



Health Cluster Meeting Minutes

Thursday 20th December, 2018

Focus: emergency preparedness

Meeting Called by	Sara Halimah, Health Cluster Coordinator, WHO
Type of Meeting	General Health Cluster meeting
Facilitators	Sara Halimah, WHO (chair) & Maria Al Aqra, MoH (co-chair)
Venue	MoH Building, Ramallah
Agencies present	Palestinian Medical Relief Society (PMRS), The United Nations Relief and Works Agency for Palestine Refugees (UNRWA), Humanity & Inclusion (HI), CARE International, The United Nations Office for the Coordination of Humanitarian Affairs (OCHA), MoH representatives of Primary Health Care (PHC) & Central Medical Stores (CMS), Italian NGO DI-SVI, The United Nations Children's Fund (UNICEF), MEDICO International, Health Work Committees HWC, Italian Cooperation (CISP), Médecins du Monde (MDM France), Médecins Sans Frontières (MSF Spain), The United Nations Population Fund (UNFPA), The United States Agency for International Development (USAID), Physicians for Human Rights I, National Science Foundation (NSF France), Medecins du Monde-Switzerland (MDM-CH), Ministry of Social Development (MOSD), Palestinian Red Crescent Society (PRCS).

30 mins	Agenda item 2. Health Humanitarian Update	-MoH: Dr Hamdi Nabulsi, Director of MoH hospitals in WB. -WHO Advocacy team. -Health Cluster Partners.
Discussion	MoH health Humanitarian updates in West Bank	
<ul style="list-style-type: none"> Updates about the recent casualties and martyrs in West Bank and Gaza since 9 December 2018: <p>There has been an escalation of violence in the West Bank since 9 December. Several attacks have been carried out by Israelis and Palestinians. Israel substantially increased the number of its ad-hoc checkpoints, tightening control of Palestinian movement, including movement of vehicles, across the West Bank.</p> <ul style="list-style-type: none"> - Casualties: From the 4 to the 17 December, six Palestinians have been killed and 454 Palestinians have been injured, according to the Ministry of Health; out of the six killed. From the total 454 injured, 83 people were referred to hospitals across the West Bank. - According to Palestinian Red Crescent Society (PRCS), Palestinian Medical Relief Society (PMRS), Union of Health Workers Committee (UHCWC) and a private ambulance provider, there were at least 11 incidents of attacks on health care in the West Bank. 9 incidents affected ambulances; of these, 5 involved the use of weapons against ambulances, of which one incident involved the stoning of an ambulance by Israeli settlers. In a further four incidents, ambulances were delayed access. Additionally, there were a further two attacks 		

by settlers against an MoH clinic and an MoH vehicle transporting health staff – the latter resulting in the injury of an MoH.

- Mental Health morbidity: MoH still has challenges to identify and quantify mental health casualties in emergency cases.

- **Updates from the Public Health Department:**

- The representative raised serious concerns over the shortages in vaccines. The current delays caused by Israeli regulations and bureaucratic procedures, means that vaccines will soon run out in the oPt. And if available, it takes long time to be approved by the Israeli authorities in order to enter Gaza.

- MoH needs H1N1 diagnoses kits in Gaza.

- **Right to Health:** WHO / Advocacy team updates on health attacks in West Bank from 4 to 17

December:

- According to provisional data reported to WHO by MoH, PRCS, PMRS, UHWC and a private ambulance provider, there were at least 11 incidents of attacks on health care in the West Bank from 4th to 17th December. 9 incidents affected ambulances. Of these, 5 involved the use of weapons against ambulances, of which one incident involved the stoning of an ambulance by Israeli settlers. In a further 4 incidents, ambulances were delayed access. Additionally, there were a further two attacks by settlers against an MoH clinic and an MoH vehicle transporting health staff – the latter resulting in the injury of an MoH member of staff.

- Cumulative figures for attacks against healthcare in the West Bank: From 1st January to 31st December, there were 60 incidents of attacks against healthcare in the West Bank reported to WHO.

- Health advocacy strategy:

Through the discussion on health attacks, WHO advocacy officer discussed with health partners about the unique barriers to achieving the right to health in the occupied Palestinian territory and the potential benefits of collaborative advocacy to address these barriers. Participants discussed the potential benefits of such an approach, and many agreed on the importance of health advocacy to address issues that are encountered collectively by health partners.

- **Mobile health clinics/ teams:**

- **Support to Khan Al Ahmer mobile clinic: Health Cluster & MoH share list of needs for equipment**

- PMRS and MAP-UK have offered to help Khan Al Ahmer community by providing number of health equipment's and supplies.

- **Massafer Yatta:**

- There is a lack of health services in Massafer Yatta, where no one of the mobile medical teams are currently visiting and providing health services there and MoH is just providing vaccine services to the communities there.

Action items	Person/organization responsible	Deadline
- Health Cluster to arrange a meeting between PMRS, UNFPA, Physicians for Human Rights (I) & MoH to discuss the way to provide better health services to the communities in Massafer Yatta	Health Cluster Coordinator, Sara with the MoH	January

- MoH to send Health Cluster the list of Health supplies needed for Khan Al Ahmer.	MoH	ASAP
--	-----	------

I Hour	Agenda item 3. Emergency preparedness in the West Bank	Health Cluster, Sara Health Cluster Partners. MoH
--------	--	--

Discussion	Brainstorming the scenarios, and identifying the minimum actions for preparedness in the West Bank
------------	---

- MoH: According to the Director of hospitals, MoH has developed a contingency plan for all the Hospital, in West Bank but the real challenge now is to update this plan and to be adopted by all hospitals. Partners suggested that first step is to have a risk analysis in WB followed by preparedness and contingency plans. where MoH will list the most vulnerable communities to be focused on, in producing the emergency preparedness plan.
- Health Cluster will work closely with MoH and Partners for preparing these emergency plans. Also, Health Cluster will allocate a budget to emergency procurements' supplies and drugs.
- MoH stressed their concerns on the Israeli restrictions on medicine access to WB and Gaza, and the shortage of many essential drugs.
- WB is a far more complex scenario than Gaza as Israeli's can cut off entire communities, cities, governorates. MoH with WHO to allocate geographically the resilience from previous incident data. In order to include them in the preparedness plan.
- In order to support the emergency intervention, PRCS suggested to provide training to Health providers and pre-hospital involvements.

Conclusions	
-------------	--

- MoH and partners to create together the emergency capacity plan & emergency preparedness measures.
- In coordination with WHO, MoH to have strategic key messages to advocate for the current medicines shortage and the constraints from the Israeli authorities on medicine access to oPt.
- MoH to share with Partners WB vulnerable communities list. Also, to clarify their criteria and the index of choosing the vulnerable communities.

Action items	Person/organization responsible	Deadline
- MoH to update Health Cluster on the needed drugs and medical equipment. In order to improve service delivery and encourage more targeted interventions.	- MoH	ASAP
- More Involvement Health Cluster to have a strategic advocacy planning.	Health Cluster	

- WHO Advocacy to send the previous reported Israeli violence incidents and their geographic locations.	- WHO Advocacy team.	
---	----------------------	--

30 mins	Agenda item 4. Partner Updates (10 mins)	Health Cluster Partners.
<ul style="list-style-type: none"> • PRCS provided an update on the recent attacks on ambulances. Focusing on area H2 in Hebron, where Israeli forces prevented PRCS ambulances to enter that area to transfer patients to hospital. • Health Work Committees discussed their obstacle of issuing any report related to the Israeli violence incident in H2 area in Hebron, and the need to have clear information to the community there on how is important to report any such incident. 		
Conclusions		
<ul style="list-style-type: none"> • PRCS is planning to set up a health clinic in H2 area, in coordination with ICRC. 		

For further information please contact:

Sara Halimah
Health Cluster Coordinator
 WHO
Halimahs@who.int
 T: 0097 547179038

Noor Said
Information Management Officer
 WHO
nsaid@who.int
 T: 0097 547179043