

Virtual Seventeenth Health Cluster Coordination Meeting
Kathmandu, Nepal
30 July 2020 -THURSDAY (2:00 – 3:00 pm)

The meeting was chaired by Dr. Jageswor Gautam, Lead of the Health Cluster and co-chaired by Dr. Lungten Z. Wangchuk, Co-lead of the Health Cluster. More than 45 health partners participated the meeting virtually. Dr. Lungten Z. Wangchuk facilitated the meeting.

Agenda for #17 Health Cluster Coordination Meeting, 30 July 2020

Agenda Item	Responsible	Time
Welcome and Update	Dr. Jageswor Gautam, Chair-Health Cluster	14:00-14:05
COVID-19 response: laboratory information management system including dissemination of information	Dr. Runa Jha, Director, NPHL	14:05-14:10
COVID-19 response: information, education, communication, health promotion etc. role of NHEICC	Mr. Sunil Raj Sharma, Director, NHEICC	14:10-14:15
Follow-up action points and brief updates from partners	Dr. Lungten Wangchuk, Co-chair, WHO	14:15-14:20
COVID-19 response support from IPAS	Dr. Lhamo Yangchen Sherpa, Sr. Research and M&E Advisor	14:20-14:30
Discussions/Questions	All	14:30-14:40
Summary of the meeting	Dr. Lungten Wangchuk, Co-chair	14:40-14:45
Comments/Answers to the questions	Advisors/Chair	14:45-14:50
Conclusion and closing	Dr. Jageswor Gautam, Chair-Health Cluster	14:50-15:00

Synopsis of the meeting

Dr. Gautam welcomed all the participants to the meeting and provided brief updates of tests and isolation/quarantine of COVID-19 cases as of 29th July 2020. He also informed that following supports were expected from health partners to manage COVID effectively.

- Application of Public Health Standards in all responses
- Commodities for COVID-19 and monsoon response
- Disease surveillance
- Risk communication and community engagement
- Case Investigation and Contact Tracing (CICT)
- Communication of health-related response needs to nearest HEOC
- Rapid Response Team (RRT) and Emergency Medical Deployment Team (EMDT) mobilization
- Following one door mechanism for support

As of 29 July 2020

Total PCR sites: **28** (reporting sites)
 Total PCR tests done: **358,344** (an addition of 30,730 in past week)
 Total PCR positive: **19,273** (an addition of 1179 in past week)
 Total active cases: **5,203** (26.9%)
 Total discharged: **14,021** (72.8%)
 Deaths: **49** (0.3%)
 Total isolation beds: **9,288**
 Total quarantine beds: **199,959**
 Total people in quarantine: **14,471**

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Dr. Runa Jha, Director, National Public Health Laboratory (NPHL) then presented on laboratory information management system including dissemination of information. Dr. Jha shared the timeline for establishment of different laboratories and the software (Dolphin) they are using for the management of laboratory information with the objective of data repository system within the COVID-19 testing laboratory network across the country with 24 out of 34 reporting laboratories connecting through online. She also explained about the changes made in communicating the report of the tests to the people, which now is directly provided through SMS text, with provision of online report with digital signature of microbiologist. She further informed that in the first phase of the MIS system virtual trainings have been provided to different laboratories (laboratory focal persons, data operators, managers) and the system can capture number of total tests, total positive and total negative results from across the country. She also informed that a personal ID has been provided to individual laboratory to enter and view their own data, single entry mode and bulk entry mode has been enabled in the MIS and an automatic infographics display has been included.

After her presentation, Mr. Sunil Raj Sharma, Director, National Health Education, Information and Communication Center (NHEICC), presented on general information and roles of NHEICC in COVID-19 response. He provided with the goal, objectives, major strategies, organogram, major indicators and activities with focused areas. He also provided with the financial and physical progress of NHEICC, major strategic documents from NHEICC, other national level documents in process, achievements and also the glimpses of some of the IEC/BCC materials, jingles, signage, mount board, booklet set posters and pamphlets and mass media communication that have been used by NHEICC for health education, information and communication with the people. He further informed that the major bottlenecks for NHEICC have been the inadequate fund for health promotion and education and limited demand generating activities focusing hard to reach areas. He informed risk communication and community engagement (RCCE) being most important requirement during pandemics under the International Health Regulation and NHEICC being continuously involved in RCCE through mass communication via mass media, posters and pamphlets distribution, regular coordination meeting, preparation of different infographics, radio and TV programs, etc. He also informed that these activities had provided with good results regarding knowledge, attitude and practice of people on COVID-19 and protective measures. He also informed about the strategy of NHEICC for the upcoming year with major activities being coordination meetings, poster and pamphlets production in different languages and for people with no sight, jingles preparation, use of digital platform for health communication, software development for BCC, etc.

Dr. Lungten thanked Dr. Runa Jha and Mr. Sunil Raj Sharma for presenting on laboratory information management system and health information communication respectively along with informing about the bottlenecks and way forward and plans for future activities. She appreciated Dr. Runa and team for being able to capture and record all the details of the tests being done in laboratories throughout the country and Mr. Sunil Raj Sharma for coming up with different products for risk communication and community engagement and behavior changes and modification. She also requested partners to coordinate and collaborate with NHEICC to provide support to minimize duplication of efforts in COVID-19 response in the areas of communication. She then informed that Nepal has been increasing the PCR tests with increase in laboratory throughout the country. She also informed that continued support has been provided by the health partners as per the key asks of the government and requested partners to continue to follow one door mechanism for support.



She then updated that provincial mental health coordination has been started and the major responses from Mental Health sub-cluster on COVID-19 were risk communication and community awareness, mental health and psychosocial support, training to healthcare service providers, maternal mental health services, clinical mental health services and health/social/legal referral of cases. She also suggested mental health sub-cluster to coordinate with EDCD to expand the reach of their works. She further informed that periodic testing of the counselors (from NGOs) deployed in the team as a major challenge.. She stressed that the health partners align their support on COVID-19 response and support in key areas such as (testing, tracing, isolating and managing cases) as well as for monsoon response. She further stressed that the health partners inform/educate field office and response teams on Public Health Standards (SMS) as the lockdown has been lifted, involve in risk communication and community engagement and support acceleration and continuity of essential health services along with COVID-19 and monsoon responses.

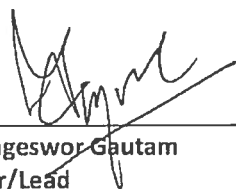
She then requested Dr. Lhamo Yangchen Sherpa, Senior Advisor Research and M&E, IPAS for her presentation on the comprehensive support provided by the organization for COVID-19 response. Dr. Sherpa provided with the brief introduction of the organization, it's support to MoHP and informed that the organization mainly supported on sexual and reproductive health. Regarding COVID-19 support, she informed that IPAS has provided frontline service providers and volunteers of 312 different health institutions with personal protective measures (PPEs, sanitizers, etc.), supported over 300 health facilities for continuation of RH/Safe abortion and contraception services, supported to roll out RH interim guidelines and community awareness, supported on initiation of Sayana Press (a contraceptive method service) and awareness and training on COVID-19 to visually impaired population. She also informed that training and orientation program have been conducted at different health facilities for COVID-19 response with coordination from different level of government.

Dr. Gautam, before ending the meeting, thanked all the presenters and participants for their presence in the meeting. He also highlighted that public health standards (SMS) and risk communication and community engagement is vital after lifting of lockdown and requested partners to provide their continued support on the same.

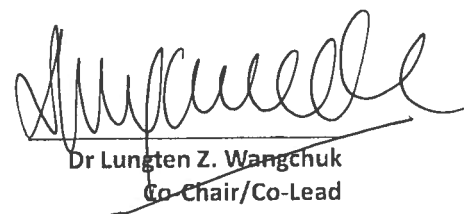
Decision/Action points

- Follow/reinforce the Public Health Standards (SMS) in response and support
- Support in risk communication and community engagement
- Align support for COVID-19 with the key asks from MOHP
- Support for COVID-19 and monsoon response through one door mechanism
- Review, update and report response contribution in the 3W online matrix for COVID-19 and monsoon response support

Signed by the Chair:



Dr Jageswor Gautam
Chair/Lead



Dr Lungten Z. Wangchuk
Co-Chair/Co-Lead

5 August 2020

Health Cluster Coordination Meeting # 17

