

## MINUTES OF MEETING

<b>Title</b>	<b>Community Health Task Group (CHTG), Third meeting.</b>		
<b>Date</b>	19 <sup>th</sup> February 2014	<b>Place</b>	JRCS HQ, Jordan
<b>Chair Minutes</b>	Nassima Check-Abdoula, Country representative, FRC Ola Sharif, Community-Health manager, IMC		
<b>Attended</b>	Heba Seder , Nutrition supervisor, <b>Medair</b> Mashal Al-Hadid, Projects Coordinator, <b>Jordan Red Crescent</b> Pranav Shetty, Medical Coordinator, <b>IMC</b> Dr. Nada Al Ward, Public Health Coordinator, <b>IMC</b> Ola Sharif, Community-Health manager, <b>IMC</b> Nassima Check-Abdoula, Country representative, <b>French Red Cross</b> Hiba Hayek, Snr Public Health Asst, <b>UNHCR</b> Christina Duschl, Relief Delegate, <b>German Red Cross</b> Jacinta Hurst, Health Delegate, <b>IFRC</b>	Muna Hamzah, Health Project Manager, <b>IRD</b> Mousa Al Jawaseh, Outreach Officer, <b>Jordan Health Aid Society</b> Ritsuko Arisawa, Project Formulation Advisor, <b>JICA</b> Shereen Abu Hweij, Program Officer, <b>JICA</b> Tokiko Sato, Senior Advisor, <b>JICA</b> Chahl Taleb, Field Assistant, <b>JICA</b> Christine Mikl, Health & Hygiene Coord, <b>Operation Mercy</b> Marie Vicart, Health Evaluator, <b>PU-AMI</b>	

ITEM	POINTS	ACTION
<b>Welcome</b>	<ul style="list-style-type: none"> <li>• Introduction and welcome</li> <li>• One amendment to the minutes of the last meeting: no matrix exists at UNHCR level recording all IEC material developed by agencies on different topics.</li> <li>• Other than the above mentioned, previous minutes accepted as a true copy of the meeting.</li> </ul>	<ul style="list-style-type: none"> <li>• UNHCR to develop a matrix to be shared in the course of the coming week for agencies to fill in regarding existing IEC material in relation to the activity taking place.</li> </ul>
<b>Matters arising from minutes</b>	Community Health Strategy has been shared and feedback provided.	<ul style="list-style-type: none"> <li>• Nassima (FRC) to send the last draft of Community Health Strategy and communicate to all for feedback.</li> </ul>

<p><b>Revising Job description – community health volunteer (CHV)</b></p>	<p>The aim is to have a standardised JD that describes roles and responsibilities and standardised incentive/allowance/stipend so as not to create competition and ensure accountability from the volunteer and the organisation hiring the volunteers.</p> <p>Agencies had submitted JDs from their existing outreach programs. JDs were reviewed and consolidated into one document shared by IMC at the meeting. The document listed 7 main areas of Specific activities/ responsibilities, with basic responsibilities under each area listed. The format allows each organization to adapt its package to the proposed JD. Final version presented to the group and revised as follows:</p> <ul style="list-style-type: none"> <li>• To use the term Community Health Volunteer (CHV), rather than Community Health Worker (CHW).</li> <li>• Document worked in a way with main titles and description to allow flexibility per agency to adapt to its existing programs.</li> <li>• Have the wording for list of Activities/ Responsibilities done in one style as per areas of intervention and to be put in an annex</li> <li>• Liaise with WASH sector for understanding their activities under “Hygiene promotion” to better reflect the responsibility under Health Promotion area.</li> <li>• Liaise with JRCS to propose basic activities to better reflect “provide first aid” under Community Based Services responsibilities.</li> <li>• Remove “conduct distributions” responsibility under Community-based services area as not to bias CHV and beneficiary relationship.</li> <li>• Under prerequisites paragraph: <ul style="list-style-type: none"> <li>○ Merge middle 2 bullets to reflect availability during emergency situations being in the same community they will work in.</li> <li>○ Add a prerequisite about willingness to participate in trainings.</li> <li>○ Add a prerequisite about ability to communicate with and organize groups of individuals.</li> </ul> </li> <li>• Under Incentives paragraph: <ul style="list-style-type: none"> <li>○ This should specify working limits to 4 hours a day on 5 days a week so as not to skip Ministry of Labour policies towards volunteers, as volunteers are not expected to work more than 48</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• IMC to consolidate all the information discussed and resend the JD during the course of the coming week to receive comments.</li> <li>• Medair provided a hard copy of suggestions to the JD that is to be sent as a soft copy to incorporate by IMC.</li>   <li>• UNHCR to confirm with WASH sector and see what is already being distributed.</li> </ul>
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	<p>hours a week, or in other words not more than 16 days a month.</p> <ul style="list-style-type: none"> <li>○ It has been agreed that the best method to engage volunteers in different programs and request specific deliverables is through providing them with TORs and a verbal agreement.</li> <li>○ Other agencies (ie JRCS) mentioned that they would also provide them with a T-shirt and a badge upon which they sign document holding them responsible not to abuse the emblem of the agency, and upon which they are withdrawn in case volunteer decides to drop-out from the program.</li> </ul>	
<b>IEC material</b>	<ul style="list-style-type: none"> <li>• IEC materials on NCDs (blood pressure, diabetes, obesity, physical activities) had been shared by IMC. These materials are attached to community awareness activities as well as healthy lifestyles program.</li> <li>• JICA shares IEC material on family planning targeting and adapted to Jordanian villages.</li> <li>• Nutrition IEC material shared by Medair (breastfeeding, nutrition of the child)</li> </ul>	<ul style="list-style-type: none"> <li>• All IEC to be inserted within matrix to be proposed and forwarded to group by UNHCR, in relation to the activity this material is supporting. On finishing the matrix with all the information, sub working groups shall be created for revising material.</li> </ul>
<b>AOB</b>	<ul style="list-style-type: none"> <li>• TORs for community health task group (CHTG) to be shared with UNHCR, and then forwarded to the group.</li> <li>• Looking for MoH participation at the coming meetings.</li> <li>• Ensured that a representative from CHTG is present at the NCD task group so that both groups work in harmony.</li> </ul>	<ul style="list-style-type: none"> <li>• FRC to forward to UNHCR.</li> <li>• UNHCR to liaise with MoH</li> <li>• All</li> </ul>
<b>Next meeting</b>	<p>Next meeting the <b>19<sup>th</sup> March, 11 am</b> at JRCS  For planning purpose, we propose to have the CHTG meeting each 3<sup>rd</sup> Wednesday of the month.</p>	