## In-Person Health Sector Coordination Meeting

**Meeting Notes**

**Date:** 15/02/2023

<table>
<thead>
<tr>
<th>Agenda</th>
<th>Discussion/Update</th>
<th>Action/ Follow-up</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health Sector Updates</strong></td>
<td><strong>Funding Analysis</strong>&lt;br&gt;- The deadline for submitting the funding data for JRP 2022 and 2023 to ISCG: 13 February 2023. A thank you note for those appealing partners who have reported&lt;br&gt;- Urged the remaining partners to submit as soon as possible.&lt;br&gt;- based on the ISCG decision, this round of funding analysis exempts non-JRP partners&lt;br&gt;- The Health Sector will continue to advocate including collecting Non-JRP partners in the future to ensure a comprehensive assessment of the whole response resource</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Scabies Prevalence Survey</strong>&lt;br&gt;- The health sector is planning a survey to estimate the Community Prevalence of Scabies Infestation among Rohingya Refugees in response to the current situation of scabies in camps.&lt;br&gt;- The background, objective, justification, and methodology have been presented briefly to the partners. The main objective is to determine the community prevalence of scabies among the Rohingya refugees in Cox’s Bazar, Bangladesh to provide a crucial piece of evidence for the decision on the Mass Drug Administration&lt;br&gt;- So far, 2750 individuals are planned to be randomly sampled at the household/shelter level.&lt;br&gt;- Data collectors (Doctors, Nurses, and Medical Assistants) nominated by the partners. The training for the data collection is planned for 19th and 20th February 2023. Partners are requested to send their nominated staff to the training.&lt;br&gt;- The CHWG will support the health sector to coordinate with the UNHCR registration team to sample shelters ahead of data collection.</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Health Sector Response Monitoring Analysis 2022</strong>&lt;br&gt;- The health sector’s information management unit presented the health sector’s overall response performance in 2022 based on the data from 4W, DHIS-2, EWARS, and different working groups.&lt;br&gt;- In 2022 total OPD consultations were recorded at 5.5 million with a utilization rate of 3.81/person (baseline was 2.1), In-Patient admissions were recorded at 92659, referrals to govt. hospitals were 6794, a total 34956 of births were conducted. For Rohingya, 75% of deliveries were facility based. Skin diseases, Acute Respiratory Tract Infections, NCD (Hypertension, Diabetes), and acute watery diarrhea, were some of the most common causes of morbidity.&lt;br&gt;- The health sector reminded partners to report in the 4W and other relevant tools timely so that their contribution to the response can be projected and analyzed. Health Sector will be following partners who are not reporting individually.</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>SRH WG:</strong>&lt;br&gt;- SRH WG has formed a task community to look into neo-natal health, especially in camp 11. The task committee is chaired by UNICEF and the membership involved UNFPA, WHO, UNHCR, IOM, IRC, SCI, MSF, Hope Foundation, etc. They will look to ensure newborn health to reduce neonatal deaths.&lt;br&gt;- The Family planning is going to be launched on 16th February 2023 with the leadership of MoHFW.</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Epidemiology WG:</strong>&lt;br&gt;- Varicella becomes a concern with a rising trend of cases detected in the past three weeks with a 46% increase (1255) this week compared to last week (852).&lt;br&gt;- <strong>COVID-19</strong>&lt;br&gt;- In FDMN/Rohingya refugees, only one case was reported in the last 5 weeks and for the host population in the last 11 weeks, there are no cases reported.</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Dengue Fever</strong></td>
<td></td>
</tr>
</tbody>
</table>
• There is a minimal increase in weekly confirmed cases by 31% from 63 cases reported this week compared to the previous week (48 cases)
• Total caseloads are 273 with zero fatalities reported so far
• Most reported cases are in camp 3 and surrounding camps

**Cholera**
• One suspected Cholera case was reported this week
• 11 cases (5 Cultured confirmed and 6 RDT Positive AWD cases/Cholera suspects) reported in 2023
• All 05 culture-confirmed Cholera cases were reported from the host population with a new cluster of three cases in one household

**Diphtheria**
• Six (06) suspected cases were reported this Epi week bringing the cumulative total to 48 cases (two probable and 46 suspects) in 2023

**CHWG:**

**Scabies surveillance:** The trend of Scabies continues to increase at the community level, and CHWs are disseminating messages at the household level.

**MHPSS WG:**
• MHPSS WG shared the revised MHPSS 4Ws service mapping template with MHPSS WG actors for their input. The mapping exercises are planned to be completed by the end of February 2023.
• MHPSS indicator has been incorporated into the existing health sector 4W reporting format.
• The WG shared their next two months’ work plan with the partners that include but is not limited to encouraging technical exchange among the WG partners, closely exploring and harmonizing the volunteers’ training package, forming taskforces to look into the methods/tools used in 1:1 focused support, MHPSS workforce (minimum requirements and capacity for each role), MHPSS curricula for children and adolescents, etc.

**Next Meeting:** Tentative Date- 1st March 2023, Tentative Time- 10:30 am- 12:30 pm **Location:** TBA