

| Agenda | Discussion/Update | Action/ Follow-up |
|-------------------------------------|--|--|
| <p>Health Sector Updates</p> | <p>Cluster Coordination Performance Monitoring (CCPM)</p> <ul style="list-style-type: none"> Data collection for the Cluster Coordination Performance Monitoring (CCPM) has been completed. 28 out of 35 partners completed the survey meeting the effective response rate of 80%. Health Sector is currently working on the preliminary results of the survey and will be summarizing all the feedback, observations, and comments into a report to present to SAG. On the 18th of January 2023 the health sector coordination meeting will focus on discussing the findings and recommendations of the CCPM survey A coordination action plan will be developed thereafter. <p>GHC COVID-19 Coordination study</p> <ul style="list-style-type: none"> The GHC team is compiling the preliminary report A validation workshop is planned for 23rd January where they will present their observations and findings on the coordination of the COVID-19 response At the operational level, recommendations that come from this study will be useful to fine-tune the way that we respond to the pandemic in the local context. <p>SAG membership 2023</p> <ul style="list-style-type: none"> The Health Sector expressed its gratitude to the SAG 2022 member for their incredible support and excellent effort and contribution to the sector. Many things were accomplished in 2022 with the SAG members' direct contribution, e.g., the rationalization exercise, funding analysis, Referral SOP, the Health Card, JRP 2023, etc. Informed partners of SAG Membership rotation for 2023. See attached ToR, SAG membership criteria There are 13 SAG members, among them, 7 are permanent (5 UN, MoHFW, RHU/RRRC) and 6 are rotational. Partners are to apply for the rotational positions observer (2 positions), NNGOs (2 positions), and INGOs (2 positions). The call for application is 8th -15th Jan 2023, submit EOI to coord_cxb@who.int SAG permanent members to vet applications (tentative timeline 25th Jan 2023). <p>ISCG 3W reporting:</p> <ul style="list-style-type: none"> Every 3 months, ISCG collects the 3W (WHO does WHAT, WHERE) To simplify the 3W data collection, the sector has developed the 3W -available in this link: Health Sector 3W Data collection tool (humanitarianresponse.info) and will later be integrated with the regular health sector monthly 4W reporting tool to reduce the reporting burden. | <ul style="list-style-type: none"> Health Sector to present and discuss CCPM survey results and report to the health sector partners on 18th Jan 2023. Health sector to share the SAG membership application form with partners and partners to submit their EOI using the application form to coord_cxb@who.int. Partners to report the 3W data for the last quarter (Oct-Dec 2022) using the new 3W reporting tool. |
| <p>Working Group Updates</p> | <p>Epidemiology WG:</p> <p>COVID-19 Update</p> <ul style="list-style-type: none"> In the Rohingya population, Transmission is almost under control (declining testing as caseload heads to 0.5). For the Host population also, declined trends of cases were observed having low weekly testing and no case reported in the last five weeks. New variant of COVID-19 and Global Epi Situation: In the last 28 days (21 Nov – 18 Dec), over 13.7 million cases and over 40 000 new fatalities were reported globally – a 36% increase and 2% decline, respectively, compared to the previous 28 days. BF.7 is a sublineage of the Omicron BA.5 subvariant, and WHO is tracking it closely. The current sublineages are similar to other Omicron variants (highly transmissible but less severe than the Delta variant, and is able to escape built-up immunity), at the moment WHO doesn't advise any change in the public health | |

response to deal with this specific variant.

- Bangladesh govt. is also observing the situation closely, Health Alert Notice was imposed enhancing Health Screening at POE to prevent new variants of Corona infection.

Cholera Update:

- 02 new confirmed Cholera cases and one RDT Positive AWD case/Cholera suspect are reported in week 44.
- The total Cholera cases now stand at 61 (FDMN-47 cases, Host-14 cases) in 2022.
- So far there are 160 cholera cases reported (99 RDT Confirmed AWD cases/Cholera suspects, and 61 Cholera confirmed cases) in both FDMN and host population in 2022.

Dengue Update:

- Overall level of infection continues to decline in the past 17 weeks and transmission significantly reduced as weekly cases continue to drop.

Diphtheria Update:

- Nine (9) suspected cases were reported this Epi week; No RT-PCR Rapid Test was being done due to a shortage of kits. 431 cases (46 confirmed including 2 deaths, 32 probable, and 353 suspected cases) have so far been reported in 2022.
- 2nd round of the Penta and Td vaccination campaign is planned to be started on 10th January 2023.

Scabies Update:

- Community-based surveillance has been reactivated to get community prevalence and better information.
- MDA plans (3 rounds 3 months apart until the transmission is below 2%) were proposed but to be discussed further
- SRH WG expressed its concern to improve access to scabies treatment for adolescents and women who may seek services at other centers such as WFS.

Achievements and Milestones for 2022

- Key Achievements and Milestones of the Epi, Case Management, and IPC WG for the year 2022 were briefed that includes EWARS, sentinel, and other relevant surveillance systems, to aid timely detection and containment of various disease upsurges, Multi-Sectoral AWD/Cholera preparedness and response plan 2022/23, Expansion of AWD/Cholera sentinel surveillance sites, technical protocols for Dengue Fever, Diphtheria Surveillance and Comprehensive Integrated Contact Tracing SOP, integration of EWARS (FDMN) Dashboard with DHIS 2 by MIS-DGHS, etc.

Community Health WG:

- CHWs reporting compliance recorded as 98% in 2022 which was 96% in 2021.
- Household coverage on Enhanced Community-Based Surveillance is observed on average at 86% per week in 2022, whereas in 2021 it was 80% per week.
- 75% of Facility-based Deliveries were recorded by the CHWs in 2022 which was 70% in 2021.
- Trend of skin diseases reported increasing, especially in Teknaf camps, Camp 26 reported the highest cases. CHWs are continuing key message dissemination on skin disease prevention, active case surveillance, and referral.

SRH WG:

- SRH working group has presented the Family Planning Strategy for Rohingya Refugees 2022-2025 along with the objectives.
- The Segregated implementation of Imprest Fund program for LARC acceptors was raised as a concern that hinges on compromising voluntariness.
- There were several concerns on the proposed Rohingya refugee program.

MHPSS WG: noted that HI/Mukti's tenure as MHPSS WG has ended. Discussions are underway on new structures for 2023.

Bilateral discussion between the Epi WG and SRH WG regarding the integration of some components with SRH and the possibility of managing scabies cases in WFS to treat adolescent and women.

- Health sector to bilaterally sit with SRH WG to discuss about the family planning strategy and share feedback.