**Date**: Thursday 29th August

**Venue: EMOPS UNCHR**

**Time**: 10:00 – 12:00

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| 1. **Introduction/ Agenda** |
| 1. Review of last meeting action point |
| 1. Jordan Response Plan (JRP 2020/2022) update |
| 1. Health Agencies Update |
| 1. Sub-sector working groups – Reproductive Health (UNFPA), Mental Health (IMC/ WHO), Nutrition (Save the Children Jordan/UNICEF) / Community Health Platform (MEDAIR) |
| 6. Proposed Assessment/Research |
| 7. AOB  AOB |

**National Health Coordination Meeting** 

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| **2. Review of action points of previous meeting** | |
|  | **Reviewing the agenda of the previous meeting:**   * Sector leads to follow- up and communicate issues regarding new license regulation for clinics with MOH. **Done** * Agencies to report to sector leads on issues /barriers regarding license of clinics. **None of the partners reported any.** * WHO new definition of Measles. WHO to share new update on measles status including case definition |
| **Action Points** | * WHO to share the update on new definition, measles status and any IEC materials. |

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| **3. Inter-Agency Coordination Unit nit update -** **Jordan Response Plan (JRP 2020/2022) update** | |
|  | The sector lead introduced Susanne Butscher the Senior Interagency Coordinator-Inter - Agency Coordination Unit.  Susanne has introduced the new Inter-Agency coordination Associate to the audience and provided a quick overview on the status of JRP:   * More briefing will be made after the MOPIC presentation they delivered in the HPF meeting. MOPIC considered most of the feedback came out of the discussion in the last week HPF meeting . * The three main components will be under the new JRP by MOPIC are:   + Resilience   + Refugees/ Humanitarian   + Budget support * The new definition of the resilience will not be exclusively infrastructure, but it will be cross cutting through all sectors. The same applies on the refugees it will be cross cutting in all sectors. AfterJuly31, 2019 there was a new suggestion on new distribution of the sectors. Some. of them will be potentially merged. Health sector will remain the same as a standalone sector. * Task forces will include representative from governorates, but this will not influence the decision-making process. * The second change is Host community component and refugee component and infrastructure/ Institutional Capacity building Component. For Za’tari that may doesn’t apply in that sense. Some project 100% refugee beneficiaries. * There is lack of data to move total into vulnerability approach UNHCR, UNICEF and Food Program are working on the VAF Assessment and to analyse the gaps. Partners are encouraged to share any Assessment documents that would be useful to provide data. * The ratio was 70 refugees verses 30 vulnerabilities in host communities is changes in the new JRP and there is flexibility in the ratio 51 more refugees, 49 host community. * To align the new JRP into the SDGs and Global refugees compact. MOPIC will discuss this with the sectors respective Ministries. * Any partners requested more breakdown to figure, they could write the sector lead who will follow-up with the partners on the planning and will call for a meeting * Q1. To share the time frame to prepare plans for 2020-2022 * Q2. Which SDGS will be focussed on and what is the time frame to share the MOPIC PPT . * Q3. What is the role of the word Bank. It would stay like an important donor. |
| **Action points:** | * More briefing will be made after the MOPIC presentation on JRP they delivered in the HPF meeting took place yesterdayAugust,28th,2019 * Susanne to share MOPC- PPT after endorsed by MOPIC * Partners encouraged to share any Assessment documents that would be useful to provide data * IACU to plan one day workshop on the new JRP, meanwhile the partner will move ahead with their planning for the next year. |

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| **4- Health Agencies Update**    **Situation update-UNHCR** | |
| **Iraqis Refugees**  **Yemeni Refugees**  **Sudanese Refugees**  **Somali Refugees**  **Others**  **Syrian Refugees**  **Berm Updates** | **Statistical Update as of 15th August, 2019**  Any partner needs further breakdowns to the figures they can address their request to the sector chair. All documents are available on the portal. The sector chair reminded the partners to update their FTS for the purpose of the upcoming HPF meeting with the donors.  Total registered: 67,7456. new registered 338.  14,693 Yemen, 476 registered in 2019  6.158 Sudanese, 337 registered in 2019  757 Somali, 10 registered in 2019  Total Registered: 658,447 Syrians  13,552 newly registered in 2019 of which 679 arrived in 2019. 76,724 in Zatari, 39,891 in Azraq and 6,541 in EJC  Number of refugees in Rukban camp is around 13,000 and it dramatically went down due to voluntary return. On average 100 patients access the clinic on daily bases.  Total of visits of patients since 15 Dec 2016 for consultation, management and treatment until the reporting date is 94,842 , while 15,623 in 2019  Total of cases admitted to Jordan since 15 Dec 2016 until the reporting date is 1983 patients.  An assessment mission is going on Rukban. this will be useful for partner who have regional office in Syria that they could support the returnees. |
| **Action points** | * Partners to update the FTS data Immediately |

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| **Health agencies update** | |
| **Activity Info**  **OCHA Funding**  **WHO** | Activity info to be updated for reporting purposes. Save the Children Jordan requested support on activity info, Any partners needs supports can approach UNHCR.  OCHA second round call for proposals was communicated with all partners to register on GSM system. Cochair recommended partners to share their priorities to be communicated with OCHA.   * WHO provided an update on the measles. There is a new measles cluster in the MOH.30 measles cases reported in a prison. where 3 days measles campaign conducted between the period August 22-24,2019. * Collaboration and discussion with partners is going on to implement national vaccination measles camping but this require big fund.   Recommendations:  - kids to be vaccinated and case definition to be introduced in all clinics.  - Increase awareness of all workers in the clinic on the measles symptoms. |
| **Action points:** | * partner to share their priorities to be communicated with OCHA for their second funding cycle * WHO to share any IEC materials available to be communicated with sector members. |

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| 1. **5 . Subsector working groups – Reproductive Health (UNFPA), Mental Health (IMC/ WHO), Nutrition (Save the Children Jordan/UNICEF), Community Health Platform (Medair/IRD)** | |
| **RH (UNFPA)**  **Medair**  **(CH platform)**  **Mental Health**  **Nutrition (Save the Children Jordan/IMCC)** | UNFPA RH officer is leaving for long time, no replacement detected yet    UNFPA had yesterday consultancy meeting on the SGBV and reproductive health strategy, they discussed the strategy components.  It planned to be launched next year.  UNFPA is collaborating with Higher population council on the RH strategy.  UNFPA completed mapping exercise on the SGBV and RH services in the south funded by the Italian cooperation. Endorsed all ICT material by MOH including RH, SGBV etc.. ICT material endorsed by MOH .  Measles activities is on hold. Currently they are doing mapping exercise to plan for their future activities  MHPSS had its monthly meeting at MoH with attendance of 21 agencies, discussed the helpline procedures and area of support especially suicide reporting, also discussed the preparation for the world mental health day and the Suicide prevention day this year, after the meeting we have shared links and messages in different language for material can be used for the messaging.  Integrating Nutrition into primary health care. Training activities IYCF will be conducted at the end of Sep. targeting 40 participants |
| **Action Points** | * UNFPA to share the Mapping services exercise report and present findings to Sector during next meeting * Save the Children to share the training invitation to be disseminated to all partners. * NGOs who need RH IEC material can place their request to RHWG directly. |

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| 1. **Health Agencies update** | |
| **IRC**  **SAMS**  **JPS’s** | IRC is closing their RH clinic in Irbid by mid of Sep.2019. Caritas clinic which is locate two minutes from IRC will support the vulnerable patient there as per the vulnerability criteria  Medical mission took place in July for one week 150 medical volunteers participated in the mission.2800 beneficiaries over all governorates including camps.900 PSS provided in Irbid and Amman.5000 health services provided for one thousand beneficiaries during July.   * JPS has ongoing project activities in support of secondary and tertiary referrals for Syrian refugee in camp settings for provision of Secondary and tertiary health care services including EOC with access to NNC and child care, lifesaving and medical care for the critically ill. * A total of 64 cases were supported in August from the camps, including 51 cases received from Zaatari RC , and 8 case received from Azraq RC of which 31 cases were CS, 12 NVD, 9 EOC, 9 NNC, 3 DC. * JPS has also ongoing activities in support of secondary and tertiary services for refugees in host communities in August, 2019, as follows: * A total of 684 cases were supported in June. Of the supported cases 442 were Syrian, and 242 cases were from other nationalities; Sudanese (101), Iraqis (83), Yemenis (45) and Somalis (8). Of which, 111 cases were provided with Investigation/Consultation services, and 573 cases were provided with treatment/Intervention services. |
| **Action Points** | * For any planned medical mission to provide the sector chair one-page fact sheet and they will share the information with partners. (HI and CDL) |

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| 1. **6. Proposed Assessments/Research** | |
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| **Action Points** | N/A |

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| 1. **7. AOB** | |
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| **Action Points** | **Next HSWG meeting will be on Sep.26 (WHO)** |