

MoM-MHPSS-TF-Beirut-17

Date	Tuesday February 16, 2016	Venue	WHO Conference room (-1)
Time	2:00-3:00pm	Minutes prepared by	Nour Kik
Organizations attending	Almahdi Scouts, Amel, Handicap International, Heartland Alliance International, IDRAAC, ICRC, IMC, IOM, FPSC, Makhzoumi Foundation, MOPH, MOSA, Sawiian, UNHCR, War Child Holland.		

Agenda

1. Working groups formation
2. MHPSS Community Service Utilization indicators
3. General Updates

Discussion	Action / Decision / Suggestion
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1. Working groups formation

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| <ul style="list-style-type: none"> ➤ Three working groups (WG) within the task force will be formed to facilitate the organization for the implementation of specific objectives on the 2016 TF Action Plan: <ol style="list-style-type: none"> 1. Referral system project WG <ul style="list-style-type: none"> - Action 1: Develop a referral system for crisis management linking all levels of care 2. Mental health professionals in humanitarian settings WG <ul style="list-style-type: none"> - Action 5: Develop a code of conduct for NGOs working in MHPSS in line with the national code of ethics being developed by the ministry - Action 6: Identify range of salaries and benefits of mental health professionals working in the humanitarian field - Action 7: Harmonize recruitment criteria for hiring mental health professionals 2. Capacity building WG <ul style="list-style-type: none"> - Action 9: Develop and implement a capacity building plan for non-specialized staff, including trainings for: <ul style="list-style-type: none"> - MH front-liners/community mobilizers on identification and referral for children in need of protection and ensure Support & Supervision by CP sector | <ul style="list-style-type: none"> ➤ An email will be sent in the incoming weeks. Representatives of TF organizations interested in taking part of a particular working group will be kindly asked to nominate themselves. |
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- committees in the regions (youth committee, family committee...) on recognizing mental health main symptoms and referral
- CP and SGBV case workers and Refugee Outreach Volunteers (ROVs) on recognizing severe mental disorders and on Psychological First Aid

- Working groups composition:
 - At least 5 persons each, with representation from all regions the task force meets in
 - One or more focal persons from the MoPH NMHP team in each group
- Modality:
 - Initial meeting at central level to brainstorm and reach consensus on the implementation activities, task division and modes of communication within the group.
 - Mode of communication: to be determined by every group (could be through face-to-face meetings, emails, phone or skype calls...).
 - Regular updates given to the task force on the implementation status.

2. MHPSS Community Service Utilization indicators

➤ **TF Action plan 2016: Action 4: Develop and report on key indicators on MHPSS community service utilization**

- The aim of this objective is not to increase the number of indicators organizations are already reporting on but to make sure that all of us are reporting at least on a minimum of indicators that are useful for monitoring MHPSS activities and informing planning of new ones.
- To be possibly integrated in activity info; limited number by key component:
 1. Population served:
 - Patients' characteristics (diagnostic categories, socio-demographics, residency...)
 - Pathway to care (patterns of help-seeking, case-finding, referral networks...)
 2. Interventions:
 - Clinical Interventions (Service provided, Referral/Continuum of care, Medications, Lab tests)

- TF organizations to share the indicators that they report on related to these particular components discussed (indicators that are either systematically shared with donors or that are collected as per NGO requirement).
- Aim: to collect the array of indicators that are already being used by organizations in order to inform the selection of a few indicators by the TF to collect information on MHPSS community service utilization.

- Prevention and promotion interventions (MH awareness sessions...)

3. General Updates

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| <ul style="list-style-type: none">➤ The MoPH, in collaboration with the World Health Organization, will be implementing an “E-mental health self-guided service provision pilot project”; in line with objective 2.1.7 of the national mental health and substance use strategy “To adapt and pilot an e-mental health guided self-help programme for Lebanon”.➤ The PSS committee has developed a key message leaflet on the protection of children from violence, and a discussion guide that explains how to use these key messages. The printable version of the leaflet will be shared by email with the task force. The following is the YouTube link of a video highlighting the messages: http://youtu.be/DXEOWklAjsg➤ The PSS committee are also developing a child protection (CP) identification checklist for non-CP actors. Once ready, the checklist will be disseminated to all CP and non-CP agencies working in emergencies.➤ Medications:<ul style="list-style-type: none">- Feedback on the list was received from WHO Geneva, WHO Lebanon and the Lebanese Psychiatric Society. The MoPH is | <ul style="list-style-type: none">➤ A stakeholder consultation meeting will be held tomorrow February 17, 2016 to present the project aims and to collect feedback on its feasibility and acceptability. Those who have not confirmed their attendance yet are kindly requested to do so. |
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still waiting for the feedback from the Lebanese Neurological Society before finalizing the list and sharing it.

- In relation to procurement, TF organizations that have a psychiatrist prescribing medications are kindly requested to send an email to the NMHP informing them of that so that they can be included in the distribution plan.

Next meeting: Tuesday March 8, 2016 at 2pm in the WHO Conference room (-1), Lebanese University Glass building, Mathaf.