



South MoM-MHPSS TF

Date	5 th of February 2019	Venue	Lebanese Welfare Association for the Handicap – Sarafand
Time	10:00am to 11:30am	Minutes prepared by	Alain Gebrayel (MOPH-National Mental Health Programme) and Hiba al Halabi (Intern)

Organizations attending	Beit Atfal Al Soumoud (NISCVT), Blue Mission Organization, Civil Council Against Addiction, Himaya, Imam Sadr Foundation, Islamic Health Society, Lebanese Welfare Association for the Handicap, Ministry of Public Health – National Mental Health Programme, Terre Des Hommes – Lausanne
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Agenda

1. MHPSS TF Action Plan 2019 Implementation Scheduling
2. Discussions around Challenges Related to Triage for Referral to Psychiatric Admission
3. Updates on Information Management Systems, MHPSS and 4Ws
4. Any Other Business

Discussion	Action / Decision / Suggestion
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1. MHPSS TF Action Plan 2019 Implementation Scheduling

The MHPSS TF 2019 Final action plan developed by the task force includes the following actions:

1. Develop criteria for triage of persons to be admitted for psychiatric admission.
2. Roll-out self-care training for frontliners.
3. Develop staff care policy for NGOs.
4. Harmonize compensation of mental health professionals across organisations.
5. Create consensus among actors on a model for technical support and supervision for mental health in organisations.
6. Harmonize clinical files across organisations.
7. Establish mental health emergency response mechanism.

The below numbered decisions correspond to the action plan objectives on the left:

1. Objective to be implemented in Q1. First step will be focused discussions on challenges related to triage for referral to psychiatric admission with organizations during the MHPSS TF meeting. After that interviews will be conducted with psychiatrists working in referring organisations about the challenges faced. Based on the situation analysis, criteria will be drafted and reviewed by the MHPSS TF. They will then be piloted.



<ol style="list-style-type: none">8. Scale-up capacity-building for emotional crisis management among frontliners.9. Increase substance use response services in North and South.10. Develop shelters/supported housing for persons with mental disorders.11. Integrate the standardized M&E tools developed in MHPSS programmes and ensure monitoring system.12. Increase services for children with special needs in remote and rural areas.13. Develop guidelines for evidence-based quality MHPSS services for children.	<ol style="list-style-type: none">2. Implementation has begun (Q1), the plan for roll-out of the trainings is under development. Trainings are based on the national self-care training manual for frontliners developed in 2018 by MOPH and Abaad in line with the 2018 Action Plan of the Task Force.3. Funding has been secured for this objective. Implementation will begin in Quarter 2.4. The process will start in Q2 with an online anonymous survey to clinical psychologists working in organizations to get their feedback on what they find reasonable in terms of ranges and benefits. Organizations will also be asked to send their salary scale and benefits package if possible.5. Implementation will begin in Q46. Q4. A standardized clinical file template for the Community Mental Health Centers is currently under development. Building on that, a template will be develop for mental health service providing organizations.7. Funding needed. The national mental health programme is starting discussion with the Lebanese Red Cross on this objective. All those who wish to support in this objective can meet with the programme bilaterally to discuss how to
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move forward.

8. Budget is secured for 2019 with FPS and further trainings will be given. In 2018, 5 groups of frontliners were trained in Beirut and all governates in Lebanon.
9. For the North funding is secured as part of project with Skoun and Medecins Du Monde funded by Agence Française de Développement in line with the national mental health and substance use strategy for Lebanon. Implementation will begin towards the end of 2019. Funding is needed for the South.
10. This objective has no funding. All those who wish to support in this objective can meet with the programme bilaterally to discuss how to move forward.
11. Q1. This project is funded by IMC. We are currently in the process of hiring a consultant to develop with the task force in a participatory process the M&E tools.

Coordination has started with the PSS committee to join efforts around PSS and set out a joint action plan. These three objectives set by the MHPSS TF will be part of the joint action plan:

11. Integrate the standardized M&E tools developed in MHPSS programmes and ensure



monitoring system.

12. Develop guidelines for evidence-based quality MHPSS services for children.

13. Increase services for children with special needs in remote and rural areas.

2. Discussions around Challenges Related to Triage for Referral to Psychiatric Admission

➤ The objective of “ Developing criteria for triage of persons to be admitted for psychiatric admission.” In the 2019 MHPSS TF action plan came from the challenge raised that there are long waiting lists for referral to admission to inpatient psychiatric care and thus the need to have triage criteria to prioritize cases. In preparation for the development of the criteria, a focused discussion was held during the MHPSS TF meeting on the following questions to probe on the matter:

- What are the specific challenges you face related to triage?
- Have you done anything to face these challenges?
- What worked and what did not work?
- What are the lessons learned?
- Do you have any suggestions?

1. Islamic Health Society:

- Referral is based on priority of the medical case, and patient’s approval to be admitted.
- There is no clear criteria for triage, the psychiatrist usually takes the decision.
- The decision of which hospital to be admitted to depends on the patient’s choice.
- Reasons for not admitting patients in need of treatment is mainly due to the patient’s inability to pay.
 - i.
- Himaya and Terre Des Hommes – Lausanne refer to International Medical Corps (IMC).

2. Imam Sadr Foundation:

- Priority of referral decided by the psychiatrist.
- ISF refers to usually Kayfoun and Shifaa hospitals.



3. Lebanese Welfare Association for the Handicap:

- Limited number of referrals because there are three part time psychiatrists and constant follow-up is done.
- LWAH refers to Cross hospital, Hotel Dieu, and Saint Charles Hospital.
- The challenges that were raised have been previously mentioned regarding mobility and family refusal.

4. Civil Council Against Addiction

- CCAA refer to Dahr El Bashek Governmental Hospital and Al Shifaa Hospital.
- Al Shifaa Hospital offers transportation to hospital in certain situations.



- 4Ws Online Platform:
 - 40 organizations registered
 - 24 active organizations
 - 170 activities published until February 4th
- MHPSS Monthly Indicators:
 - 26 organizations registered
 - 18 organizations reported in January

- Kind reminder that the deadline to submit the online monthly report for January is on the 15th of February. **System would close after that!**
- Whenever you are done reviewing or reporting on the MHPSS indicators, do not forget to send to facility director
- Kindly request a meeting with us for a walkthrough of any of the mentioned platforms. Any challenges? Questions? Please contact: Alain Gebrayel - gebrayel.alain@gmail.com

4. Any Other Business

- What are the available resources for children with autism in the South?
 - Organization name?
 - Contact Person?
 - Scope of work?
 - Target Population?
- What are the challenges faced in the field ?

- Dar Reayat Al Yatim-Saida. Services cost a minimal fee.
- Lebanese Welfare Association for the Handicap. Services cost between 10000LL and 25000LL.
- Civil Council Against Adiction. Services are free of charge. Priority are for Palestinian Refugees from Syria or Lebanon.
- Islamic Health Society. Psychotherapy costs 20000LL per session while psychiatric services costs 25000LL.



- International Medical Corps.
Services for displaced Syrians and Lebanese cost 10000LL.
Only severe cases of autism are accepted for Lebanese.
- Imam Sadr Foundation.
Services are free of charge.
Only high priority persons are taken into out-patient care.
- Challenges raised:
 - Islamic Health Society:
 - i. Securing medications for persons
 - ii. Finding a hospital in the South equipped for admissions of mental health emergencies
 - iii. Continuation of treatment due to patient's inability to pay.
 - Himaya and TDH-L:
 - i. Family refusal of admittance especially if the person is a child.
Consent should be taken from parents before admittance.
 - CCAA:
 - i. Person's refusal of admittance.
 - ii. Hospital fees are discrepant. There are no standardized fees for persons.



- Imam Sadr Foundation:
 - i. Hospital fees
 - ii. Transportation/mobility restriction

Next meeting: (5th March from 10:00am to 11:00am – Location to be determined)