

National Health Coordination Meeting



Date: Thursday 31st May

Venue: UNHCR

Time: 10:00 – 12:00

Agenda:

1. Introductions
2. Review of last meeting action point
3. Situation Update
4. Knowledge transfer PPP / IRJ
5. Health Agencies Update
6. Subsector working groups – Reproductive Health (UNFPA), Mental Health (IMC/ WHO), Nutrition (Save the Children Jordan/UNICEF)
7. Proposed Assessment/Research
8. AOB

2. Review of action points of previous meeting

Reviewing the agenda of the previous meeting:

- ✓ Updates from UNFPA regarding the new MoH decision announcement (UNFPA): **(Subsector working group updates)**
- ✓ UNHCR to share MEDAIR presentation with all partners: **Done and available on UNHCR data portal**
- ✓ UNHCR to share the MEB presentation with all partners: **Done and available on UNHCR data portal**
- ✓ WHO to share the updated country action plan on MHPSS: **Done**
- ✓ UNHCR to send separate email for partners to give their feedback on MOPIC approval process: **Done and only two partners presented their feedback.**

Action Points

N/A

3. Situation update-UNHCR

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	<p>Statistical Update as of 15th May</p>
Iraqis Refugees	<ul style="list-style-type: none"> Total registered: 66,761 1216 registered in 2018
Yemeni Refugees	<ul style="list-style-type: none"> Total registered 11,366. Total registered in 2018 is 2000 and 651 arrived in 2018 (decreased trend)
Sudanese Refugees	<ul style="list-style-type: none"> 4,162 Sudanese registered with no significant increase, 165 registered in 2018 while 53 cases arrived in 2018
Somali Refugees	<ul style="list-style-type: none"> 818 Somali. Only 19 registered in 2018 while 9 arrived in 2018 with no significant increase
Others	<ul style="list-style-type: none"> 1,643 with 209 registered in 2018.
Syrian Refugees	<ul style="list-style-type: none"> Total Registered: 665,901 11,032 newly registered in 2018 of which 403 arrived in 2018. Approximately; 80,000 in Zaatari, 41,000 (amnesty exercise) in Azraq and 6,800 in EJC.
Urban Verification	<ul style="list-style-type: none"> A total of <u>452,901</u> cards were issued in different security centers. Of the total, there are <u>420,396</u> individuals registered with UNHCR, while there are <u>32,505</u> individuals who are not registered with UNHCR. A total of <u>200,404</u> Syrian Documents belong to <u>139,600</u> Individuals were delivered.
Amnesty campaign	<ul style="list-style-type: none"> Since 4th March commencement of the “amnesty”, a total of 13,723 individuals (4,432 families) have been successfully processed by UNHCR and issued asylum-seeker certificates, enabling them to approach local police stations to request their Ministry of Interior (MOI) service cards.

<p>JHF</p> <p>Berm</p>	<p>UN contingency planning discussions</p> <ul style="list-style-type: none"> ▪ UN agencies working with leading INGO to develop contingency plan for possible influx of thousands of refugees toward Jordan west borders, UNHCR met with a Jordanian Armed Forces commander to discuss the UN's contingency plans to respond to this mass influx of refugees. Updates to the contingency plans are ongoing in light of the possible deterioration of the situation in south-west Syria. <p>Inter-Agency Ambassadorial briefing on critical funding needs</p> <ul style="list-style-type: none"> ▪ In light of critical funding gaps, UNHCR and three other UN agencies (UNICEF, WFP, and UNFPA) organized an inter-agency briefing to an audience of 28 ambassadors to jointly convey the importance of quickly committing funds to allow for planning and strategizing to ensure that no essential services are impacted. <p>Jordan Humanitarian Fund JHF/OCHA</p> <ul style="list-style-type: none"> ▪ The March –April call was released, eight proposals were received from different national and international organizations, early May the SAG reviewed them and share recommendation with OCHA. ▪ OCHA board accepted three proposals, first proposal was for the renal dialysis project by QRC, the second proposal was the JPS project to support secondary health care for priority emergency obstetric and neonatal cases and the third project was the cash for health project by MEDAIR. ▪ Total number of consultations provided since the beginning of the joint clinic is 36000 consultations ▪ The number of cases accessed to the clinic is fluctuating with 170-200 patients a day being processed over last 4 weeks. ▪ Early May there was a decrease of the number of patient's access to the clinic due to the weather condition as UN convoy failed to reach the Rukban clinic. ▪ Around 12 cases are referred to Ruwashed hospital on weekly basis, sometimes the number reach to 18 cases and down to 7. ▪ One neonatal death was reported in May. ▪ The upper respiratory tract infection is the most common morbidity in term of acute condition. And the hypertension is the most prevalent disease among chronic disease.
	<p>✓ N/A</p>

4. Knowledge transfer PPP / IRJ

<p>Introduction:</p>	<ul style="list-style-type: none"> ✓ Islamic Relief Jordan is a country branch of Islamic Relief Worldwide. It was founded in 1984 in Birmingham, UK, in response to the devastating famine in the Horn of Africa. Since then, Islamic Relief has grown into a charity that is active worldwide, putting development projects, emergency aid, and rebuilding projects into action in over 28 countries around the world. ✓ IRJ has a main office in Amman, with field offices in Mafraq, Ramtha and a current team of 46 staff. <ul style="list-style-type: none"> ▪ Amman ▪ North (Mafraq, Ramtha, Jarash, Irbid, Ajloun, Madaba) ▪ South (Karak, Ma'an) ▪ ITS's (Ramtha, Mafraq and Madaba) and refugees camps such as (Baq'a, Gaza, Hussein, etc.). 								
<p>Funding & Beneficiaries</p>	<ul style="list-style-type: none"> ✓ Funding sources are from institutional donors such as WFP, DFID, DEC, OFID, AECID, BMZ as well as significant contributions from IR partners such as IR-USA, IR-UK, IR-Canada, IR-Switzerland, Middle East and Emerging Markets. ✓ In the last 5 years, IRJ have secured 72M GBP reaching 869,246 individuals. ✓ In regards to the current health project "Emergency health care service provision for Syrian refugees in Jordan" IRJ have secured funding for the coming three years (2018-2020). 								
<p>Sectors of interventions:</p>	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">1. Food Security</td> <td style="width: 50%;">5. Winterization</td> </tr> <tr> <td>2. Health</td> <td>6. Education</td> </tr> <tr> <td>3. Orphans and Child welfare</td> <td>7. Protection and PSS Support</td> </tr> <tr> <td>4. Shelter and NFI's</td> <td>8. Livelihoods</td> </tr> </table>	1. Food Security	5. Winterization	2. Health	6. Education	3. Orphans and Child welfare	7. Protection and PSS Support	4. Shelter and NFI's	8. Livelihoods
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<p>Health Approach:</p>	<p>Objective: Is to provide Syrian Refugees and less vulnerable Jordanian host communities with primary, secondary and tertiary healthcare. IRJ target community needs through intervention in 4 main component according to IRJ strategies:</p> <ul style="list-style-type: none"> ✓ Mobile clinic (primary health care) ✓ Awareness sessions and capacity building ✓ Surgery referrals support ✓ Hemodialysis patient (secondary and tertiary) 								
<p>Mobile clinic</p>	<ul style="list-style-type: none"> ✓ One mobile clinic in the North from previous phase through the last 8 months was able to reach 3,359 beneficiaries (2686 Syrian, 673 Jordanian) in Mafraq, Ramtha, Irbid and several ITSs. ✓ According to IRJ movement plan the mobile clinic now is performing in Irbid (Neaymeh) until the end of June and will be in Jarash as a next place to cover. ✓ New mobile clinic in the south is under preparation and expected to be ready and start performing by the end of June. 								
<p>Awareness sessions</p>	<ul style="list-style-type: none"> ✓ The project is working on spreading the awareness of common, communicable and non-communicable diseases in the community covering the following topics: First aid, winter disease, Asthma, DM, HTN, Cancer, breast cancer and hygiene. ✓ Age group and gender: above 18 y/o both male and female, Target: 1000 beneficiaries and health kits. 								

<p>Surgery referrals</p>	<ul style="list-style-type: none"> ✓ Since the beginning of phase 2 of the health project in Oct, 2017, IRJ conducted 24 awareness sessions in cooperation with more than 10 CBO's around the kingdom, targeting 892 (795 Syrian, 97 Jordanian beneficiaries) in Amman, Zarqa, Ramtha, Irbid, Mafraq and informal tented settlement. ✓ Delivered 855 health kits.
<p>Hemodialysis</p>	<ul style="list-style-type: none"> ✓ In total, 246 surgeries (131 of them are kids) were referred to contracted hospitals throughout the past 8 months of phase 2 project according to below: ✓ All eligible cases (according to IRJ surgery criteria) were referred to the contracted hospitals and provided with secondary and tertiary health care services after a deep study of the cases' medical reports. ✓ Referral for the cases covered the cost of operations, doctor fees, medications after surgeries, and the hospital residency fees.
<p>Achievement/ health program</p>	<ul style="list-style-type: none"> ✓ Up to date IRJ in phase 2 of the project has covered more than 960 hemodialysis session for 10 Syrian patient proving all needed care through referring them to contracted hospitals. These patients will keep receiving this assistance during phase 2 of the projects (3 years). ✓ Also, in responding to the 17th UN SDG “partnering for the goals”, IRJ has covered 580 HD sessions for 135 QRC HD patients over a period of two weeks in November 2017 and April 2018.
<p>Challenges</p>	<ul style="list-style-type: none"> ✓ Since the beginning of the health program in Jordan in 2014 IRJ has reached 16,847 beneficiaries according to following: ✓ 2,140 Surgery referrals and 236 prosthesis (2015- 2018) ✓ Conducted 84 Awareness sessions for 2,965 beneficiaries (2016-2018) ✓ Delivered 2,325 health kits (2016-2018) ✓ Covered More than 5,650 HD sessions (2015- 2018) ✓ More than 11,359 primary health care beneficiaries (Mobile clinic) (2016-2018)
<p>Best practices</p>	<ul style="list-style-type: none"> ✓ Shortage in funding for HD dialysis patients (provide sustainable financial support for HD patients). ✓ Follow-up with MC beneficiaries- due to movement of refugees and the MC. ✓ High turn-over of the doctors in the mobile clinic for specialization purposes.
<p>Referrals:</p>	<ul style="list-style-type: none"> ✓ Internal integration approach between departments to provide compatible integral services for beneficiaries. ✓ Cooperation with other INGOs – surgical mission, HD patients (provide other health care needs such as psychosocial services). ✓ Involvement of national stakeholders (Volunteers and CBO's). <ul style="list-style-type: none"> ▪ Alaa Al-Zaghoul, Project coordinator: Alaa.Alzaghoul@irj.org.jo ▪ Online referral form: https://goo.gl/forms/ZavuiT2tBWuGZudU2
<p>Action points</p>	<ul style="list-style-type: none"> ✓ UNHCR to share the presentation with all partners ✓ SAMS will be doing the next presentation followed by CVT: JUL, JAMS: Aug

5. Health Agency Updates

WHO:

- Acute Flaccid Paralysis (AFP) surveillance program is doing well both at national and subnational level. AFP cases are reported from almost all governorates.
- A total of 65 AFP cases reported in week 21, ending on 27th May 2018 with Non Polio AFP rate of 5.8/100,000 under 15 populations and stool adequacy of 100%
- [Update on AFP surveillance in Jordan and regional/global polio situation:](#)

IMC:

- IMC signed MOU with MSF, IMC will take over the maternity in Irbid starting next Sep. (MSF will run the neonatal)
- IMC is accepting vulnerable population specially who are not covered with the public health insurance system.
- IMC will run mobile health clinic in Mafraq starting 1st Jul. (Field Coordination Forum needs to coordinate the work in Mafraq with partners running mobile clinics).

MEDAIR:

- Received fund from ECHO for cash for health projects and it will start in Jun.
- Working to expand the services because of the new health policy, but so far will be working on cases from old projects
- More information to be provided for the referral process.

CDE:

- Next orthopedic Surgery mission in 22nd Jun and will last for one week
- First two days will be for consultations and next four days will be for operations.
- Open for any referrals from partners.

IRC:

- Expecting the fund from donors by Jun, increasing the capacity of the clinic
- Coordination with Caritas and UNHCR for mobile clinic in Ramtha.
- Mobile Clinic in Mafraq will start in Jun and will stay there for 7-8 months
- Need to coordinate with partners on the filed level in order to avoid any duplication
- Excepting unregistered refugees

	<p>CVT:</p> <ul style="list-style-type: none"> ▪ CVT will be closing their Zarqa center next January, so there will be no mental health and physiotherapy services. CVT will be focusing the attention in Amman. ▪ The phase transition will be through Sep, the services will be as planned, however the registration will be closed. <p>SAMS:</p> <ul style="list-style-type: none"> ▪ Next medical mission will be 7th – 11th Jul ▪ Next medical mission will target OPG, dentist, plastic surgery and cardiology ▪ The new project for Thalassemia patients in Zaatari camp, waiting to receive the database of the patients (more than 120 cases were targeted over the country) ▪ SAMS covered the dialysis project for two weeks in Apr and one in May. <p>IOCC:</p> <ul style="list-style-type: none"> ▪ Started new project in partnership with IFH, started with opening clinic in East Amman. The clinic will be serving people with disabilities (hearing, visual) the cases referred for medical services will be refereed also for livelihood components. ▪ IOCC is a member of the disability task force, the task force established to ensure that the people with disabilities are considered in the humanitarian responses. ▪ IOCC to add the new project to the Services Advisor system <p>QRC:</p> <ul style="list-style-type: none"> ▪ 120 patients will be secured till end of Sep with all services for hemodialysis ▪ In the final steps to cover the medical cases till end of Apr for the same patients. ▪ A workshop was conducted with partners (IR, SAMS, AMR and UNCHR) to have long term cover for the hemodialysis patients and to overcome the situations faced on 2018. <p>UNFPA:</p> <ul style="list-style-type: none"> ▪ Received approval from ECHO to fund the supported projects in Zaatari Camp through JHAS, and four sites for IFH. ▪ Ran quick verification exercise on Activity Info system for the IPs and partners.
<p>Action points</p>	<ul style="list-style-type: none"> ✓ CDE to share the factsheet for their next mission ✓ IRJ to share their tentative schedule of their upcoming missions ✓ SAMS to share the factsheet for their next mission

6. Subsector working groups – Reproductive Health (UNFPA), Mental Health (IMC/ WHO), Nutrition (Save the Children Jordan/UNICEF), Community Health Task Force (Medair/IRD)

<p>RH (UNFPA)</p> <p>Mental Health (IMC/WHO)</p> <p>Nutrition (Save the Children Jordan/UNICEF)</p>	<ul style="list-style-type: none"> ▪ Improved RH seeking behavior and supported compliance to ANC/PNC visits for less defaulters were the main topics discussed through the community Health Services in Azraq Camp provided through IMC. The project also presented success ratios related to utilization of RH services. ▪ Maternal and Child Health Directorate of Ministry of Health provided an update to the group regarding the advocacy efforts to revoke the January 2018 new policy for providing RH services to Syrian refugees. The MCH Directorate with the support of the group has succeed in obtaining prime ministry’s approval to exclude preventive RH services to Syrian refugees from the new policy. The decision is subjected to a final approval from Health Insurance Administration in order to be implemented. <ul style="list-style-type: none"> ▪ MHPSS had the monthly meeting and started the discussion and the design on the layout of the online 4Ws online tool which will be hosted on WWW.mhpss.net ▪ During the monthly meeting MoH presented National mental health and substance use action plan (2018-2021) <ul style="list-style-type: none"> ▪ The preparations for the micronutrient deficiency survey are finished. The protocol, the questionnaires and the agreements with the IPS are ready. ▪ The objective of the survey is to get a nutrition evidence about the micronutrient deficiencies in Jordan for specific biomarkers. ▪ The survey will include everyone in the country including the refugees in the camps (Zaatari, Azraq and EJC) ▪ The sampling process is on running now. ▪ The target group are children 0-5 years and women in child bearing age with concentration on pregnant and lactating women. ▪ Data collection will start in Sep.
<p>Action Points</p>	<p>✓ N/A</p>

7. Proposed Assessments/Research

	<p>IRC:</p> <ul style="list-style-type: none">▪ Expecting a research project in mid-2018, focusing on community program on Non communicable diseases.
Action Points	<ul style="list-style-type: none">✓ IRC to share the research once finalized with UNCHR in order to be registered on the Assessment Registry.

8. AOB -

	N/A
Action Points	Next HSWG meeting will be 28 th Jun at WHO