



UNHCR

United Nations High Commissioner for Refugees
Haut Commissariat des Nations Unies pour les réfugiés

Irbid Operational Coordination Meeting
5 March 2015, 10:30 a.m.

Activity Info

Briefing on the services mapping- cleaning the information – involvement of a small team of caseworkers (ICRC-NRC-UNHCR-CARE) to work and clear the information available. Will call partners to make sure that the information is accurate. Development of a service guide for Irbid governorate.

Election of New Co-Chair

Following NRC's 6-month term, a new co-chair, CARE, was elected. 13 organisations voted; NRC received 3 votes, CARE received 10 votes.

Operational updates:

- CARE: 140 cards 130JD emergency cash for urgent medical care- referrals from JHAS, all cases are added on RAIS.
- NRC: shelter program 2 new properties completed in ajloun. Business as usual. NRC prepared a Template of lease agreement. NRC contacted an analysis of the template available in bookstores. NRC prepared a template available receives referrals to advice.
- UNHCR Health- Dina referral coordination meeting to start between NGOS working in health covering Ramtha Irbid Ajloun and Jerash- contact details
- ICMC: receives referrals for unconditional cash – cash for rent and NFI
- MSF new doctors for Ramtha
- JWU: primary health care and , legal advisor and protection, 2 projects one with UNICEF working with children- summer camps Jordanian and Syrians, legal –protection 10 branches in different areas and centers in the Palestinian camps, legal – social and psychological support, domestic violence and trafficking. Child friendly spaces for Syrian and Jordanian kids. Psychosocial support, awareness campaigns on early marriage
- JRS: community learning center, outreach needs assessment assistance
- HI: Ramtha same activities in the MSF – Holland difficulties to move, hear, understand, see. Presence of physiotherapist and social worker, referrals for all nationalities. Income must be lower than 500 JD.
- NHF: clinical management of rape start 15th of March -19th march. 2 clinics in Jerash and Ajloun reproductive health, GBV, youth, health campaign on GBV and reproductive health, two campaigns in Ajloun clinic. Waiting for the approval of the ministry to start the clinic in KAP awareness and counselling on reproductive health.
- IRC: community health – mobile clinics serving Jordanians and Syrians, anti-natal care-reproductive. Moves from one village to another serving most vulnerable, home visits to identify these cases, next week will start covering Irbid.
- IRD: 25 com building activities 1100 beneficiaries covered 30% Jordanians, irbid activities for Iraqi ref, wash projects completed.
- UNHCR protection: all organisations should send their case workers/case managers. 23 meeting since started- work plan will be shared. Referral coordination – referral focal points, case workers case managers, join trainings UNHCR training on protection, services are not

duplicated, share best practices. This meeting is different than the Inter-agency coordination meeting and serves a purpose very specific to referrals.

WFP Targeting

- WFP's plan for 2015 was to cover 85% of refugees living in host communities with 20 JOD per person. However, during the first two months of 2015, WFP had only 70 % of the necessary funding; for this reason, they distributed 13 JOD to those not cut. Given decreases in funding, WFP will never be able to return to providing 20 JOD per month per individual in urban settings. In an effort to prioritize the most vulnerable, the plan is to go to a tiered plan in urban settings. Those identified as most vulnerable (28%) will receive the full 20 JOD, less vulnerable (47%) will receive 10 JOD, and the rest (10%) will be completely cut. They will be further targeted. WFP will inform the beneficiaries in March and the system will be in force before the next coordination meeting. Vulnerability will be decided according to VAF econometrics and inclusion criteria; those HHs with characteristics indicating high risk of food insecurity will be included. There will be an appeals process. Those HH cuts or assessed to receive half will be informed a few days after the March upload and will have until the end of April (about 6 weeks) to appeal. After that WFP will consider on a case-by-case basis whether to receive appeals. In reviewing appeals, WFP will prioritize those HHs who have been completely cut. WFP will look into the case size, not the HH, if more than one case lives together. Partners should not encourage people to appeal through hotlines; it is better for POCs to physically approach the helpdesks. If agencies with community centers are interested to receive someone from WFP to train staff etc., they should contact Amber Savage and Nicole Carn of WFP. Suggestion to have someone from WFP to the referral coordination meeting.
- Phone available for those who want to inform WFP that they don't need assistance anymore and would like to be cut from the distribution lists. People who don't come to receive their cards are also cut from the list.
- Assistance in camps remains the same.

Urban Verification process:

- Information on the process to be shared:
- No bailout document is required
- The original documents need to be submitted- if there are any concerns re. the document to be addressed to UNHCR
- Lease agreement and Copy of ID of landlord
- Health Certificate: those who did it before they can go and take a copy from the health centers
- Those with fake documents-need to be referred to UNHCR
- UNHCR Certificate and their own documents should match
- Those with no documents should also come to UNHCR to liaise with authorities.
- Panel will assess each case with no documents
- Those who left after the 14th of July and they don't have a UNHCR certificate they need to go back to the camp. Those whose documents have been confiscated by the authorities need to come to UNHCR in order to request their documents they will be registered on a list being identified and informed where to go to receive their documents.
- People coming from other governorates to the UNHCR registration irbid should wait until the process starts in their governorates.
- Bilateral channel on referring /reporting inconsistencies.
- Refugees with issues related to documents needs to be referred to UNHCR to be cleared before going to the police station.

- Health Certificate: costs 30 JDs per individual above the age of 12 years old. We try to advocate with the authorities to retrieve this certificate but sadly this is not the case yet. List of centers that produce these certificates. Some centers require passport. Mol needs to give clear instructions from the MoH to accept any identification document. There is no legal implication to asking for those certificates.

PSEA (Protection from Sexual Exploitation and Abuse)

Serin PSEA focal point: Jerash- Irbid- Ajloun

PSEA concept integrated in humanitarian activities.

Cases received by FOI have been handled with related departments.

If cases are identified or you have any information, confidentiality should be ensured and reported to either management or UNHCR.