

Health Sector Coordination Meeting

Date: Thursday, 27 th May 2021	Venue: Teams Virtual - UNHCR	Time: From 10:30 am to 12:30 pm
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Participants: UNHCR, WHO, MOH, IMC, IRC, JPS, Medair, HI, IOCC, IOM, RHAS, UNFPA, ICRC, MOH, EMPHNET, MSF, Caritas, UNFPA, Medair, SAMS, Humani-terra, ACTED, SDC, Help - Hilfe zur Selbsthilfe, TDH Italy, PRM, ACF, MIRRA, UPP, CVT

Agenda

1. Introduction and Review of Action Points from the previous meeting
2. UNHCR / WHO/MOH updates on COVID-19 epidemiological situation and COVID-19 vaccination status in Jordan
3. An updated presentation on the COVID-19 vaccination at both camps by UNHCR (Zaatri & Azraq)
4. Jordan Humanitarian Fund (JHF) call for proposal – Briefing by OCHA
5. Partners Update Urban
6. AOB(Update on JRP)

1. Introduction and Review of Action Points from the previous meeting

Sector Chair [UNHCR]	<p>Dr. Mohammad Fawad from UNHCR and Dr.Nazeema from WHO Introduced the agenda of the meeting and welcomed representative from MoH</p> <p>The agenda of the fifth Health Sector virtual meeting for 2021 was focused on the COVID-19 response and Vaccines. Progress on action points from last month meeting:</p> <ul style="list-style-type: none"> ▪ Royal health Awareness Society (RAHAS) to prepare a table with proposed date for Sub working group meetings and share it with the group. WHO has conducted the exercise and will share it with the group. ▪ UNFPA to share the published version of National Maternal Mortality Report 2019 that has been officially launched on the 27th of April 2021.Done. ▪ HI and SAMS to conduct bilateral meeting to discuss collaboration between them. The meeting was postponed.
2. Situation Update by UNHCR / WHO/MOH	
MOH	<p style="text-align: center;">COVID-19 epidemiological situation in Jordan (As of 26 May 2021):</p> <p>Dr. Ali Al-Zetawi from MOH provided an update on the vaccination status in Jordan:</p> <ul style="list-style-type: none"> • Number of reported cases on 26 May: 842. • Cumulative number of positive cases: 733,189. • New cases of death: 12 on 26 May., with9,407 cumulative deaths. • Number of tests on 26 May is 20,500,adding to atotal tests of 7,182, 844 performed since the beginning of crisis. • Recent number of Hospital admissions as of yesterday (26 May) is 67 cases • Number of discharged cases from hospitals is 49. • Confirmed cases in the hospital receiving medical services 586 • % of positivity:4.11 • % of Mortality:1.4 • % of Hospital bed occupancy as per region: North 12%, South %7, Middle% 14 • % of Hospital ICU occupancy as per region: North 24%, South10 %, Middle22% • % of Hospital respiratory devices occupancy as per region: North 18%, South8 %, Middle8% <p>This shows that the Epidemiological Situation is almost stable. During the past two weeks the percentage of infected cases is less than 5%, keeping the epidemiological situation stable</p>

- Weekly recording of the confirmed cases, : the week 21 was 0.038. As of previous week:
- Total of positive confirmed cases. distributed per Highest Governorate are as follows:
- Amman: 342493
- Irbid :96623
- Zarqa: 71963

Gender distribution of confirmed cases :49% Female and 51% Male.

Age distribution: Highest among the age group of 25-34 with male higher in number than female, followed by the age group 35-44, 15-24. Very small number of cases were reported (133 cases) among the age group of Under 5.

Highest Epidemiological weeks were week 12 and 13 in the year of 2021. In week 14, cases started to decline gradually with decrease in number of hospital admissions and increase in number of discharge from hospitals. . Percentage of hospital occupancy started to decrease from 65% to 8%. Current occupancy rate in Amman 12 %

COVID-19 vaccination status in Jordan:

- More than two million and two hundred thousand people registered (Syrian and Jordanian) for the Vaccine on the MOH platform www.vaccine.jo, since the beginning of vaccination. 15 % of total registered were among age group of 60 +.
- One million and eight hundred thousand have been vaccinated as per 26 May out of them 481,000 received two doses. Majority were with the age of 60 +, followed by the age group of 50; 40-49; and 30-39. In some governorates MOH included the age group of 20-29 in vaccination schedule due to the small number of people registered

The Distribution of vaccinated people per kind of Vaccine as follows:

Vaccine	Number of Vaccinated people with first dose	Number of vaccinated people with two doses
Pfizer	560,000	263,000
Senfoarm	500,000	308,000
Spotnic-V	9000	9000
AstraZeneca	275,000	305,000

The Distribution of vaccinated people per governorates:

WHO

- Amman 800,0000 received first dose and 300,0000 second dose (completed vaccination)
- Irbid first dose, Second dose 200,000 (completed vaccination)
- Zarqa 150,0000,Second dose 66000(completed vaccination)

In general people encouraged more to register to receive the vaccine , MOH opened new vaccine centers in addition to the drive- thru services and increased the number of vaccination teams . As per MOH policy, those who have been registered don't need to wait to receive appointments, they can receive at schools ,work place and universities where MOH deployed their teams to do the vaccinations. Around 87 % of registered teachers have been vaccinated; the plan is to complete all university/school, teachers ,medical staff and other critical staff before the summer closure from 15 June. The planned target to reach for vaccination is 100,000 people per day .

Global/Regional Epidemiological updates on COVID-19:

Dr. BELLIZZI, Saverio from WHO provided an update on global Covid-19 status:

- As per the WHO global update ,over the past week the number of new cases and deaths at global level has declined to 4.4 million cases and 84,000 deaths. The decline is more specifically in European region and south east Asia.
- The Eastern Mediterranean region has reported a decline in number of cases this week, as well in the earlier epidemiological week .Number of reported cases are around 2015,000,and 4,200 deaths' representing 2% of global deaths, but with a decrease in 11% when compared to the previous week.
- Around 800,000 new cases recorded as of today, raising the accumulative number to 170 Million cases and 3.5 Million deaths world wide. The American region is the leading in terms of cumulative cases of 66 Million followed by European region with 54 Million, South Eastern Asian region with 31 Million, Mediterranean with one Million and Africa with 3.5 Million and Western pacific with 2.5 Million.
- At country level, USA have reported the highest in term of a cumulative number followed by India with 27 million. This is followed by Brazil,France, Turkey and Russia. .
- In the Eastern Mediterranean Region 10 million cumulative cases were reported with 200,000 deaths. Iran is the highest with 2.8 Million cases reported, followed by Iraq with 1.2 Million, Pakistan with 900,000 and Jordan ranking fourth in the list with more than 700,000.

Action Points													
Camps Updates [UNHCR]													
UNHCR Updates on Refugees	<p>Dr FAWAD on behalf of UNHCR provided an update on the number of Refugees and Asylum seekers registered at UNHCR: as of 26th May 2021:</p> <p>Total Number of active registered refugees as Asylum Seekers in Jordan:</p> <table border="1" data-bbox="541 833 1352 1114"> <tr> <td>Syrian</td> <td>666,234</td> </tr> <tr> <td>Iraqi</td> <td>66,739</td> </tr> <tr> <td>Yemeni</td> <td>13,666</td> </tr> <tr> <td>Sudanese</td> <td>6,024</td> </tr> <tr> <td>Somali</td> <td>709</td> </tr> <tr> <td>Other Nationalities</td> <td>1,446</td> </tr> </table>	Syrian	666,234	Iraqi	66,739	Yemeni	13,666	Sudanese	6,024	Somali	709	Other Nationalities	1,446
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Action Points	
3. PPP on the COVID-19 vaccination at the camps by UNHCR (in English)	
UNHCR Update	<p>Dr. Fawad from UNHCR delivered presentation on COVID-19 Vaccination Campaign in Refugee Camps (Zaatari & Azraq). He covered the following Topics:</p> <ul style="list-style-type: none"> • Some Numbers, Trends & Insights COVID-19 Vaccination Campaign in Refugee Camps (Zaatari & Azraq) Public Health Strategies • Brief History • Dimensions of Hesitancy • Basic Reproduction Number & Herd Immunity • MOH Jordan Eligibility Criteria for COVID-19 Vaccination: Inclusion and prioritization criteria • Road Ahead
4. JHF call for proposal	
	<p>Mr. Hanna from JHF delivered presentation on OCHA call for proposal –launched in May June 2021</p> <p>Allocation Priorities:</p> <ul style="list-style-type: none"> • The allocation will prioritize two sectors: (1) Health and (2) Child Protection. • The JHF targets critical funding gaps and urgent humanitarian needs of the following specific groups: • Elderly people at risk • People with disabilities • Children at risk

- Refugees

Process timeline

- Launching the allocation and proposals submissions (19 May – 6 June 2021: 14 days)
- Strategic and Technical review and scoring (7 – 15 June 2021: 7 days)
- AB consultation/Humanitarian Coordinator endorsement (17 – 22 June 2021: 5 days)
- Inform applicants and start the projects revision process (23 June 2021).

Eligibility

Criteria:

Partners who have passed the JHF Capacity Assessment and "Due Diligence" requirements and are active members of the relevant sectors are eligible to submit proposals for funding.

Disqualifying criteria:

- Projects that do not address the priorities set out in the allocation document and are not aligned with the objectives of the Jordan Response Plan.
- Partners that are not active participants in the sector working group and projects that were not coordinated with the Sector leads.

Proposals' review and assessment

- The Strategic and Technical Review is conducted by a Sector Reviewing Committee using a standardized scorecard.
- The committees should ensure an equitable representation of UN, INGOS and NNGOs/JHF team representatives.
- Gender Focal Point.

Proposals' review

Strategic relevance:

- Targeting the highest outstanding priorities and geographical locations, strong contextual analysis, adhering to the sectors' guidelines, risk management, and quality and clarity of the project's objectives.

Programmatic relevance:

- Description of the beneficiaries and the selection criteria needs of specific vulnerable groups, logical framework design, gender, and protection mainstreaming.

Cost-effectiveness:

- Reaching the maximum outcome and beneficiaries considering the context and location of the targeted area and the clarity and completeness of the budget.

Management and monitoring:

- Partners' prior experience, Accountability to Affected Population, Reporting and Monitoring Plan, and complementarity.

Coordination:

- Active participation in the sector's meetings.

Interested applicants: What to pay attention to

- Key issues to consider
- Consult your proposal idea with the sector before submission
- Make sure your GMS profile and organization information are up to date
- Make sure that sufficient and concise information is provided/avoid redundancies.
- Set realistic targets and provide details on each active
- Gender and protection mainstreaming should be illustrated throughout the project's different stages – consult with the sector's gender focal point

	<ul style="list-style-type: none"> • Projects that focus on one or more vulnerable groups are appreciated • Fill out the line item's description in the budget and clarify each line items contribute to the projects' outputs • Reach out to the JHF team for any support regarding the project budget/design
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5. Sub-Sector Working Groups: Reproductive Health (UNFPA), Mental Health (IMC/WHO), Nutrition (Save the Children Jordan/UNICEF) and Community Health Platform (MEDAIR)

UNFPA / RHWG	<p>Ms. Jihan Salad provided \ the RH update on behalf of UNFPA:</p> <ul style="list-style-type: none"> • The State of the World’s Midwifery Report has been published on Wednesday, the 5 May 2021, in view of the International Day of the Midwife. The theme of this year’s celebration is “Follow the Data: Invest in Midwives”. There are a couple of findings from the report that stood out: Firstly, the fact that midwives could deliver up to 90% of essential sexual, reproductive, maternal, new-born, and adolescent health interventions across the lifespan. Despite this, they account for less than 10% of the global SRMNAH workforce. Secondly, in order to close the global SRMNAH workforce gap by 2030 – which is in the next ten years, we need 1.3 million new SRMNAH workers entering the global workforce. Now, we are experiencing a shortage of all types of SRMNAH workers, but the most significant gap can be found in the area of midwifery. As we speak, there is a shortage of 900,000 midwives globally, and looking at the current rates, it is predicted that there will still be a gap of 750,000 midwives by 2030. Thirdly, the report also shows the potential impact of midwives in preventing and reducing maternal mortality, neonatal mortality, and stillbirths. If we invest in ensuring that midwives are fully educated, regulated, and integrated within a multi-disciplinary team, 4.3 million lives could be saved every single year. • Preparations are made for the upcoming Menstrual Hygiene Day planned for tomorrow, the 28th of May. Menstrual Hygiene Day is a global advocacy day, which occurs on the 28th of May, and is aimed to promote the menstrual health and hygiene needs for all who menstruate. For 2021, SRH WG, as part of the global campaign, will put a spotlight on the millions of people who need to manage menstruation in
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MHPSS SWG/IMC

an emergency context. Given the current COVID-19 pandemic, the campaign will be virtual and social media will be used to spread more awareness on menstrual hygiene.

- Reproductive Health pamphlets have been designed and shared with the Ministry of Health for their official endorsement. The production is part of a wider plan to develop, seek endorsement and design more SRH-related Information, Education and Communication content on behalf of the SRH WG. An additional list of Personal Protective Equipment (PPE) items have been procured in order to meet the needs of SRH WG partner organizations to continue protecting health care workers, particularly SRMNAH workers, by embarking on the procurement of an additional list of Personal Protective Equipment (PPE) items based on the needs of our partners. The items include, but are not limited to, face masks gloves, apron, goggles, head, and shoe covers, and face shields. These items will be made available in mid-June to the specific partner organizations who submitted their request. Preparations are made for the upcoming Menstrual Hygiene Day planned for tomorrow, the 28th of May. Menstrual Hygiene Day is a global advocacy day, which occurs on the 28th of May, and is aimed to promote the menstrual health and hygiene needs for all who menstruate. For 2021, SRH WG, as part of the global campaign, will put a spotlight on the millions of people who need to manage menstruation in an emergency context. Given the current COVID-19 pandemic, the campaign will be virtual and social media will be used to spread more awareness on menstrual hygiene.
- Under the slogan 'Be Ready Be Safe', the Health Care Accreditation Council (HCAC) published guidelines for health institutions to deal with the emerging coronavirus (COVID-19) pandemic and improve the quality of performance. The guide helps health institutions to promote a culture of continuous improvement through a continuous process of quality improvement based on the use of data, as one of the basic principles of quality management. The guide also aims to encourage and support health institutions to undergo self-evaluation processes, compare performance over time and achieve national instructions and guidelines that demonstrate the highest standards of healthcare quality (I have attached the guidelines).
- IMC medical staff received a training about COVID-19 vaccine administration in both camps and currently support MoH in the vaccination at Zatri and Azraq camps.
- For Azraq covid 19 center which is a 50 bed capacity inpatient care facility, from Jan to May 2021 we had a total of 499 admissions (including suspected cases in needs for isolation until the result of PCR test), and a total of 3504 outpatients consultation.

NCD	<ul style="list-style-type: none"> • The community health team is continuing the community mobilization toward vaccination by providing education about the importance of the vaccine and providing help to register on the platform on spot, this included shelter visits and the presence of a CH volunteer in the health facilities reception areas and in the NCD clinics in the camp. In addition to a dedicated help line for the vaccine and follow up on the appointments, any side effects after the vaccine and follow up on the appointments for the second dose of the vaccine. • In addition to the community mobilization the team also support and follow the confirmed COVID19 cases at home isolation and the dedicated public area, providing education especially about danger signs and when to seek immediate medical care, in addition to sharing the treatment center hotline to ensure a 24/7 easy access to medical care for those confirmed cases. <p>MHPSS:</p> <ul style="list-style-type: none"> • MHPSS are hiring a consultant to update and analyze the 4Ws. • Ministry of health with the support of WHO presented the results of Evaluation and Development of the National Mental Health and Substance Use Action Plan (2022-2026) for Jordan; next step is to share the report and the recommended plan, • New Helping Adolescents Thrive (HAT) Toolkit launched by UNICEF -WHO and will be shared with MHPSS members • NCD sub-group is Following up the vaccination campaign among the NCD patient and working with MOH, they have reached 50000 NCD patient. 40000 were positive to receive the vaccination after the campaign • Hala from WHO will present the project in details in the Next HSWG meeting • On Monday 31st of May WHO is celebrating the Smoking Cessation National Initiative following the WORLD NO TOBACCO DAY on 31 May. Dr. Dina from WHO has awarded the No tobacco award. • Around 25 Health centres across the kingdom provides Smoking Cessation free of charge samples and medications services to Jordanian and Syrian. • WHO will be organizing informative session In the next NCD meeting on Tuesday 01 June 2021 ;they will discuss which organization is interested to receive training and free medication for Smoking
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<p>UNICEF/ Nutrition Working Group</p> <p>CASH for Health</p>	<p>Cessation by WHO as they received free medications from Johnson and Jonson with the amount of one million US\$ to cover all nationalities , Jordanian and camps.</p> <p>NA</p> <p>NA</p>
<p>Action Points</p>	
<p>6. Partners Updates</p>	

<p>Caritas</p>	<ul style="list-style-type: none"> • Caritas has provided around 8,000 primary health care consultations for all ASC holder refugees from Syrian and non-Syrian nationalities."
<p>EMPHNET</p>	<p>NA</p>
<p>JPS</p>	<ul style="list-style-type: none"> • JPS continued providing secondary and tertiary health care referrals to refugees in urban and camps settings in 2021 with a total of 2,864 from the beginning of the year. A total of (463 overall) cases were supported in May 2021. Of the supported cases 24 (5.18%) were from Syrian Urban, 421(90.93%) were from Zaatari Camp,4 (0.86%) were from Azraq Camp, 14 (3.03%) cases were from nationalities other than Syrian; Sudanese (7) (50%), Iraqi (3) (21.43%) and Yemeni (4) (28.57%). Of which 113 (24.41%) cases were provided with Investigation/Consultation services, and 350 (75.59%) cases were provided with treatment/Intervention services. • In addition to that JPS continued facilitating CFH interventions implemented directly by UNHCR in 2021, through follow-up with patients and hospitals with a total number of 1,720 cases. In May, a total of 344 cases were supported, out of which 314 (91.28%) cases were from Syrian Urban while 30 (8.72%) were from nationalities other than Syrian. All the supported cases received treatment/Intervention services" <p>JPS officially accredited as National EMT by MoH. JPS Emergency Management team (EMT) was established since 2014, participated in Supporting Gaz district at that time. JPS mobilized EMT Jordan with mobile clinic to support the civil defence.</p> <ul style="list-style-type: none"> • JPS continues to support MOH in COVID-19 response activities. Since the begning of the crisis, a team was deployed at MoH Emergency Operation Center and NCSCM for transportation of Covid-19 patients. • Supporting the hot line 111 with 50 doctors. • Supporting MOH in giving vaccines for beneficiaries. JPS doctors supported MoH in vaccinating 1000 people with first does Vaccine, including 800 in north Marka area. •

TDH Italy

NA

HI

Rehabilitation:

- For the rehabilitation platform HI and MoH are discussing the ToR for the coming 3 years, and MoH keeps distributing the National rehabilitation strategy copies to the relevant people.
- The rehabilitation intervention is ongoing for our identified beneficiaries by our partners; physiotherapist session, occupational therapy sessions and provision of assistive device.
- The capacity building plan is ongoing for our partners which includes training, case management meetings, coaching training...etc.
- At the community level, HI CBR volunteers provided basic rehabilitation intervention for our beneficiaries which the beneficiary's needs assessed by the technical people at the services provided level.
- HI's TOs are planning for conducting a technical training, rehabilitation technical topics such as stroke assessment and management training, for our partners with one training for each partner per month until end of August.

Early Detection Early Intervention (EDEI):

- EI TOs are doing regular visits with volunteers to support them while providing intervention sessions to children. Also supporting the staff in Early intervention units in MoSD centers
- ED TOs are doing regular visits to PHCs to support them and assess their needs
- We are now finalizing the EI protocol to be ready to publish it
- For the Referral pathways we printed them on Acrylic signs and now we are distributing them to the directorates in different governorates. They are starting to work on Inclusive education and now we are in preparing stage

Community health platform update :

<p>Medair/Community health platform update</p>	<p>The CHPF meeting held on the 4th of May 2021</p> <p>In this meeting,</p> <ul style="list-style-type: none"> • MOH was selected to be a co-chair for CHPF with Medair and IRC • FOR ARMs organization presented its activities • MOH announced that they are continuing the national campaign “الك وفيد” with Youth ministry and RHAS And MOH, with the support of the USAID AND RHAS), launched a new national campaign to change behaviors related to the Corona pandemic under the title "بحميهم" to encourage people to adopt preventive behaviors to protect themselves and their loved ones from contracting the virus, to limit the spread of the virus by focusing on preventive measures • The CHPF is supporting MOH in COVID19 and vaccination campaigns through disseminating the MOH key health messages among CH workers <p>Medair</p> <ul style="list-style-type: none"> • Medair is continuing their C4H projects as usual. No challenges for Syrians. Regarding non-Syrians, the community is not aware of the policy changes and here comes the role of CH. In addition, the treatment of non-Syrians in MoH is not unified and Medair is keeping an eye on this. Aligned with what UNHCR is doing, Medair is covering non-Syrians in MoH only.
<p>International Committee of the Red Cross (ICRC)</p>	<p>NA</p>
<p>Emergenza Sorrisi Doctors For Smiling Shildrn</p>	<p>NA</p>
<p>RAHAS</p>	<ul style="list-style-type: none"> • IRC is working currently on closing their clinics in Mafraq and Ramtha as they are shifting services into CASH modality. • Referred 800 patient into Farah in Ramtha and Sara in Mafraq Hospitals.

<p>IRC</p>	<ul style="list-style-type: none"> • IRC is currently working on referring 100 patients into MOH facilities. IRC is concerned that those patients did not receive medical services as MOH reported that they don't hold the updated UNHCR card. IRC will coordinate with the UNHCR focal persons in both governorates to overcome the access barriers and facilitate the referrals of refugees to MoH facilities.
<p>SAMS</p>	<ul style="list-style-type: none"> • SAMS is starting a new training session for COBs in Irbid and Amman in mental health and psychosocial support topics. • SAMS is planning to conduct a mental health trainings and workshops for MoSD and MoH staff in June • SAMS continued providing ophthalmology surgeries and interventions ; cataract, laser , Avastin injections for Syrians and Jordanians in coordination with MoH and UNHCR . • SAMS continued providing kidney transplant medications for Syrian refugees on monthly bases
<p>MSF</p>	<p>NA</p>
<p>Humani-terra</p>	<ul style="list-style-type: none"> • HTI 2021 project updates: • HTI has conducted 4 surgical missions since the beginning of this project in the 1st of April. • 2 ENT missions, 1 pediatric surgery mission and 1 pediatric orthopedic surgery mission. • Total patients operated during these missions is 85 beneficiaries. • HTI is still working on organizing dedicated missions for beneficiaries residing in camps. • HTI has been working on providing training for the Medical staff at the MoH hospitals in means of providing training courses to Pediatric surgeons and staff nurses.
<p>La Chaîne de l'Espoir (CDE)</p>	<p>La Chaîne de l'Espoir (CDE) planning to conduct two international surgical missions during next month June 2021,</p> <p>The first one will be Open-heart Surgeries and interventional catheterism for children suffering from Cardiac Congenital Anomalies in 14th of June. The second one will be Orthopedic Surgeries for children suffering from Orthopedic Congenital Anomalies in the upper limbs especially obstetric brachial plexus palsy. in 19th of June.</p> <p>Eligibility criteria for the surgical services are as follows:</p>

1. Be a refugee (registered or unregistered) or vulnerable Jordanian residing within the Kingdom of Jordan.
2. Are unable to afford the services required to resolve the identified condition requiring surgery.
3. Are under the age of 18 years.
4. Have one or more of the following pathologies (non-exhaustive list):

1-CARDIAC:

- Atrial Septal Defect ASD
- Ventricular Septal Defect VSD
- Tetralogy of Fallot; TOF
- Patent Ductus Arteriosus PDA
- Pulmonary Stenosis PS

Aortic and Pulmonary Valves Problems for Cardiac cases, the beneficiaries' weight should generally be above 10 kilograms (but this is not a strict requirement), and cases were declined because of weight can be added to the waiting list for following missions.

2-Orthopedic(Upper limbs)

- Malformations and deformities of the upper limb (such as polydactylies, syndactylies)
- Obstetric Brachial plexus injury (Erb`s palsy)
- War injuries and complications of fractures of the limbs (from accidents)
- Orthopaedic complications of paralytic diseases (tendon transfer, tendon lengthening, tenotomies, etc....)

For Orthopedic cases surgeries related to scoliosis, spinal bifida, serious cerebral palsy, and other spinal-related injuries are generally excluded.

- For both interventions there cannot be a factor of complications
- Cases for consultation can be accepted even if the diagnosis is suspected, but not yet confirmed
- Final decisions on surgeries are up to the performing surgeon and not the hospital, agencies or beneficiaries. Beneficiaries may decline surgery but cannot insist on it.

	<p>You can refer the cases to Dr. Rasheed email: Mohammad Rasheed <cm.jordan@chainedelespoir.org> with the following details,</p> <ol style="list-style-type: none"> 1- patient`s name 2- age 3- Nationality 4- residency city 5- (2) phone numbers 6- medical report if available or the main complain
Action points	

7. AOB	
ActivityInfo	<p>Samira from IACU encouraged partner to report on PALN and Monitoring data as the monitoring data is still open and will be closing soon. Data is very important for multi purposes including producing regional repots and to report on the FTS gaps and advocate for underfunding projects.</p>
Action Points Recommendations	
Next Meeting	24th June 2021 from 10:30-12:30