

Meeting Summary	
Meeting Purpose	Trauma Working Group situational update
Date and Time of Meeting	Thursday, August 19th, 2021 @11am
Meeting Organizers	WHO - Thanos GARGAVANIS
Meeting Notes Taken By	WHO - Reem Makhoul

Attendance at Meeting:	
<ul style="list-style-type: none"> <li>- WHO Gaza</li> <li>- MOH – ICD – EMTCC (Riham Shhada)</li> </ul>	<ul style="list-style-type: none"> <li>- MDM – Spain (Dr Ihab Saleh)</li> <li>- MSF- Fr (Dr Mohamed Abu Mghasaib)</li> <li>- MSF Belgium (Dr Rachele SEGUIN)</li> <li>- UNRWA Physio &amp; Rehab (Ibtisam Saqer)</li> </ul>

Points to discuss:
<ul style="list-style-type: none"> <li>- Partners’ situational update.</li> <li>- Trauma Indicators</li> <li>- AOB</li> </ul>

**RECORDING OF MEETING:**

[https://worldhealthorg-my.sharepoint.com/:v:/g/personal/gargavanisa\\_who\\_int/EaOpyOMkpaJNqnRROhWkld8Bm2eOf3kQIB5MIGeaB5\\_77g](https://worldhealthorg-my.sharepoint.com/:v:/g/personal/gargavanisa_who_int/EaOpyOMkpaJNqnRROhWkld8Bm2eOf3kQIB5MIGeaB5_77g)

	Issues Discussed	Follow-Up Action and Questions
<b>Welcome</b>	<p><b>Thanos (WHO):</b> been a while since we had a TWG, the last one was in May, during the escalation days.</p> <p>WHO continues supporting all Trauma activities for MoH and PCRS.</p> <p>We are proud to say that during the May escalation WHO and all Trauma stakeholders showed collaboration, we all supported successfully OMoH strategy and strategic planning</p>	

<p style="text-align: center;"><b>MoH</b></p>	<p><b>Riham (EMT CC MoH):</b> Great to see you all again.</p> <ul style="list-style-type: none"> <li>- Foreign Medical missions: We are facing challenges in ensuring medical missions enter Gaza due to COVID-19 restrictions. Last months, we received few medical missions. There was one mission for the LRC, in Nasser Med Complex led by MAP UK and IDEALS.</li> <li>- Regarding the LRC, MoH has decided to enhance the coordination and support to the LRC unit by working close with partners that are able to provide specialised medical equipment.</li> <li>- next month MoH will receive another mission for the LRC, by MDM-Spain.</li> <li>- ED level: Last month we received a Canadian mission. Starting October, we will receive each month two specialised doctors from Canada to train our staff and review the curriculum.</li> <li>- Emergency training has been conducted to different ED doctors and nurses. We are running different courses with ICRC for Trauma treatment. Targeting different doctors, nurses, surgeons.</li> <li>- We received another mission from PAMA (Palestinian Medical American Association)</li> <li>- EMTs: Storage spaces are in process of finalisation, and we expect the two national EMTs to be ready to be deployed at any trauma event. In case of any kind of emergency event, we can mobilise these resources and deal with the situation.</li> </ul>	<p><b>Thanos (WHO):</b> WHO will be able to help with any case of disaster. Lessons learned from recent conflict: we can use EMTs to support.</p> <p><b>Riham (EMT CC MoH):</b> we are receiving access requests from different partners, if any kind of help from WHO to help MoH, we have many requests for medical missions to build long-term programmes with our doctors. Could we find ways to solve problem of access? Even from Raffah access is sometimes problematic.</p> <p><b>Thanos (WHO):</b> not in a position to answer this. I can address the issue by highlighting it to different partners. COVID-19 is always here. We have to adapt to this situation. We are facing the same obstacles in WHO, regarding our missions. We are here to support MoH strategic planning.</p> <p><b>Husam (WHO):</b> any official update about the declaration of re-initiation of the protests next to the Israeli fence?</p> <p><b>Riham (EMT CC MoH):</b> MoH has no statement of official comment on this event. Decisions for this come from higher levels than MoH.</p>
<p style="text-align: center;"><b>MSF –Fr (Deputy Medical Coordinator)</b></p>	<p><b>Abu Abed (MSF F):</b></p> <ul style="list-style-type: none"> <li>- the area which was totally damaged during the May 2021 escalation was the sterilisation unit.</li> <li>- We are on the final stages of rehabilitation of the clinic. We moved the steralisation unit to the second floor. The place that was bombed will be a fully operational room soon.</li> <li>- The clinic is now functioning 100%.</li> <li>- MSF has a contingency plan that is updated regularly. This includes different scenarios, one of them is a military operation against Gaza. The clinics were not able during the</li> </ul>	<p><b>Thanos:</b> WHO invests in cooperating effectively with partners.</p> <p><b>Ahmed Abuteir (WHO):</b> How is the lab in the LRC? Are there any problems. And how about COVID-19 cases?</p> <p><b>Abu Abed (MSF F):</b> our osteomyelitis treatment unit started offering hospitalisation for COVID 19 patients, we were asked to admit some cases in the beginning of the Gaza community outbreak, a year ago. Last year MoH took over a part of our unit. With the current COVID-19 situation, we estimate that they will manage. We are following strict IPC restrictions in all our</p>

	<p>last escalation, so we will try to discuss what we will do in case of a future escalation.</p> <ul style="list-style-type: none"> <li>- In the first 24 hours we donated drugs and consumables to MoH.</li> <li>- Out osteomyelitis unit had 5 patients during the escalation, and the team was working on 24 hrs shifts. We adapted our roster according to the needs.</li> <li>- Incoming specialists: We matched some profiles to enter Gaza but it was difficult to bring even surgical teams during the 11-days war.</li> <li>- Our collaboration with LRC and WHO and MoH: There are different pathways and cooperation. This is really working very smoothly. From the beginning of this year we managed to coordinate and work together so far for 16 patients in the lab (came from LRC), several consultations, 4 cases were referred from MSF to LRC, and one case was transferred from LRC to the osteo unit.</li> </ul>	<p>premisses. All patients admitted (elective cases) we do PCR for all patients; we send the PCR to the PMRS. We have an agreement with them. We have the results after 5 hours. If negative: we admit them, if not, then we do not admit them.</p> <p>The LRC lab is running very well. We have 200 samples per month. We have 4 staff working in the lab (technicians). We have staff from MoH as well. The collaboration is well. Consumables and material are coming through MSF. We cover all these parts.</p> <p><b>Thanos (WHO):</b> thanks to your efforts and work we have a fully operational lab in LRC.</p>
<p><b>MDM-Spain</b></p>	<p><b>Thanos (WHO) :</b> We are aware that you have a plan in case of an escalation. What is the current situational update from your part?</p> <p><b>Ihab (MDM Sp):</b></p> <ul style="list-style-type: none"> <li>- We want to highlight Riham's point, medical missions coming in Gaza.</li> <li>- We have budget for procurement for LRC equipment and supplies.</li> <li>- We are exploring training programs.</li> <li>- We are doing mapping of services in Gaza and needs. We came across Gaza's strategic health plan made by MoH and supported by WHO. Will contact you about this. We are trying to shift to sustainable medical training.</li> </ul>	<p><b>Hazem (WHO):</b> Can you share with us the list of planned procurements to the LRC? We are trying to put a list of needs for MoH for the coming 6 months and want to avoid duplication. For MoH: Any feedback, regarding the exact # of patients needing advanced LR service?</p> <p><b>Ihab (MDM Sp):</b> [connection lost]</p> <p><b>Riham (EMT CC MoH):</b> Regarding the number of patients in need of LR, we will be cross-checking and we will be coming back to all of you soon.</p>
<p><b>WHO Trauma Indicators</b></p>	<p><b>Thanos (WHO):</b> We are working with MoH to standardise the indicators of Trauma. We received feedback from MSF France and MSF Belgium. We will share with you for comments and proposals when finalised, for another series of comments and propositions.</p>	

<p><b>MSF Belgium</b></p>	<p><b>Rachelle SEGUIN (MSF B):</b></p> <ul style="list-style-type: none"> <li>- During the May escalation we were able to maintain our activities in the hospital. Our staff continued to go to the hospital.</li> <li>- So far, we have done 137 interventions for the escalation patients.</li> <li>- Pre-positioning equipment in Al-Awda can make us better prepared in case something like this happens again.</li> <li>- We did major donations during the conflict. Drugs and materials for different MoH hospitals.</li> <li>- COVID: we continued to do Facebook campaign, renewed it because of the impact and participating from people in Gaza, encouraging people to get vaccinated. We have been active in different hospitals to get people vaccinated.</li> </ul>	<p><b>Thanos (WHO):</b> Thank you for highlighting it, pre-positioning supplies to health facilities is very important part of preparedness planning.</p>
<p><b>UNRWA</b></p>	<p><b>Ibtisam:</b></p> <ul style="list-style-type: none"> <li>- Physiotherapy activities are ongoing,</li> <li>- COVID: at UNRWA we reached 100 persons vaccinated at UNRWA health centres [by the day of the TWG]</li> </ul>	