includes torture survivors and brain injuries for Syrians and Iraqis (victims of war trauma)

#### **Aman Association:**

- In cooperation with UNFPA, Aman provided services through 2 static clinics to all nationalities
- Cases are referred to MoH when the services are not available
- Beneficiaries pay affordable fees,
- Other services are also provided through free open medical days (15-17 Oct. in Aqaba, Ramtha, and Disi areas; in another activity 70 pregnant women were referred to Princess Haya Hospital),
- Planning 2 workshops targeting women from different age groups tackling reproductive and general health issues.

#### **IOCC:**

- Directly involved in health program in cooperation and coordination with UNHCR, WHO, and JHAS, through providing Lice treatment,

- Provide awareness sessions to families and school teachers through JHAS on lice treatment and usage of lice medications,
- Distributed an Anti-lice spray through JHAS Clinic.

**OCHA:**

- Received a new donation in response to Syria RRP,
- Requested NGOs to submit proposal to OCHA on life saving cases,
- An amount of almost 17 million dollars are specified for the region including Syria.

**IOM:**

- 14 cases were identified in TB screening, 1 case escaped from the camp and contact has been lost,
- First health screening takes place upon arrival after crossing the borders. Cases suspected to have TB are referred to JHAS for further assessment and treatment,
- Total number of TB cases reported by the national TB program is 26, among which are the 14 cases mentioned above.

**French Hospital:**

- Provide vaccination,
- Work in cooperation with UNICEF.

**UPP:**

- Have 3 primary health clinics in Amman, Iraqis are mainly served in Amman, but their services are open to all nationalities,
- Providing health awareness sessions to women on different health issues,
- Communicating with refugees through a radio program (Yarmouk University Radio Channel) that is concerned with primary, secondary, and tertiary health services, reproductive health, and nutrition.

**ICMC:**

- Continue providing primary and secondary health services.

**MEDAIR:**

- Addressing acute malnutrition outside the camp with collaboration of JHAS.

**IMC:**

- Continue providing primary health care services to Iraqis and Syrians,
- Operate in 7 static clinics and have one MMU (for Iraqis),
- Have an agreement with MoH with regards to mental health,
- Outreach activities continue to cover Amman and Zarqa.

**UNFPA:**

- Have a static clinic in Ramtha, shared with JHAS,
- Have 4 static clinic supported by UNFPA,
- 2 mobile clinics, 1 for north and 1 for south,

- Have 1 supported clinic in KAP, 1 in Cyber City, and 1 in Za'tari,
- Providing post-delivery services and awareness,
- Provided 10,000 reproductive health services all over Jordan, of which 2440 inside Za'tari (1,050 antenatal),
- Will provide training to all service providers on clinical management of rape.

**WFP:**

- Provide general food distribution,
- Will be conducting a nutrition assessment in order to determine nutrition and health needs for the coming year.

**UNICEF:**

- Continues providing vaccinations for polio and measles,
- Will start a new measles and polio campaign in Zarqa and Mafraq at the end of November for Syrian and Jordanian children,
- Work in collaboration with Save the Children

**Moroccan Field Hospital (MFH):**

- Provide free of charge services,
- Have 100 staff, 25 specialists, and capacity of 60 beds
- Equipped with Ultrasound, and X-Ray and laboratory devices
- Since opening in August, the hospital provided 52,000 consultations, 83 services, 152 surgeries, and 46 deliveries, of which 20 were C-section performed at the Moroccan hospital

**IRD:**

- Health program started in September,
- Support / operate in 16 health centres in Zarqa and Amman,
- Have volunteers who visit Iraqi families and provide awareness about the supported clinics,
- Work in cooperation with MoH in providing awareness sessions on communicable diseases and reproductive health,
- Also provide awareness on violence issues,
- Participated in the breast cancer campaign,
- In collaboration with MoH, mammogram is offered free of charge at MoH clinics and KHCC. Iraqis holding UNHCR certificate have access for free mammogram at Italian hospital.

**RI (Relief Inte'l):**

- Working in WASH sector and providing hygiene awareness,
- Planning a media campaign and participating in a hygiene promotion,
- Completed a 'KAP' survey in Za'tari that included health messages; final report will be ready by end of November,
- Have focus group discussion to collect preliminary data inside the camp,

- Have a hygiene promotion sub-group to harmonise distribution and dissemination of hygiene kits and messages.
- The report of the survey about sanitation in Za'tari will be ready by the end of the coming week,
- Will be conducting media campaigns in which they can deliver messages about conserving water,
- Distributing hygiene kits (normalized kits) through hygiene promotion sub-groups.

**WHO:**

- No funds received yet for Syrians,
- Iraqi project extended till August 2013 and new funds received to provide tertiary services,
- Procured some medications for chronic diseases, anti-venoms, and intestinal parasites,
- Training MoH staff on rapid response and managing health risks

**Regional response plan**

Email went out yesterday from UNHCR for inputs from health partners for updating achievements and completing the necessary revision of the Regional Response Plan (RRP) for the period Jan - June 2013. The revision process has to be finalized at the country level by Friday 30 November. Please send all input by the 26<sup>th</sup> November UNHCR shares internally by Wednesday 28 November and final draft soon after.

**Date of next meeting:**

TBD

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