Participants in Baghdad: Al-Rayan, AMAR ICF, Blumont, CFTF-MLT, DAMA, Dary Human, DoH Anbar, DoH Kirkuk, ICRC, IHAO, IMC, IOM, Medair, MSF-France, MSF-OCA, PUI, UIMS, UNICEF, WHO


Agenda: (Presentation attached here)
- Introduction and review of action points
- Planning for GBV Quality Assurance Tool pilot - JHU mission
- HRP Funding Status and Activity Info reporting
- Consortium approach
- Iraq IDP Information Center
- Programs updates
  - EPI/Immunization
  - EWARN
- Sub-cluster updates
  - Ninewa/ Sulaymaniyah/ Duhok/ Anbar/ Kirkuk / Erbil
- Working group update
  - Reproductive health (reactivation)
  - MHPSS/GBV
  - Nutrition
  - Physical rehabilitation (Patient)
- AoB
  - Multi-Cluster Needs Assessment (MCNA VII)
  - Return intention survey

- Introduction and review of action points

**Action Point:** Cluster to share the FFIS timeline with the minutes. Linked [Here](#)

**Focal point:**

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**Minutes of Health Cluster Coordination Meeting – Baghdad & Erbil**

20 & 22 May 2019

**Action Point:** It was reiterated that partners phasing out from any location to inform the Cluster and DoH two months in advance.

**Action Point:** Cluster to share IHD and governorates focal persons’ information with the minutes of this meeting.

### DOH contact list May 2019

<table>
<thead>
<tr>
<th>Governorate</th>
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Partners had confusion regarding attendance in Baghdad and Erbil. Those who are present in Baghdad and Central/South can attend the meeting in Baghdad, which has more MoH representation. Those partners who are in Erbil can attend the meeting in Erbil, which is a mirror-image of Baghdad meetings.

**Planning for GBV Quality Assurance Tool pilot - JHU mission**

Draft of the tool to be prepared by July/August and the assessment to be piloted in selected locations (please see meeting presentation); results will be sent to the MoH for endorsement. Please see [Presentation](#) for further information. Also attached the [Health Cluster GBV Advocacy paper – Iraq Here](#).

**HRP Funding Status and Activity Info reporting**

23 partners have approved projects under HRP 2019. There is a discrepancy between the funding figures on FTS and the actual funding received by partners.

Cluster is attempting to compile funding status of partners in order to identify the gap and advocate with the donors to fill the funding gap.

The concept is to see how much funding received from the donors against the HRP projects. Funds which are showing as non-HRP need to be reviewed and reported accurately in the FTS. Some partners who are HRP parare reporting their activities under “non-HRP”; this is affecting the beneficiaries reached.
OCHA is using the highest number of reached people per location, which may be another reason why the figure for reached beneficiaries is being affected.

**Action Point:** Partners requested to report their activities under HRP.

- **Consortium approach**

  Five NGOs, (3 international and 2 local) are attempting to work together in a consortium, in line with the direction of OCHA and the donors. The consortium is to be led by Relief International.

  The aim to maximize delivery of comprehensive services in already-existing locations. Activities will fall under the following areas:

  1. Primary Health Care Package (comprehensive package)
  2. Specialized Health Services
  3. Health System Strengthening

  The Pooled Fund, being an emergency response fund, focuses on filling the financial gap in the HRP.

  The consortium is not meant to be a separate entity; each partner will have its own area of interventions. However, as a consortium, the partners will appoint 3 positions: technical, administrative and financial, who will ensure that the consortium is functioning according to plan.

  Cluster to compile feedback on the activities and locations targeted by the Consortium, based on feedback from the sub-national levels and share with the 5 agencies.

  IHF mentioned their acceptance of this approach in order to ensure incorporation of local NGOs under the Grand Bargain and localization. It is envisaged that this will enhance the sustainability of services and should not just be limited to Pooled Funds, but also other donors.

- **Iraq IDP Information Center**

  If there are new services being provided by partners, this needs to be shared with the IIC so they are able to inform callers of the same.

  Many complaints referred by the IIC to the Cluster lacked sufficient information, which affected follow-up by the Cluster partners.

  Health Cluster has come up with key messages that the IIC can provide to the callers and has also identified a focal person (Abdulrahman Raheem) to coordinate with the IIC.
• Programs updates
  – EPI/Immunization
    EVMA workshop is a follow up to the previous one.
    Baghdad-Resafa showed the highest cases of measles as well as lowest vaccination coverage rate (administrative coverage).
  – EWARN
    Partners who are phasing out of any location need to inform the EWARN unit in WHO, for directions to whom the tablets be handed over.
    Invitation for the EWARN training will be sent through the Cluster. Presentation
  – Pharmaceuticals
    80% of the partners participating in the NCD kit pilot project have reported. WHO has reached out to the partners regarding the Darma application and partners are requested to report accordingly, since the results of the survey are directly linked to WHO Regional Office.
    The challenge of partners receiving their shipments from WHO warehouse still remains, mainly in Baghdad.

• Sub-cluster updates: Presentation
  – Ninewah:
    Poor information sharing among partners, especially in sub-districts in disputed territories is a gap. Partners are reporting to DoH Dohuk rather than to DoH Ninewah. Partners requested to report to DoH Ninewah regarding all locations in Ninewah.
    IOM updated on the referral of deliveries from Haj Ali camp as both of the bridges are closed. The issue will be raised with UNFPA.

  – Erbil:
    Cold cases from Hasansham U2 are not being referred to Erbil.
    • IOM doctor has been asked to prepare the patients for referral early in the morning so they can get the most benefit to reach Erbil as early as possible.
    • Heevie requested to coordinate with IOM to ensure that patients are prepared early.
MoH Baghdad:

MoH mentioned that they are working on ensuring services during the night shift in camps.
- It is necessary to define the services that will be provided during night shift in order to ensure that MoH will be able to sustain such services.
- IMC mentioned that they are considering discontinuing night-shift services in Khazer since the caseload.

MoH Baghdad sent a letter to the IDP and Refugee Health department in MoH Kurdistan letter stating that they found snakes, scorpions and other insects in the camps due to the presence of grass and weeds.
- The request in the letter is for MoH Kurdistan to assist in clearing the camps of grass and weeds to avoid any undue health issues to the IDPs/refugees.
- Health Cluster has shared the letter with CCCM cluster.
- MoH has been asked to reach out to the Department of Agriculture to assist with cleaning the grass and weeds.

Salah Al-din

2 camps out of the 4 existing ones are to be consolidated, resulting in just 2 camps. Since there are very few partners in Salah al Din, DoH is requesting any interested partners to provide services in camps.

- Anbar:

DoH mentioned that two of Darys’ mobile clinics will be operated in Anbar in both Qa'am and Ana.

- Kirkuk

DoH mentioned that 7 of the primary health care centers in urgent need for support in Daqoq DoH Letter linked here and support of Hawija PHCCs also letter linked here.

• Working groups update; Presentation
  - Nutrition
  - Reproductive Health
  - MHPSS/GBV

Low turnover in meetings remains a problem; partners are requested to reach out to Luther, latinya@internationalmedicalcorps.org to be included in the mailing list.
Physical rehabilitation (Patient)

Handicap International still searching for funds to have a Co-Lead position on a regional level.

• AoB

Action Point: Cluster to share the mapping of health facilities in the 30 priority districts under HRP 2019

Cluster website: http://www.humanitarianresponse.info/operations/iraq/health-cluster