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| **Bekaa Health Coordination Meeting** |
| **Date**  | 28 August 2020 | **Time**  | 11:00-13:00 |
| **Location**  | UNHCR Zahle premises- through Webex  | **Duration**  |  |
| **Chair** | Mona Kiwan-UNHCR |  |  |
| **Attendance** |   |

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| **1.0** | **Covid 19** | **ACTION** | **DUE DATE** |
| 1.1 | **Situation Update*** As of August the 27th, 81 POCs affected with C-19- and 3 related mortalities (cumulative data starting Feb 21st).
* Few Residents of 2 ISs in the Bekaa were affected with COVID 19 and RRT were deployed there.
* Fewer cases were in need for hospital admission, the majority so far were asymptomatic.

**Rapid Response Team: Health Partners Distribution**-UNHCR requests that RRT health team to revisit the distribution and to include on the RRT Matrix the contact details of their staff who will be responding on the onset of C-19 in the ISs so they will be directly alerted by the team leader.-Organizations to update whether they can expand the coverage.-Agencies participating in the RRT reported not having a specific lodgement allocated for the staff who will be responding in the field. If any of the team members is suspected or were in contact with case they will work from home until tested negative.**Level 3 Isolation: Health Partners Update****-**Nusroto has equipped 10 rooms in the first floor for C-19 response **Hospital Preparedness for Covid-19: testing and hospitalization****-** MSF-Belgium started shifting Bar Elias hospital to a COVID 19 hospital with 20 beds including 15 (ICU1-patients in need for O2 therapy and not under mechanical ventilation) and 5 (ICU 2-3). They started training and recruitment of staff. They will only receive patients in need of admission and not for isolation. The beneficiaries will be from all nationalities, and treatment free of charge. Should there be a need to increase capacity, MSF would observe that. -The phase1 at Baalbeck Gvt Hospital is about to be finalized- the 5 ICU beds should be ready by the end of the next week. Therefore the total number of ICU beds would be 12 at that stage.- Work for C-19 unit has not started yet at Zahle Gvt Hospital pending agreement signature; The phase 1 includes 64 beds and 10 ICUs**Community Health Volunteers engagement in Covid-19: role in prevention and preparedness and response*** In order to better map the Health OVs/CHVs, a survey is set on KoBo which should be submitted by each organization inputs per Cadaster:

[https://ee.humanitarianresponse.info/x/6rNfgqBR](https://eur02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fee.humanitarianresponse.info%2Fx%2F6rNfgqBR&data=02%7C01%7CKIWANM%40unhcr.org%7Cedf7f9a3bae64912f9d608d84d999dc8%7Ce5c37981666441348a0c6543d2af80be%7C0%7C0%7C637344669461727829&sdata=XnqLSzwOiz5rhV3nPm0c%2Bk4aJPxsQD67yAVnSDcfISs%3D&reserved=0)if the focal point has any question please refer to Mona Sabra msabra@internationalmedicalcorps.org or Samira youssef syoussef@medicalteams.org Suggested training to build the Health OVs/CHVs capacity:* Guidelines for self-isolation (Dos and Don’ts)
* Level 1 isolation requirements
* Proper use of PPE and disposal

-Suggestion: creating a unified forms for tracing questionnaire and Level 1 isolation to ensure that the case is being isolated appropriately   **MH Intervention for Covid-19*** RI have psychologist and physiatrist designated for Covid 19 response
* IMC can support in MH intervention for case referral
* MDM have capacity to receive cases for MH intervention/ can provide remote support
* MSF is providing MH services in Aarsal, El Hermel and MaQ.
* Humedica intending to scale up the MH component in Central Bekaa

**Gaps and needs*** Capacity of RRT to follow on different sites in the same time, and the need for an organization to respond in two sites at same time-
* The actual hospitals capacity to respond in case of rise of cases especially after the Beirut Blast
* Lack in ICU beds
* False information circulation on media
* Lack of awareness and underestimation of C-19
* Testing gap and experiencing delays from MoPH for results receipt
 | Nusroto will share more details about their response capacity with PHUMSF will share the exact starting date but mainly it will be September the 7thKoBo Survey to be kindly filled MTI, IMC, and UNHCR will coordinate the training plan with the proper agencies.RI will recruit a social worker for MH intervention for C-19 | By Next Weekby Sep the 16thASAP  |
| **2.0** | **Health Partners’ programs updates** | **ACTION** | **DUE DATE** |
| 2.1 | * MdM faced distribution challenges in MAQ as it was stopped by GSO although they explained how the MMU operates and elaborated on their measures- they had even informed authorities beforehand as well.
* IMC were unable to support new clinics due to Beirut Blast, they are facing challenges contracting a new clinic. IMC will support Baalbeck and Qabelias PHC

 beginning of September |   |  |
| 2.2 | **Access to vaccination, SRH, chronic medicines and other programs** * Humedica will support with eyeglasses in coordination with IMC
* MALTA distributing soap and masks and running agriculture initiatives for vulnerable communities by distributing seeds
* RI reported shortage of PVC vaccines and chronic medicine in Arsal PHCC
* IMC reported 7% shortage in chronic medicines in their supported Health Centers.
* Michel Daher Foundation reported as well shortage in chronic medicines and limited number of acute medicine received by MoPH at their supported centers.
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| **3.0** | **Referral Care program** | **ACTION** | **DUE DATE** |
| 3.1 | Zahle Governmental Hospital will no longer accept refugees. Separate agreement however will exist for Covid-19.  | UNHCR observing need to add an alternate hospital.  |  |