

Health Sector Coordination Meeting

Date: Thursday, 10th December 2020	Venue: Teams Virtual - UNHCR	Time: From 10:00 am to 12:00 pm
Participants: UNHCR, WHO, IMC, IRC, JPS, Save the Children, UNICEF, Medair, Caritas, HI, SAMS, EMPHNET, TDH Italy, IOCC, IOM, RHAS, MSF		
Agenda		
1. Introduction and Review of last meeting Action Points		
2. Situation Update by UNHCR / WHO		
3. COVID-19 response activities by partners – which pillar of national preparedness and response COVID-19 plan covered, target population and governorate, partnership.		
4. Sub-Sector Working Groups – Reproductive Health (UNFPA), Mental Health (IMC/ WHO), Nutrition (Save the Children Jordan/UNICEF) / Community Health Platform (MEDAIR)/ Non communicable disease (NCD) (WHO/UNHCR)		
5. Partners Update		
6. AOB		
1. Introduction and Review of Action Points from the previous meeting		
Sector Chair [UNHCR]	Introducing the agenda of the meeting. The agenda of the tenth Health Sector virtual meeting focused on the COVID-19. Progress on action points from last month meeting: <ul style="list-style-type: none"> ▪ WHO to share MoH home isolation protocol once approved Done. ▪ UNHCR and WHO to initiate discussion with MOH to reactivate the NCD Task Force. Done 	

- IMC to share MH updated 4Ws matrix. To **remove it from the update. Its ongoing process and the final report will be share in January2021**

2. Situation Update by UNHCR / WHO

WHO

Epidemiological updates on COVID-19:

1. Jordan is in COVID-19 community transmission since mid-September. In September there were an average of 300 cases per day, in October 2,000, in November 5000
2. After the peak of around 8,000 cases on 18 November, in Jordan there has been a steady decline with an average of 3,000 cases per day during the first 13 days of December
3. Jordan has recorded 30 deaths and 2,339 new COVID-19 cases Sunday, bringing the total number of cases since the beginning of the crisis to 259,614 while the death toll has risen to 3,365
4. Jordan ranks 6th in the Eastern Mediterranean Region as n of cumulative deaths (around 6% of EMR) and n of cumulative deaths (around 3% of EMR) after Iran, Iraq, Pakistan Saudi Arabia and Morocco
5. Test positivity rate was concerningly high up to 2 weeks ago with as much as 25%; now the trend is going down with less than 15%. However, this is still higher than in situation under control and indicates a persistence of the Community Transmission phase
6. While incidence of cases has remarkably declined in Amman, other governorates are registering higher n of cases per 100,000 population; namely Jarash, Madaba, Tafelieh and Ajloun are the areas with highest incidence

Camps Updates [UNHCR]

UNHCR

Dr.Adam provided an update on refugee status as of 30 November 2020:

Total Number of active registered refugees as Asylum Seekers in Jordan: **751864**

Syrian	662.166
Iraqi	66,803
Yemeni	14,822
Sudanese	6,042
Somali	739
Other Nationalities	1,492

Camp Updates On Covid-19

Zaatari

- 628 cumulative positive cases
- 218 active cases2 deaths
- 408 recovered
- 11,406 total PCR tests done;

Azraq

- 550 cumulative positive cases

	<ul style="list-style-type: none"> • 7 active cases • One death • 13, 731 total PCR tests done • 542 cases recovered, completed their quarantine/treatment from Dead Sea Isolation area and Prince Hamza hospital <p>King Abedalla Park (KAP):</p> <ul style="list-style-type: none"> • Active surveillance is being conducted by JHAS with the support of UNRWA. <p>EJC</p> <ul style="list-style-type: none"> • 161 positive cases • 72 active cases • 89 recovered, completed their quarantine/treatment from Dead Sea isolation area and Prince Hamza hospital. • One death • 3320 total PCR tests done
Action Points	○
3. COVID-19 response activities by partners – which pillar of national preparedness and response COVID-19 plan covered, target population and governorate, partnership.	
<ul style="list-style-type: none"> ▪ Meeting outcome between UNHCR and Dr.Wael AlHayajneh SG and head of the Coronavirus portfolio at MoH: ▪ Purpose of the meeting was to discuss inclusion of refugees within COVID-19 vaccination plan. ▪ MoH confirmed that refugees will receive access to MoH services and COVID-19 treatment and vaccines ▪ Two vaccination centers will be established in camps- one in Zaatari and other in Azraq. Emirati camp and King Abdellah park will receive the vaccination based on MoH eligibility criteria; ▪ List of eligible group to receive first batch of vaccines, have been finalized and will be shared with MoH 	

- MoH approved to provide temporary licensing to medically qualified professionals among Refugees, such as GPs, ENTs, Pulmonologist, nurses, and other specializations. These professionals will be deployed in MoH field hospitals; A task force have been formed to follow up on the recruitment of qualified refugees at field hospitals
- Refugees of all nationalities have been issued with an extension of their asylum certification until June 2021, to avail MoH health services, including COVID-19 free treatment. Non- registered refugees are also eligible to access COVID-19 free treatment
- Partners can communicate UNHCR for further information on asylum certification extension to their beneficiaries.

WHO updates on Coronavirus vaccination:

- Globally, out of 200 vaccine candidates, 48 of them are in human trial
- 11 vaccine candidates globally are in Phase III trial.
- Interim analyses of phase 3 studies have been announced, through press releases, for four candidate COVID-19 vaccines (Pfizer/Biontech, Moderna, AstraZeneca, vaccine from Gamaleya National Centre)
- First 10% (1 Million doses) of Jordan Population prioritized to receive first stage of vaccine: Health care workers, Elderly with chronic illnesses, essential workers, police, civil defense, other groups with chronic illness.
- COVID-19 vaccination working group established in National Center for Security and Crisis Management
- National Deployment and Vaccination plan is being drafted.
- Vaccine introduction Readiness Assessment for Jordan finalized
- 30 hospitals and 30 PHC facilities are identified by MoH for vaccination.
- Jordan will get COVAX (2 M doses) with WHO support of \$8 M; 1 M doses contracted from Pfizer;

updates from WHO:

-Two phases of sero-epidemiological investigation completed. Prevalence rate: Phase one (<0.28%; Phase two: 6.91%). Conducting Phase 3 is under discussion

- Rapid Antigen Test: 400,000 test kits will be provided by WHO to be performed in all hospital emergency. This test would differentiate between COVID respiratory symptoms. <https://extranet.who.int/hslp/content/sars-cov-2-antigen-rapid-diagnostic-test-training-package>

- Case management protocol available in WHO website (<https://www.who.int/publications-detail-redirect/clinical-management-of-covid-19>) for downloading.

4. Sub-Sector Working Groups: Reproductive Health (UNFPA), Mental Health (IMC/WHO), Nutrition (Save the Children Jordan/UNICEF) and Community Health Platform (MEDAIR)

Dr.Dina from UNHCR provided the RH update on behalf of UNFPA:
The SWG meeting took place on 27 October.

<p>UNFPA / RHWG</p>	<ul style="list-style-type: none"> • The focus was on the mobile health clinics supported by UNFPA to support antenatal care and outreach activities in southern governorate. • Discussed JRP2021-2023; guidance presented to partners on how to develop their PSS. • RH Sub-Sectors meetings held in the two camps (Zatari and Azraq) . Zataari camp meeting focused on the two maternal death cases; Azraq camp meeting focused on how to maintain RH services within the RH business continuity plan.
<p>MHPSS SWG</p>	<ul style="list-style-type: none"> • All MH services are provided as usual at Primary Health care level and medication provided by INGOS for 2 to 3 months as required. Psychotherapy sessions are being provided online based on the requirement, to avoid unwanted exposure to COVID19. • Referrals to national center for mental health care happening based on the needs through the referral hub, MHPSS support lines were established during March 2020 when lockdown took place still active and looking to formalize emergency support line for self-harm and harm for others. Next meeting will be on 16 December, 2020 and meeting invitations will be shared to concerned partners.
<p>UNICEF/ Nutrition Working Group</p>	<ul style="list-style-type: none"> • IYCF training was provided for health partners in Zaatari and Azraq camps, and in Irbid governorate., A total of 340 staff of various specialities such as Gynecology, General Practices, Pediatricians, Nurses, Midwives, Clinical Managers and community health workers, were trained and the trainings will continue to cover more health staff. • Next meeting have been scheduled on 16 December, 2020, discussing on annual review of the year 2020 and the plan for the next year. • The first meeting on the re-activation of the non- communicable disease (NCDs) sub-working group was held on 01 December, 2020. The TOR was discussed and to be endorsed in the next meeting. • It was agreed to to change the name of the group from Task force to a working group, to ensure the sustainability of the coordination and role of partners in NCD prevention and control. Role of each agencies and the NCD projects will be discussed, identifying the priority areas that would support the development of work plan.

<p>NCD</p>	<ul style="list-style-type: none"> • NCD subworking group meeting will commence on monthly basis, with flexibility of having ad-hoc meetings based on the necessity. This group will meet first Tuesday of every month, between 10 AM and 12 PM. • The involvement of MOH NCDs focal point was mentioned as the key priority to maintain a continuous and effective communication and collaboration with MoH, with an Eefforts to integrate refugees into the national system. • Agencies are requested to ensure filling the matrix that was shared as a life document by COB Next Tuesday 8 Dec, 2020.
<p>Action Points</p>	<ul style="list-style-type: none"> • MHPSS SWG Next meeting will be conducted on Wednesday, 16 December and to share the invitation with colleagues.
<p>5. Partners Updates</p>	
<p>Caritas</p>	<ul style="list-style-type: none"> • Caritas has continued to provide PHC services to the refugees. • During November2020, Caritas has provided 6,184 health care services for the refugees, from which 4,449 were Syrian and 1735 are non-Syrian nationalities. • Caritas made sure to secure the patients with thier NCD medication account for any external factors that could have delayed the process due to the pandemic. NCD medications have been dispensed for around 4000 patients in November 2020. • Patients follow up are carried out through telemedicine as they received their NCD medication stock for 3 months. Telemedicine initiative by Caritas further ensures maintaining a open communication channels between service providers and patients, . providing professional counselling for the patients
<p>EMPHNET</p>	<ul style="list-style-type: none"> • As per the memorandum of understanding between UNHCR and EMPHNET, two teams are working in Zatari And Azraq camps. Starting this week, samples are being collected, in addition to testing and case tracing.

<p>JPS</p>	<ul style="list-style-type: none"> • One team was deployed at the MOH for one month. • JPS is continuing its activities in the secondary and tertiary health, supporting life-saving cases from both camps and host community. • JPS is to be accredited by the WHO • JPs supported lifesavings with emergency cases in the urban setting for non-Syrian POC. • Project funded by OCHA is going smoothly.
<p>TDH Italy</p>	<ul style="list-style-type: none"> • NA
<p>HI</p>	<p>Rehabilitation:</p> <ul style="list-style-type: none"> • The National rehabilitation strategy was shared with the MoH and it was validated and waiting for MoH's green light to start implementation. • The Rehabilitation platform will be conducted in Jan 2021 to build up the objective to the team members. • HI is supporting its partners in providing PPEs such as mask, glove, as a second phase. HI has planned to donate some PPEs to MoH during this phase. . • HI continue to provide rehabilitation services in collaboration with CDC Zarqa, CDC Wehdat, CDC Baq'a, CDC Irbid, and CPF. Direct service provision at hospitals are suspended due to the risk of COVID19 in the hospital and reduction of staff to 50% . In addition the CBR Volunteers are providing basic rehabilitation intervention for the beneficiaries through home visits. • The trainings and meetings are conducted online. On hand practical training is limited to 5 participants, ensuring the best usage of the PPE and distancing ..etc.

<p>Medair</p> <p>Emergenza Sorrisi Doctors For Smiling Shildrn</p>	<p>Early detection Early Intervention (EDEI);</p> <ul style="list-style-type: none">• MoH and HCAC (health care accreditation council) and HI are working on developing early detection clinical pathways for CP and DDH.• HI and MoSD are working on developing early intervention protocol at national level• HI is planning to work with HCD and ministries to create referral pathway between Early detection and early intervention services <p>Community health platform CHPF:</p> <p>After months of trials to meet MoH to seek guidance regarding CHVs conducting HH visits, Medair was successful to meet the new communicable diseases head of department in MoH last Monday. Hanan from IRC joined the meeting representing the community health platform and talking on behalf of all NGOs working in community health. Dr. Sami Al Shaikh the head of communicable diseases department clarified that the MoH doesn't have any specific protocol to regulate the CH work in Jordan but his advised that when CHVs conduct HH visits they need to follow the standard procurations which are:</p> <ul style="list-style-type: none">• Follow social distancing (keep at least 1 meter distance away the person Infront of you)• Wear disposable surgical masks and change the mask after each visit.• Wear disposable gloves and change them after each visit• Preferably to keep the HH visit for 15 minutes or less. <p>On behalf of Medair: Medair will start covering Zadari camp beneficiaries to fill the gap that the Moroccan hospital left. In coordination with JPS and UNHCR, Medair will cover part of the deliveries, NICU, obstetric cases and lifesaving emergencies.</p> <p>NA</p>
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<p>IMC</p>	<ul style="list-style-type: none"> • Azraq COVID-19 center structure was completed, all staff were recruited, trained and deployed to the location, procurement of equipment, consumables and medications were finalized, and materials delivered to Azraq camp. The center is 50 beds capacity and expandable in case of need. • The second part of COVID-19 response in Azraq camp includes the strengthening of the Community health team, we trained a team of 8-10 CHW in each village lead by a registered nurse, those teams started mid-October to follow up remotely on all confirmed cases and families in isolated shelters inside the camp, this includes: a check up on symptoms, severity, progression of the disease, risk factors and any non-COVID health needs, the team delivered materials to 280 shelters as of end of November, this included NCD and MH medications, nutritional materials and formula milk, this was in collaboration with the hospital, PHCs, MHPSS and nutrition teams in the camp. • In addition to the above, the CH team educates patients and care givers about the danger signs and when to seek medical help, and dedicated a hotline in each village that is connected to the medical staff in the COVID center to provide a fast medical response and coordinated referral in case of need. • We are continuing the active surveillance and samples taking in the health facilities in both camps in coordination with MoH and UNHCR public health camps focal points. • All other regular activities are working as per usual.
<p>RAHAS</p>	<p>NA</p>
<p>IRC</p>	<ul style="list-style-type: none"> • IRC has supported MOH for health system strengthening and procurement of items and equipment for Covid 19 hospital. • Continuing provision of health services remotely and through direct service modality. • Continuation of cash for health for obs. cases.
<p>MSF</p>	<ul style="list-style-type: none"> • Since 2014 MSF has been provided consultation services and treatment for refugees and vulnerable Jordanian in Irbid governorate and major NCDs. • HH visit for patients with mobility constrains. • Providing physiotherapy and phyco-social support and health promotion

	<ul style="list-style-type: none"> • They served 3670 patients out of them 3260 Syrian and 380 Jordanian .330 HH • Looking to hand over their activities into other health actors in 2021
Action points	

6. AOB	
	NA
Action Points Recommendations	
Next Meeting	TBD