**COVID-19 Outbreak Response Coordination Group for the 9 temporary shelters along the Thai-Myanmar border (Provincial Level) Tak**

**1st Meeting, 26 March 2020 - 10:00 – 12:15pm**

**Participants**: Madalena Hogg, Nikola Errington (UNHCR), Somsak Thanaborikan, Preeyaluk Sataranon, Atchara Chan-O-Kul (IRC) Hayso, Pastor Robert (KRC), Naw Tam La Saw (KWO), Art Srikeeratikarn (TBC), Jacqueline Nyunt, Kelly Labrorekksasuk (ADRA).

1. Overview of TORs
   * Risk Communication – focal point is ADRA (Kelly?). Needs assessment should be conducted first to identify existing materials produced (ie. what messages are being conveyed, languages, locations, modalities) to identify what the gaps are. Following needs assessment, draft strategy for Tak will be circulated.
     1. AP: all agencies share with ADRA what materials, messages that have already been produced
     2. AP: ADRA to share results of needs assessment and draft communication strategy by 31 March.
   * Surveillance, Case Investigation and Outbreak Rapid Response – focal point is IRC (Pearl). Using current case definition, preparing self-isolation and contact tracing. Not doing contact tracing for every case back to the camp, only suspected cases. See further updates below.

IRC is preparing surveillance and case investigation packages based on Thai MOPH, CDC and WHO. Currently, IRC plans to prepare isolation room for the suspected case if any before to refer to Thai Hospital. Contract tracing will be done only suspected case is identified

* + Infection Prevention Control – focal point is IRC (Pearl)– handwashing stations at the entrance of each camp installed, further updates below.
  + Food – focal point is TBC (Art) Need to revise SOPs based on Covid-19 response – working with camp committees, food card system working group to ensure refugees have access to food through FCS. 3-month supply being established and top-ups will be provided for 3 months through FCSs. Therapeutic /supplementary feeding programmes – continue to work with IRC, nutrition teams in the camps for those already identified. Hoping to have supply for the following 6 months. TBC Risk Management policy in place. Covid-19 prevention training joined by TBC and IRC to all vendors, amp committee, section committee and warehouse staff. Have handwashing stations at all FCS shops and warehouses and provide PPE after training, adapt process of FCS and distribution of cooking fuel to disinfected etc. Further updates below.
  + Protection and advocacy – focal point is UNHCR (Nikola/Madalena) – see below updates.

1. Situation Update (UNHCR/IRC)

* Strict movements in and out of all of the Tak camps. Refugees have now returned to Mae La and Umpium where refugees have returned to the camp and different quarantined areas have been established in some areas i.e. nursery school in Mae La, new room being established in Umpium, in some cases detention facilities were being discussed as possible quarantine locations.
* IRC will take the lead to discuss with Palads and Camp Committees how to handle the cases that have returned to the camp following the overall guidance from national level:
  + If they are believed they are a PUI, they will be isolated and prepared to send them to the district hospital for testing and care.
  + If they are determined to not be sick and are not linked to any COVID-19 case, but authorities want to quarantine them, IRC:
* Will recommend that they are quarantined at home;
* Will provide technical guidance on how to do this safely; and
* Will regularly monitor them for the length of the quarantine.
* If IRC determines that they are not sick and are not linked to any COVID-19 case, but authorities insist to quarantine them in a facility, IRC:
  + Will provide technical guidance on safely quarantining these people
  + Will respond if any one of them is reported sick and bring them to the camp hospital where we will screen them, and treat or refer.
* IRC not be able to manage the quarantine facility as all of our staff must prepare for an outbreak response.
* Will not be able to provide PPE as we have a severe shortage of PPE which must be prioritized for health care workers.
* There is recognition that quarantine at home is a challenge to control and people may still move out of their houses – this aspect needs to be discussed with the Palad/Camp Committees and agreed.
* Discussion about the importance of balancing protection for refugees and public health concerns.
* The type of guidance that IRC can provide to the Palad/Camp Committee is that they should consider issues such as waste management, water and access to food.
* Risk communication messaging needs to include the importance of self-isolation and social distancing.
  + AP: IRC (Somsak) will speak with each Palad/Camp Committee to provide guidance today/tomorrow and will provide feedback.
* PPE throughout Thailand is limited, advocacy ongoing at BKK level especially for surgical masks for IRC health workers.
* Access to camps, MOI only now allows IRC, TBC in all three Tak camps, in Mae La still allowing COERR for garbage collection. Umpium very strict in and out, Nupo and Mae La similar.
* Change in Palad in Umpium has not been made official yet.

1. Camp Governance (KRC)
   * KRC have sent instruction to the camp committees to follow the instructions of the RTG. Also discussing people who are coming back from BKK, access to food, aware of quarantine issues and concerned. Need for clear information was highlighted, many reports of people listening to wrong information through social media. Need to prevent panic and address concerns/anxieties as well – KWO also agreed that this is a key concern.
   * KRC raised how will the lack of access by NGOs/UNHCR impact the channels of communication. Need to ensure those who do not read and write have access to information as well, simple messaging is required, but constraints are there if door-to-door messaging is not possible.
   * Risk communication group will take into consideration the challenges for disseminating information when drafting the Communications strategy – special attention to those who can’t read/write.
2. Surveillance, Case Investigation and Outbreak Rapid Response (IRC)

* Monitoring all ARI cases and still no suspected cases in the camps. Trained all the health CBAs to use the surveillance system including screening. Trained completed in all Tak camps but refresher needed. When they receive more thermometers will train to MOI staff for the proper temperature screening. Isolation wards are established in each of the Tak camps, capacity for 3-5 individuals per one facility only, ideally we will not keep suspected cases in the camps. Discussed with all district hospitals and agreed to be referral hospitals.

1. Infection Prevention Control (IRC)
   * All handwashing facilities in all health facilities, installed entrance of camps. Cleaning protocols still need to work on further for the broader camp areas, but focus now is on their health facilities. Need the support of the camp leadership to communicate and key messages, emphasise handwashing and stations should be in all buildings.
   * Discussion on the challenges to ensure messages on prevention are getting to the household level, ensuring social distancing protocols, cost of printing some materials was raised (UNHCR has some budget for printing materials), highlighted the importance of countering rumours quickly. Many refugees are using Facebook messenger to communicate.
   * Some key messages that can be conveyed now by all:
     1. encourage people not to participate in any group events
     2. maintain personal hygiene, social distancing, not to touch face
     3. if unwell, have to go to the hospital for medical assistance, don’t treat symptoms by yourself.
2. Food (TBC)
   * Challenges in food supplies, after the government announcement related to the State of Emergency, now most people cannot travel, and hoarding is also happening in camps –refugees are worried about running out of food. Some vendors don’t have food supplies stock, but vendors have been in touch with wholesalers to continue supply. TBC is monitoring.
   * Contingency plan for food supply and charcoal, 3+6 month strategy, supply will be stored in the warehouse. Key supplies, rice, cooking oil and tinned fish.
   * Demand for rice is going up - vendors have to limit the amount per family based on their regular needs (ie. if one family only buys 1 sack of rice per month, then they will only be able to buy 1 sack of rice) to ensure current stocks are enough for all households.
   * Price of food increasing – TBC monitor market price, rice price increases countrywide. Due to limitation of refugee movement during Covid-19 prevention, TBC provides top rate amount equivalent to the most vulnerable group to all households include self-reliant and is applied from this month top up today, the adjustment of value is for 3 months (April, May, June) and then will be reviewed afterward.
   * Households under quarantine – TBC won’t jump in unless requested, generally at the moment families of those quarantined are providing food.
     1. AP: SOP to be circulated by 3 April
3. Protection & Advocacy (UNHCR)
   * Strict security protocols around camps: movement further restricted, refugees potentially stranded outside of the camp, will impact family unity, income and increase risks of detention/extortion. Under these conditions, further strain put on families, SGBV incidents are likely to increase and need to ensure support for reporting is maintained and strong case management services.
   * Risks of *refoulement* being monitored: More than 2,000 people have showed up at the 2nd Friendship bridge between 23-24 March following its closure. They were allowed to exit per the Governor’s permission, no reports of refugees being included in this movement. No reports of refugees included in this movement, to date no targeting of undocumented migrants for deportation. Advocacy with Immigration will continue to ensure prevention of *refoulement*. Currently risks appears *low* since MOPH guidance to minimise movement is being observed.
   * From the committee of court administration statement that all general current cases pending in first courts have been postponed until the end of May except some specific criteria including the criminal case whom perpetrator is in prison during criminal procedure process. So far, no news from local police on changes to modalities in facilitating cases for UNHCR, IRC-LAC. IRC and UNHCR programmes continuing remotely.

**Next meeting 10 am Monday, 30 March via MS Teams**