

Bekaa Health Coordination Meeting			
Date	23 July 2020	Time	11:00-12:30
Location	UNHCR Zahle premises- through Webex	Duration	1 h 30 min
Chair	Mona Kiwan		
Attendance	Attendance sheet shared with the minutes		

1.0	COVID 19	ACTION	DUE DATE
1.1	<p>Situation Update</p> <ul style="list-style-type: none"> -50 SYR Refugees tested positive- all living Urban setting. -Informal settlements free of Covid-19 -2 mortality cases among refugees (One passed away after discharge from the hospital and one during hospitalization) <p>Rapid Response Teams: Health partners distribution</p> <ul style="list-style-type: none"> -IMC recruited a team composed of 2 medical advisors and 2 health staff to respond to the RRT health teams -Magna has an extra mobile team ready to respond to the RRT. They may expand to another team -Link to update the RRT: https://docs.google.com/spreadsheets/d/1fj1jW4QXQUkYZiKbb8A_q7GjplhKKm2FPug9Z9yOArg/edit?usp=sharing <p>Level 3 isolation: Health partners involved updates, PPE supply chain</p> <ul style="list-style-type: none"> -Majdel Anjar L3 building is ready and supported by RI- RI preparing the equipment -Pending approval from government with reference to MOSA building in Aarsal -IMC procured enough PPEs till the end of December to be used at their supported clinics and to frontliners. 	IMC and Magna to update the RRT	23 July 2020

<p>-MTI is trying to procure PPE for Level 3 Isolation in coordination with MEDAIR. -Humedica procuring PPE including FFP2 Masks from Germany. -Most partners ready with PPE for Isolation Level 3</p> <p>Hospitals preparedness for COVID 19: testing and hospitalization -COVID 19 unit at Baalbeck Gov Hospital supported by UNHCR inaugurated by the Minister of Health. - MSF Bar Elias will be ready to convert the hospital in 2 weeks to a Covid-19 hospital when needed.</p> <p>Community Health Volunteers engagement in COVID 19: role in prevention & preparedness and response -RI recruiting 38 CHVs under UNHCR fund and 20 CHVs under other donors for prevention and response and will support in surveillance system for Covid-19 and for awareness raising (38) -MTI CHVs resumed door to door interventions. They are sending reminder messages about prevention and action needed in case of symptoms. MTI integrated Mental health topics with Covid-19 and vaccination. 30 senior refugee CH volunteers have thermometers and can refer to MoPH call center when needed. -IMC CHV resumed field visits since June 1st and providing beneficiaries engaged in the activities with PPEs and hand sanitizers, they are spreading Covid-19 awareness as well remotely via WhatsApp calls. Face to face sessions conducted at PHCs supported by IMC. They are distributing IPK at ISs, collective shelters and houses. -MdM volunteers raising awareness sessions on Covid-19 and focusing on mental Health related topics (coping with stress and anxiety) Door to door visits resumed. -RI Finalized Covid-19 awareness sessions. Total of 266 beneficiaries reached, 118 disinfection kits released for households, activities pertaining to health awareness sessions in the Bekaa finalized.</p>	<p>Community health working group meeting arrangement between MTI and IMC</p> <p>Health Partners to update the IPK distribution on 123 Survey</p>	<p>After Adha Holiday</p>
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	<p>MH interventions for COVID 19</p> <ul style="list-style-type: none"> -MDM confirming that their team members are still doing phone therapy sessions -Check the NMHP web page for specific messages on MH in COVID 19 context (e.g., how to deal with stress in quarantine) <p>Gaps and needs</p> <p>Challenges in admission to mental health hospitals especially Le Croix Hospital within Covid-19 situation</p> <p>Others:</p> <ul style="list-style-type: none"> -RCCE strategic action plan ready and activities started in Hadath Baalbeck -It was agreed that Health partners responding to RRT will be invited to the lessons learnt exercise 	Share WHO brochures on Mental	
2.0	<p>Health Partners' programs updates</p> <p>Challenges in implementation related to COVID 19 in PHCCs, MMUs</p> <p>Access to vaccination, SRH, chronic medicines, and other programs</p>	ACTION	DUE DATE
2.1	<ul style="list-style-type: none"> -IMC continuing with supported PHCs, also willing in August to extend 2 additional clinics or PHCs in Qabelias/ Baalbeck.,. Aali El Nahri clinic is stopped- contract terminated and assessed another one at Aali El Nahri, pending senior management approval. IMC have the ability to support another PHC. They experience increase in the number of beneficiaries in PHCCs. -Partners reported shortage in chronic medicine (around 60% of the type of medicine) -WHO: 40% shortage in chronic medication in warehouses, they are facing shipment delays to Lebanon yet following up closely with ministry to facilitate upcoming shipments. New orders shortages are not expected as of end of July 2020. Process of receiving medical items still ongoing to compensate for the shortage. -URDA as of end of May they stopped the blood diseases project, they also reached ceiling for dialysis project. 	<p>Suggestion for IMC to support a PHC in Bekaa area</p> <p>Health partners to share names of centers and types of missing items with WHO</p>	<p>July 2020</p> <p>July 2020 and regularly</p>

	<p>-RI started supporting Aarsal municipality centre since May 15; they shifted support from Amal Medical centre. Access increased in both PHCs since June.</p> <p>-MDM still supporting Qaa PHC and MMU and they are recruiting outreach volunteers in Qaa.</p> <p>-Humedica project will terminate by end of October and they drafting new project proposal by August: services will stay the same but they are planning to change MMU outreach and have it focused on outbreak control. Humedica added Mekse PHC to portfolio and planning to invest in this dispensary.</p> <p>-MSF-ch: MCC only operational now in Aarsal. Delayed plan to stop the clinics support in Majdal Anjar and Baalbeck to October.</p> <p>-MSF-fr: they have challenges in securing blood to their children patients under Thalassemia program.</p> <p>-SAMS ended the project for covering patient sharing costs for cases admitted and referred by UNHCR.</p>	<p>Please coordinate with Mrs Gharam Harb for blood donation</p>	
3.0	Referral Care program- challenges	ACTION	DUE DATE
3.1	<p>-Revised scheme starting August 2020 until the end of the year. Patients only have to pay maximum \$350 not \$800 and coverage will start at \$50 not \$100</p> <p>-Women who are not registered/ recorded cannot benefit from secondary health care program for delivery as of August first 2020.</p> <p>-Official exchange rate at hospital will remain at 1500LBP</p>		