

Meeting Summary	LR TWG Partners meeting
Meeting Purpose	Situational update, progress and challenges regarding Limb Reconstruction activities
Date and Time of Meeting	28.09.2021, 1300hrs
Meeting Organizers	WHO T&E care programme
Meeting Notes Taken By	Thanos GARGAVANIS
Next Meeting	

Attendance at Meeting:	
1. MSF F Mohammed Abu Mughaisib	10. HI Reham Shaheen
2. MSF F Audrey Laudhaun	11. WHO Ahmed Abouteir
3. MSF F Jose Pagawgan	12. WHO Husam Abuolwan
4. PUI Hazem Almadhoun (over Teams)	13. WHO Mohammed Yaghi
5. MSF B Rachele Seguin	14. WHO Asmaa ElNajar
6. MSF B Ola Ziara	15. WHO Hazim Khwais (over Teams)
7. MAP UK Mahmoud Shalabi (Over Teams)	16. WHO Reem Makhoul (over Teams)
8. MAP UK Mohammed Aghalkurdi	17. WHO Thanos Gargavanis
9. MDM Sp Ihab Saleh	

Points to discuss:
– Situational update
– Challenges regarding LR projects that are to be discussed with MoH
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Issues Discussed

Follow-Up Action

WHO Team	Short presentation of the LRC activities	
All partners' discussion	<p>Data sharing among LR actors:</p> <p>Until now, partners have not obtained MoH permission to share patients' data among themselves. MAP UK and MSF F have reached a point of agreement regarding sharing patients' information, but the permission was never granted from MoH. WHO has supported MoH to develop the LR patients' dashboard, but it has never been endorsed from MoH.</p> <p>Data sharing is essential for the avoidance of duplication of services, the promotion of best practices, optimal use of resources and optimisation of antibiotic stewardship.</p>	WHO to bring up patients' data sharing facilitation request, always in a confidential context, to the next LR steering committee meeting.
	<p>Rehabilitation referral form:</p> <p>Partners working together in rehabilitation have developed a common document to be used as an official referral form. Until now, this referral form has not been validated/endorsed by the MoH. Adoption of a standardised referral document will increase partners' accountability and improve coordination, avoiding duplication of services and increase transparency.</p>	HI and WHO to share the Rehabilitation Referral Form with MoH and explore the pathway for its officialization
	<p>Training of residents in the LRC:</p> <p>Back in July 2021, HE the deputy Minister of Health had expressed that the MoH would be open to include the LRC in the official orthopedic surgical training curriculum, making it mandatory for surgical residents to spend 6 months in the LRC. Moreover, MoH would encourage Junior surgeons, as well as mid-level surgeons to be becoming more competent in LR procedures. In addition, MAP UK offer two positions for fellowship in the UK, and they are eager to support the plastic surgery curriculum, as well.</p> <p>MSF B and MSF F are also open to be inviting residents to their clinics, and initiate a discussion for inclusiveness of such participatory approach to the official surgical curriculum.</p>	MAP UK and WHO to explore with MoH the pathway for the LRC to be included, mandatory, in the surgical training curriculum.
	<p>Health Promotion:</p> <p>MSF F, MSF B and WHO have health promotion activities that are of paramount importance for the optimal follow up of LR patients. Standardisation of the messages promoted will enhance all partners' activities.</p>	MSF F, MSF B and WHO to organize a meeting, where the Health Promotion activities are going to find a common pathway.

LR Equipment and supplies' procurement

Different partners are investing in the procurement of equipment, supplies, consumables for the LRC activities. Each organisation has their own ways of needs verification. Procurement transparency is essential for the optimal use of resources and avoidance of waste of disposables.

MDM Sp, MAP UK, MSF F, and WHO to be exchanging the MoH lists of requested equipment, as soon as they bcome available