

# Health Sector Coordination Meeting

Meeting Notes

Date: 31/01/2024



Agenda	Discussion/Update	Action/ Follow-up
<p><b>General Updates, announcements, follow up from last meeting.</b></p>	<ul style="list-style-type: none"> <li>• <b>Health Sector Coordination Meeting frequency:</b> As the emergency response is in its 6 years and has become protracted, situation is relatively stable, the Health Sector put the proposal of having one coordination meeting once a month, noting that the option for ad-hoc meeting in case of the acute event is always available. The ultimate decision should come from the active sector partners.</li> <li>• <b>SAG membership EOI for 1 National NGO:</b> The Deadline for submission has been extended to COB Monday 5th February 2024.</li> <li>• <b>MPEHS Staffing Norm (Minimum staff requirement to run a Health Facility):</b> SAG finalized the pending HR requirements, will be forwarded to the govt. authorities for their concurrence and input.</li> <li>• <b>Impact of the General Health Card:</b> The impact of the General Health Card should be measured for the Rohingya and Host separately as only Rohingya people received the card. After the launch of the card in August 2023, the average OPD consultation number for Rohingya people per month dropped by around 12%, whereas the consultation number for the Host population increased by around 11% compared to the same period.</li> <li>• <b>Launch of the Activity Info for the 4W reporting:</b> “Activity Info” has been launched for the 4Ws reporting. The Health Sector started to give partners access.</li> <li>• <b>Cluster Coordination Performance Monitoring (CCPM):</b> The deadline for submission is 16 February 2024.</li> <li>• <b>Health Sector Partners Membership:</b> for SAG for finalization</li> </ul>	<p>The Health Sector to send the email with the poll link to the partner’s coordination focal to cast the vote.</p> <p>Interested National NGOs to apply for the SAG membership in response to the EOI within the Deadline.</p> <p>Partners to share email for the “Activity Info” access.</p> <p>CCPM survey 16 FEB dateline, one per organization.</p>
<p><b>Routine Immunization and VPD surveillance updates</b></p>	<ul style="list-style-type: none"> <li>• Though the Administrative data (DHIS-2) showed lower vaccination coverage in 2023 compared to the previous years, the WHO Concurrent House-to-House Monitoring showed significant improvement. Most importantly, the gap between Concurrent monitoring and administrative data has been decreased which is a sign of improvement in terms of service delivery and data quality.</li> <li>• Dropout children enlisting and catch-up vaccination is ongoing in camp to camp-to-camp rollout approach, dropout from 6 camps have been enlisted so far, around 30% of dropouts have been observed, and catch-up vaccination has been done in two of the camps-2W &amp; 6 covering 55% and 86% of the dropout children respectively.</li> <li>• Though the nationwide vaccine shortage continues, currently vaccines are available for the Rohingya population.</li> <li>• All the AFP and VPD surveillance indicators were fulfilled in 2023 including the timeliness and completeness, no outbreak detected.</li> <li>• COVID-19 vaccination for UN and NGOs international staff: Govt. is enlisting UN and NGOs international staff for COVID-19 vaccination, those who are interested are required to share their details through their organization to the Govt. as well as the Health Sector.</li> </ul>	<p>WHO-IVD team to provide Routine Immunization and VPD Surveillance updates to the Health Sector Coordination meeting more frequently, monthly updates to be considered.</p> <p>Partners to share their international staff list who are interested in taking COVID-19 vaccine booster shots.</p>
<p><b>Working Group Updates</b></p>	<p><b>Epidemiology WG:</b></p> <ul style="list-style-type: none"> <li>• <b>Dengue Outbreak:</b> 163 cases detected so far with no deaths (CFR-0.0%) in 2024. The top three camps Leading with dengue cases account for ~37% of cases: Camp 17 (30 cases), Nayapara RC (16 cases), and Camp 24 (15 cases).</li> <li>• <b>COVID-19 updates:</b> There is an increase in COVID-19 infection in</li> </ul>	

	<p>Rohingya Refugee Camps with 13 new confirmed cases (TPR- 12.1%) and in the host population with 3 new cases (33.3%) in this Epi week, no deaths reported. Looking at the broader picture the current transmission is still minimal/lowest compared to the upsurges in the past 4 years.</p> <ul style="list-style-type: none"> <li>• <b>Cholera updates:</b> Lack of Culture detection services since 31 August 2023 –WHO working with IEDCR to revitalize testing at Cox’s Bazar lab.</li> <li>• <b>Diphtheria updates:</b> So far in 2024, 17 cases have been reported, of which 14 suspected cases, 2 probable, and 1 was confirmed.</li> <li>• <b>Mass Drug Administration to control Scabies in Bhasan Char:</b> <ul style="list-style-type: none"> <li>- 1<sup>st</sup> Dose - 104% (32,006 persons reached)</li> <li>- 2<sup>nd</sup> Dose – Day 2- 56% (cumulative)</li> </ul> </li> </ul> <p><b>Community Healthcare workers WG:</b></p> <ul style="list-style-type: none"> <li>• The CHWG co-chair election will happen in February, details will be shared in the next meeting.</li> <li>• CHW core package training rollout is ongoing in all camps, over 200 CHW supervisors trained so far.</li> </ul> <p><b>Sexual and Reproductive Health (SRH) WG:</b></p> <p><b>MPMSR updates:</b></p> <ul style="list-style-type: none"> <li>• Number of maternal deaths in 2024 (as of 28th Jan): 4 (community death: 0, Facility death: 4)</li> <li>• Perinatal death: 14 (Fresh stillbirth: 4, Macerated stillbirth: 3, Early neonatal: 7).</li> <li>• A feedback mechanism has been initiated this year following the death audit to the respective facility &amp; partner to ensure quality SRH services &amp; reduce maternal morbidity, and avoidable mortality.</li> </ul> <p><b>Maternal and Child Health Card piloting</b></p> <ul style="list-style-type: none"> <li>• Pilot implementation started in 14 health facilities by 5 agencies- UNFPA, UNHCR, UNICEF, SCI and IOM</li> </ul> <p><b>Supportive Supervision &amp; Joint Monitoring</b></p> <ul style="list-style-type: none"> <li>• One-day consultative workshop done to develop context-specific Supportive Supervision Checklist for Cox's Bazar. Components, methodology, and timeline shared.</li> </ul> <p><b>MHPSS WG</b></p> <ul style="list-style-type: none"> <li>• MHPSS WG is updating MHPSS service mapping. Agencies who have MHPSS components are requested to share their service info with MHPSS WG through AI.</li> </ul>	
A.O.B	<ul style="list-style-type: none"> <li>• Request came from the partners to present other Diseases, and service delivery updates such as TB, HIV etc. more often in the Health Sector Coordination meeting and the Health Sector Agreed.</li> </ul>	TB updates to be presented in the next Health Sector Coordination Meeting.

**Next Meeting:** Tentative Date- 14 Feb 2024, Time- 10:30 am- 12:30 pm

**Location:** TBC