

WHO Emergency Humanitarian Program Situation Report

Khyber Pakhtunkhwa and FATA

Week 15

Date: April 08-14, 2012

1. Situation around IDP hosting districts

A: Situation in “Jalozai” IDP camp, Nowshera district

WHO regularly shares updates on the disease situation and latest situation on the newly influx of IDPs of Jalozai IDP camp with health cluster partners on district, provincial and national levels.

WHO along with health cluster partners, UNICEF and provincial health authorities lead the emergency health response for the newly displaced IDPs in Jalozai camp and living in host communities in District Nowshera.

Last week security situation in Jalozai IDP’s Camp remained tense due to suicidal bomb threat. Three Health Facilities of Merlin were closed for two days due to the threat to International Humanitarian Organizations.

Total registered population in the camp is 227795 out of which 54876 are residing in the camp & remaining is living in off camp. 40 families shifted from Benazir camp, Risalpur to Jalozai Camp they are accommodated in phase 5. 59 more families from Benazir camp, Risalpur will be shifted in the coming few days. Two new phases has been added to already existing 06 Phases. 4027 tents pitched till 13th April, 2012. CAMP organization new health post in phase 7 will be ready and functioning by Monday, 16th April.

A total of 3 measles alerts were reported and responded from the health facilities of the Jalozai IDP camp. There were 2,160 consultations provided through health care provider, including acute respiratory infection (20% or 431 cases), acute diarrhea (11% or 233 cases), skin infection (1.5% or 32) and suspected malaria (1% or 13 cases).

Health cluster meetings take place on every alternate basis in Jalozai Camp attended by partners from Health (Merlin, CAMP, CERD, UNICEF), WASH, Nutrition, Food and CCM clusters working in the camp where issues are discussed and decisions are taken on the spot to address any loop holes in the health response for containment and control of disease outbreaks in the camp.

Health Cluster Meeting in Jalozai was held on Monday, Wednesday and Friday last week. The meetings were presided by WHO. Issues related to diarrhea situation in camp, daily activities in the camp and Polio/Measles campaign discussed.

Daily Measles campaign Meeting held in Jalozai IDP camp. It was suggested to have proper monitoring and supervision of the campaign in Jalozai IDP’s Camp. Daily meeting be conducted and the campaign activities be validated through evaluation. A meeting was held with all Partners working in Jalozai Camp by EDO-H Nowshera. Reply to Suo Moto action of Chief Justice of PHC regarding facilities in Jalozai Camp was prepared.

74 water samples tested for residual chlorine at different delivery points in Jalozai camp. 70% of samples tested found proper chlorinated with residual chlorine within WHO guidelines.

WHO provided 1008 soaps to Merlin Health facilities and 216 soaps to CAMP Organization through UNICEF to be distributed among the diarrhea patients during hygiene education sessions. WHO Provided 26

gallons of liquid chlorine to the WASH partners SSD and HRDS to continue the process of Chlorination on main water sources. 4 water samples collected and tested from the ICE being sold in the camp. All the samples were found negative for Faecal coliform indication. WHO team followed the hygiene promoters trained for the response to the diarrhea cases in the camp.

28 hygiene promoters including 15 females and 13 males have been trained on 12/4/2012 in the first batch and mobilized for the response to the increase in diarrhea cases. Hygiene promoters are collecting the details of diarrhea cases from the Merlin and CAMP health facilities and responding to the patients accordingly on daily basis. Second batch will be trained during next week. ICE was suspected to be one of the reasons for the rise in diarrhea cases in Jalozei camp but 4 samples tested from ICE being sold on 12/4/2012 were found negative for presence of fecal coli form bacteria. About 1000 old families have not been able to get hygiene kits and were missed during last distribution. They are unable to maintain basic personal and environmental hygiene due to lack of hygiene items including soap, towels, nail cutters etc. According to WASH Partners they will receive supplies soon and distribution of hygiene kits among old and new families may be started.

WHO will conduct DEWS Training for newly appointed staff of CAMP and CERD on Monday, 16th April 2012 at 08:30 AM in CAMP Office, Shami Road, Peshawar. ERF OCHA Representative Visit to Jalozei camp on Monday, 16th April 2012 at 01:00 PM.

B. “Togh Sarai” IDP camp, Hangu district

Parda wall of sector D, E, F, G, H, I, J and K in Togh Sarai IDP camp district Hangu is completed along with parda wall of WASH facilities and the remaining A and B sector is on progress in the camp. De-slugging of pits and cleaning of storage tanks were completed. WASH facilities of the camp are found satisfactory and requested forward to WASH partner for lime treatment.

WHO provided water testing kit to TMA Hangu and “training on water quality monitoring using of Wagtech potable water testing kit” will be held soon. TMO district Hangu shared a list of nominees for the training. TMO, District Hangu has requested WHO for provision of Fogging machine for Vector control activities to be carried out in the District.

Security situation in off Camp areas of District Hangu was quite tense and team was informed by district authorities to take extra care.

District authorities has requested for WHO assistance in the form of ARV’s and ASV’s.

Contractor responsible for civil work under SFD fund in Liaqat Memorial Hospital, District Kohat have still not reported. This issue needs to be resolved on urgent basis. (Chronic Issue)

10 out of 18 health facilities reported to WHO via e DEWS . WHO DEWS report that other acute diarrhea is still the highest cause of morbidity (17% or 105 cases) of total of 611 consultations; acute respiratory infections (13% or 79 cases); skin infection (1% or 5 cases).

C. Situation in Tank district

WHO conducted meeting with EDO H regarding the appointment of a competent health care provider at BHU Dabara. The issue is now resolved as a second Technician is also appointed.

ICRC will soon start their activities once again in the said BHU Kot Hakim. ICRC was instructed to halt in the activities owing to security threats. These BHUs were located in the areas which are well populated with IDPs, who were disadvantaged due to the exit of ICRC.

In a general discussion, EDO H was informed about the Dengue and Malaria training planned by WHO in Dera Ismail Khan. He was appreciative of the program and he requested for participation of few members from district Tank as well .

A meeting was held with UNFPA medical officer. ARI is on the decline whereas Diarrheal diseases are escalating. Their center reports any unusual or alarming diseases. Discussion took place regarding Diarrheal diseases and NNT cases. Staff was alerted for any potential cases of AWD.

Discussion with Pediatrician at the Civil hospital regarding seasonal diarrheal diseases. ORT corner will be established near the Paeds OPD. WHO established multiple ORT corners at various facilities last summer.

WHO conducted visit to Civil hospital EPI center in order to evaluate the vaccines condition. Temperature chart was hung but vaccines were placed in a bizarre manner. Staff was advised to place the vaccines properly and that record should be managed properly .

In new appointments of medical officer in KPK, no medical officer was recruited in Tank, a district where only a single Doctor serves in the periphery (BHU/RHC etc.). UNFPA is working efficiently at Civil Hospital Tank.

WHO conducted training session with In Charge facilities BHU Dabarra, SHC Darakki, RHC Gul Imam. Difference between various types of Diarrheas was explained and co morbidity was also educated. Proper treatment protocols and importance of rehydration was emphasized.

D. Situation in D I Khan district

27 health facilities reported to WHO via e DEWS. ARI remained major cause of morbidity representing 16.08 %. All diarrhea (OAD & BD) were reported at 9.4 %, Scabies at 3.34 % and Suspected Malaria at 2.85 % respectively. A total of 24 alerts of Measles & 01 Alert of DHF/CCHF reported during week 15.

In response to measles alerts WHO took district EPI department on board to make Proper plan The Measles is reported from all Tehsils of the district. There is need of Mass Vaccination Campaign for Measles. WHO also investigated two cases of Suspected CCHF, both belonging to the same family.

Health Facilities enlisted for Conditional Grant was monitored to check the equipment and other items donated by the Grant, upon direction by the EDO Health.

WHO attended the DPEC (District Polio Eradication Committee) meeting chaired by DCO on 10th of April, 2012. Next Pre-Campaign meeting for upcoming NIDs is scheduled on 16th April 2012 in Commissioner's Office.

WHO participated in District Dengue Emergency Committee meeting chaired by M.S. DHQ Hospital. WHO briefed all stakeholders about the Vector Control Measures and the WHO guidelines for Hospital Based Case Management of DF & CCHF? WHO provided Personal Protection Equipment (Masks, Gloves, Goggles and Gowns) to M.S. of DHQ Hospital for Health Care providers dealing with suspected cases of CCHF.

E. New Durrani" IDP camp, Kurram Agency

Local NGO "EHSAR Foundation" selected for provision of PHC services in the camp has informed that they will get NOC by this week.

F. Situation in Kohat district

Inauguration ceremony of warehouse build by WHO from SFD fund for the capacity building of District Health Authorities was held on 12th April, 2012 in LMH Hospital District Kohat. District Coordination

Officer for Establishment inaugurated the Warehouse along with EDO-H, District EPI Coordinator, MS DHQ and DMS LMH and President Paramedic Association with many others participated in the event.

District health authorities has again requested WHO assistance in the form of vehicles and POL provision for measles immunization campaign in 7-8 UCs. District health authorities requested for WHO assistance in the form of ARV's and ASV's due to rise in dog bite cases. Number of cases per week is very high and local containment measures are insufficient to control the issue

31 out of 43 health facilities provide eDEWS.

eDEWS:

KPK DEWS:

413 reports were received reporting 105,504 patient consultations in 16 districts of Khyber Pakhtunkhwa Province and remaining district reports on their due date. Acute respiratory infections are the highest cause of morbidity (21.5% or 22,673 cases) showing 1% decrease in percentage; acute diarrhoea (8% or 8,041 cases); skin infection (3% or 2,976 cases); suspected malaria (1.5% or 1,624 cases).

FATA DEWS:

52 reports were received reporting 15,271 patient consultations in 3 agencies of FATA. Acute respiratory infections are the highest cause of morbidity (16% or 2,415 cases) showing 2% decrease; acute diarrhoea (7.2% or 1,105 cases); skin infection (3% or 404 cases); suspected malaria (3% or 430 cases).

Alerts:

A total of 105 alerts including 4 measles, 1 BD and 1 leishmaniasis outbreaks were received. 75 were suspected measles, 17 for leishmaniasis, 7 for NNT, 2 for diphtheria while 1 each acute flaccid paralysis, bloody diarrhoea, suspected DHF and Tetanus.

District wise alerts bifurcation : 24 measles and 1 suspected DHF for D.I. Khan, 11 measles and 14 leishmaniasis for Nowshera, 6 measles and 1 BD outbreak for Haripur, 6 measles for Malakand, 6 measles for Swat, 4 alerts including 1 leishmaniasis and 2 measles outbreaks for Khyber agency, 2 measles for Abbottabad, 2 measles for Charsadda, 2 measles for Kohat, 2 measles for Manshera, 6 alerts (2 diphtheria, 2 leishmaniasis and 2 measles) for Shangla, 2 measles outbreaks for Swabi, 2 measles and 1 AFP, 4 NNT for Bannu while 1 each measles for Battagram, Lakki Marwat, Lower Dir and Mardan.

Proper investigations and timely interventions were taken in response to all reported cases together with WASH interventions.

ARI Centers:

All ARI centers have been closed.

Hospital Coordinator:

Meeting conducted with Project Director Health Afghan refugees for list of participants for trainings. In a meeting with FATA Health authorities the finalizing and sharing of first draft PC 1 for IVM was held. Meeting held with Health Manager of UNHCR and Program Manager MNCH KPK for nomination and arrangements of EmOC and ENC Trainings going to start on 18th April in Islamabad. Ongoing technical support provided for Dengue Program KPK. Routing support provided to HEPR.

Essential Medicines:

- Six training sessions were conducted in Swat, Nowshera, Tank, Dir Lower and D.I. Khan on Record keeping, inventory management, Rational use of medicines and safe disposal of sharps.
- One Diphtheria, 1 CCHF, 8 Measles and 3 Neonatal Tetanus cases responded in district Swat, D.I. Khan and Bannu by providing ADS, Vitamin A and TIGs respectively.
- 11 types of assorted essential medicines delivered to Bannu and Dir Lower which are sufficient for approximately 1325 patients.
- Total 3 Monitoring and 3 follow up visits were performed this week including Bannu, Lakki Marwat, Mardan, Dir Lower and D.I. Khan. Gaps regarding irrational use, storage of essential medicines, record keeping and stock outs identified generally. Training and required Essential medicines provided as per need at visited health facilities.
- During last week a total of 12 coordination meetings held with different stake holders including DMS, MS, DSM PPHI, ICMC, DPEC, PC & Pharmacist of Malteser International, DCO and EDOHs in which Capacity building on essential management, dengue fever, Leishmaniasis, situation of health services at Jalozai Camp, availability of essential medicines, implementation of LSS, summer contingency plan and returning of essential medicines were discussed. EDOH, Nowshera requested ASVs, ARVs, 1 thermal therapy machines at PPHI Nowshera, repair of existing thermal therapy machine and 100 pallets. EDOH, D.I. Khan has also requested for ASVs.
- **IDPs camp Jalozai Activities:** All the health facilities at Jalozai Camp visited, key essential medicines found in sufficient quantities. Gaps regarding storage of essential medicines found at new health facility of merlin. Gaps noted and issues resolved after trainings session. Hands on training provided to dispenser and MO of the concerned facility. Monitoring visit performed to a health facility supported by Merlin. A training on rational use of medicines held at CAMP Organization's office in which 12 participants trained including MOs, FMOs, dispensers and M & E officer.
- **FATA:** Coordination meetings held with Agency surgeon and MS AHQ Khar Bajour agency in regards to alarming situation of Leishmaniasis, its treatment & control measures, use of thermomed (thermal therapy machine), coordination with DHS FATA and LSS training and implementation respectively. AS requested for the supply of quality insecticide as DHS FATA supplied deltamethrin efficacy is very low.
- CHC Mena Bajour agency visited to observe Leishmaniasis patients, their treatment protocols, response to treatment and patient adherence to treatment. MTs have been advised to provide the patients with at least two intralesional doses per week rather than current practice of one dose per week to improve the response. Visits have been made to warehouse AHQ Khar and CHCs, Malangey, Raghagaan, Kotkae and Derakai, where essential medicines availability, supply period, expiry calendar, bin cards, stock register, expense register, average OPD, Leishmaniasis patients line list and their treatment practices observed respectively. 75% gap observed in the supply of essential medicines at CHCs level.
- 700 Meglumine antimoniate provided to Bajour agency in response to continue treatment of 250 patients of Leishmaniasis.
- **RAHA:** Monitor the evaluation training conducted for LHWs at Type D hospital Ghazi for POLIO campaign in which WHO briefed 33 participants on rational use of medicines. Cold chain management of Vaccines & Vaccine vial monitors (VVM). In coordination meeting with DEDOH Distt: Haripur, Chief Executive Ayub Teaching hospital Distt: Abbott Abad and M& E Officer PPHI Distt: Haripur LSS training & implementation, WHO EM activities were briefed. During follow up to Paedriatic ward at Women Children hospital Distt: Haripur increased diarrhea cases (40 % of total OPD) were observed. ORT corner established at ward & hands on training was conducted to paramedic on ORS preparation & drinking water purification methods.

WASH:

- WHO EH team in collaboration with EDO-H District Kohat, District administration and District RBM Program conducted an awareness walk for the prevention and control of Dengue/Malaria on 10th April, 2012. WHO-EHA team distributed awareness material among the students and participants, 50 charts of Dengue/Malaria fever guideline to different health facilities of Kohat, 50 booklets among school teachers.

- On 12th April, 2012 Inauguration ceremony of newly constructed warehouse was held at LMH, district Kohat. DCO Kohat was the chief guest of the event and EHA team briefed all the participants stock available in warehouse and utility of the district warehousing for DoH Kohat.
- The Health Partners in district Shangla has requested WHO for technical facilitation on capacity building of health staff on. It is agreed that the WHO will share a training plan for execution on the subject this month.
- WHO EH team district Shangla is working with WASH working group to actively monitor the water quality in all areas reported water born diseases in previous year for timely mitigation and water quality improvement in the communities from next week.
- WHO EHA team participated in media briefing of POLIO held in DCO office chaired by district coordination officer in district dir lower.
- Installation of auto-chlorinator at main water supply line of IDPs camp Hangu is planned this week in collaboration with PCRWR Peshawar.
- TMO, District Hangu has requested EHA for provision of Fogging machine for Vector control activities to be carried out in the District.
- UNCHR has started water supply projects in Afghan Refugee through his implementing partner Pak CDP. Water supply GI line has been laid in various camps, however the main bazaar of camp no 15 has still water scarcity in some places as the resident complained during monitoring. WHO EH team is following the matter with Pak CDP (UNHCR IPs).
- WHO EHA team participated in the polio awareness session arranged for the 120 Religious leaders on April 12, 2012 at DCO office District Dir lower. The forum was sensitized to mobilize the community for polio prevention efforts being carried out by DoH and WHO.
- WHO EH team conducted sanitary survey in village Maira was carried out. The water supply lines were found leaked and porous with overwhelming chance of potential contamination to the water source. The finding was shared with district water authorities for timely mitigation.
- TMO, District Hangu has requested EHA for provision of Fogging machine for Vector control activities to be carried out in the District.
- 28 hygiene promoters including 15 females and 13 males have been trained on 12/4/2012 in the first batch and mobilized for the response to the increase in diarrhea cases. Hygiene promoters are collecting the details of diarrhea cases from the Merlin and CAMP health facilities and responding to the patients accordingly on daily basis. Second batch will be trained during next week.
- Ice was suspected to be one of the reasons for the rise in diarrhea cases in Jalozaï camp but 4 samples tested from ICE being sold on 12/4/2012 were found negative for presence of fecal coli form bacteria.
- About 1000 old families have not been able to get hygiene kits and were missed during last distribution. They are unable to maintain basic personal and environmental hygiene due to lack of hygiene items including soap, towels, nail cutters etc. According to WASH Partners they will receive supplies soon and distribution of hygiene kits among old and new families may be started.
- 74 water samples tested for residual chlorine at different delivery points in Jalozaï camp.70% of samples tested found proper chlorinated with residual chlorine within WHO guidelines.
- After delivery of complete package for health care waste Management tools and items, Health care waste Management committee has been nominated in Pabbi Satellite hospital comprising of Senior Medical officer, Nursing staff, store in charge and Cleaning staff. WHO EH Team will support capacity building of the team and the team will be fully responsible for segregation, transportation, incineration and safe disposal of health care waste and general hygienic conditions of the hospitals.
- WHO EH team conducted a Coordination meeting with TMA/PHED DI Khan for refresher training of plant operators on the use & operation of Auto-chlorinator and residual chlorine monitoring through color comparators. The on job training & monitoring activities will start next week.
- WHO EH team conducted a Coordination meeting with Chief Officer TMA Mingora to devise a monitoring plan for 55 Auto-chlorinator installed by WHO on community water schemes. WHO, TMA and PHED district swat will jointly monitor the operation and rectification of any outstanding issue within the liability period for this project.
- WHO EH team swat Participated in a meeting in WHO country office Islamabad with Perfect Builders (Contractor for SDF Project SGTH swat) for the completion of civil and WASH work in SGTH on 9th

April 2012. The contractor agreed to pursue the pending task.

- A coordination meeting was held on 11th April, 2012 with secretary Kalabut township District Haripur. The secretary was briefed about WHO recent contribution on environmental aspects. He appreciated WHO support and demanded again for eight auto chlorinators.
- WHO EH team FATA conducted a coordination meeting with MS AHQ Ghalanai Mohmand and MS AHQ Khaar Bajour Agency; The HCWM supplies recently provided to these hospitals were highly acknowledged and appreciated by the hospital management.
- The civil construction works on District Warehouse D.I.Khan is in progress and will be completed in month of April with EH team is regularly monitoring the quality & quantity of work being completed and in progress.
- WHO EH team is closely monitoring the WASH improvements civil works in City Hospital, Lukky Marwat. The construction work progress is slow from the contractor and remains suspended from last two weeks.
- Civil dispensary village Brao Puran district Shangla was visited. The overall hygienic situation was analyzed and a session on health and hygiene of the facility was conducted with the sanitary staff.
- WHO EH team visited Saidu Group of teaching Hospitals to monitor the progress of work done by perfect builders so far and incomplete task in assigned contract.
- WHO EHA team FATA conducted follow-up visits to CHC Maina and CHC Malangay Bajour Agency to scrutinize lieshmaniasis situation in catchment of both the health care centers. Health and hygiene awareness session conducted to lieshmaniasis affected females and children in CHC Maina focusing prevention of water related diseases.
- Routine field visits were conducted to CHC Raghagan, CHC Kotkai and BHU Derakai, alcoholic hand rub solutions, needle cutter and IEC provided. In most of the HFs in Bajour agency there is no water due to electric power fall.
- Under ECHO fund tube well at LMH hospital, transformer was fixed on old electric poll and hospital staffs have objections to remove the transformer and fixed it on a new poll. "Electric resistivity report for ground water" showed that discharge of water is expected 2000GPH and the recharge to ground water is low, so the "Hydrologist" recommended 3HP submersible machine for tube well source.
- WHO EH team in weekly water quality monitoring collected and tested 17 water samples from deferent areas of district Shangla, Kalabut town ship and Afghan refugees camp # 3 district Haripur. 58% of the samples were found faecally contaminated. In response WHO distributed WASH material (2000 Aqua tabs, 50 hygiene brochures) with health and hygiene promotion campaign in the area.
- Sanitary assessments of the targeted WSS revealed that over design and leak water supply pipes, open defecation and personnel hygiene were the probable causes of contamination.
- WHO EH team Dir Lower provided and distributed soaps, hygiene kits, health education, Bed nets and is glucantime for treatment and prevention of Cutaneous lieshmaniasis in previous Alert/outbreaks Response
- Distribution of SFD supplies from Kohat warehouse to assign health facilities of district Kohat and district Hangu.
- 26 gallons of liquid chlorine provided to SSD and HRDS WASH Partners to continue process of chlorination.
- EHA team provided water testing kit to TMA Hangu, and "training on water quality monitoring using of Wegtech potable water testing kit" will be held soon. TMO district Hangu shared a list of nominees for the training.
- WHO EHA provided a complete set of health care waste (HCWM) equipments to AHQ Ghalanai and AHQ Khaar, DHQ & Mufti Mehmood Hospital DI Khan, Pabbi Setellite Hospital Nowshera.

Nutrition:

- Coordination meeting held with Deputy Director Nutrition regarding the inaugural meeting of Provincial Thematic Working Group on nutrition. Meeting held on 14th April 2012.
- Coordination meeting held with APC National Program for Family planning and PHC regarding the

nominations for the training in Islamabad. Also issues regarding the data collection and transmission to the provincial capital discussed amidst the strike back drop. Alternate mechanisms sought for continued data reception.

- Coordination with DD Nutrition regarding the 04 days training on facility based management of severe acute malnutrition in Matta Swat. Training to commence from 17th April 2012.
- Participation in the inaugural meeting of provincial thematic working group on nutrition. Important discussions held and technical advisory group to be formed with in the thematic group.
- Total of **25** patients of severe acute malnutrition with complications were admitted in 7 Nutrition Stabilization Center with **21** patients were discharged after curing and **0** were defaulter cases.
- In Pabbi Hospital Nowshera, one new case of child with severe acute malnutrition with complications was admitted in the hospital.

District level coordination & monitoring:

Shangla: WHO conducted visit to THQ Puran ,CD Brabroo, BHU Kotkay for eDEWS analysis.

On 9th April 2012 meeting held with DSM PPHI regarding Leishmaniasis control and timetable for Residual spray, During this meeting DSM PPHI thanked WHO for their technical assistance regarding Spray Schedule and proper training of the sprayers. WHO assured him of assistance from their side during and after the first Phase of Spray. On 11th April 2012 DPEC meeting was held at DCO office Alpuri under the chair of District Magistrate, Dr.Obaid Ul Islam Team leader Polio also participated in the meeting. WHO explained the current situation regarding UPEC meeting minutes and constraints. DCO expressed his satisfaction and directed EDOH to assist WHO team for microplan designing for the line Departments during NID's. DEWS team responded to 06 alerts (2 Measles, 2 Diphtheria and 2 Cutaneous Leishmaniasis).

Mohmand Agency: WHO team visited 6 health facilities AHQ Ghalanai, RHC Yakkaghund, BHU Prang ghar, BHU Yousaf khel, BHU Kasai, CD Miangan to check alerts and DEW data. Coordination meetings held with Additional Political agent Mohmand, Agency Surgeon Mohmand, MS AHQ Ghalanai and Agency Education officer Mohmand. Attended APEC meeting chaired by Political Agent Mohmand WHO Attended area in charge training at AHQ Ghalanai.

Swabi: In a Coordination meeting held with EDO Health regarding rational use of medicines supplied by WHO, EDO health requested WHO to provide ARV as dog bite cases are increased. DPEC meeting was held on 13th April 2012 at DCO office Swabi, all the line departments participated. EPI coordinator presented a brief progress report to the participants. WHO briefed the participant on ownership. Coordination meeting with MS BMC regarding (ECHO and SFD) funded equipments, their proper installation and TFC. MS thanks and request letter was forwarded to WR WHO. MS BMC also requested WHO Nutrition wing for the incentive of the last 2 months. MS BMC clarified WHO that all the relevant data of the last 2 months of TFC was already shared and still waiting for the incentive. 13 Health facilities were visited in district Swabi to check System generated alerts. The alerts were investigated by PHO WHO EHA in Coordination with DoH, PPHI.

Swat: Coordination meeting held with EDO Health, DCO Swat, EPI Coordinator regarding outbreak measles.

Charsadda: BHU Sheikho, BHU Zarinabad, BHU Ibrahimzai, DHQ hospital and BHU Baz Mian Kallay facilities were visited. Registers checked and on job orientation of the facility incharges regarding DEWS was done. Two measles cases were responded.

Haripur: WHO team visited 7 Health facilities: BHU STC4, BHU STC1, DHQ, RHC Kallinger, BHU Kallinger, RHC Ghazi, BHU Beer to respond measles and BD alerts. Coordination meeting held with PEO WHO and EPI coordinator and team training monitoring scheduled was finalized for upcoming NID. WHO Participated in team training of Ghazi, Qazipur, Tarbella dam area, Kallinger and Swabi mera. Strike and protests held in Hazara division in remembrance of 12 deaths during Hazara province movement on 12th

April. Roads were blocked.

Khyber: During the Outbreak response outreach vaccination was done in which 1285 children were vaccinated in the 2 affected UCs collectively. Three system generated alerts responded to from Khyber Agency in Week 15, 2012, all these alerts were false alerts. Active surveillance of 1 Outbreak of Leishmaniasis in Kam Shalman was done and till now 13 cases are detected. Coordination Meetings with held with Agency Surgeon Khyber, FSMO, ADHO. Monitoring visit conducted to AHQ Landikotal, CH Jamrud, BHU Mian Morcha, CHC Wazir Muhammad killi and BHU Kam Shalman.

Nowshera: Twenty cases of Leishmaniasis reported from BHU Kahi in district Nowshera were responded. WHO provided medicines to the patients through PPHI, Nowshera. WHO requested health facilities Incharges to provide Pre/Post treatment photographs of the patients. WHO environmental health in coordination with Malaria Control Program Incharge is arranging EH response in the area. WHO BHU Banda Malahan was visited. On job training of MT and EPI Technician done. A suspected case of measles was investigated. No more cases found on active search. EPI Outreach Vaccination session arranged in the area. A case of AWD reported from the Health facility in E-DEWS report was followed. It was an OAD case mentioned wrongly as AWD. Monitoring visit was conducted to RHC Akbar Pura was visited. On job training of M.O/Incharge, MT and EPI Technician done. Two cases of measles were investigated. On active search no more cases found in the area. EPI Outreach session arranged in the areas having measles cases. Two cases of Measles case reported from Khweshgi and Bahram Kalay were investigated. Four Samples sent to NIH for confirmation. Outreach Session being arranged by EPI Technicians.

Karak: An official request letter for support in Vector Control Activities and treatment provision to Leishmaniasis cases has been issued by EDO-H District Karak.

Mardan: Coordination meeting health with Medical Superintendent DHQ Hospital Mardan, Incharge Children Unit and EDO Health Mardan. In a meeting DFD equipment's installation status was discussed, and found that most of the provided SFD equipment's are installed but some needs installation. List of the equipment's to be installed will be shared with logistic person. In a Meeting with Incharge of Children Unit Dr Ikram Khan at their office at DHQ Hospital, WHO EHA team shared updates on communicable diseases and requested them for continuous support by reporting alerts/outbreak from their OPD as well as from Children Unit. WHO visits the Children ward DHQ Hospital Mardan and Mardan Medical Complex for Alerts/outbreak response and routine monitoring.

Lower Dir: WHO team participated in the polio awareness session arranged for the 120 Religious leaders on April 12, 2012 at DCO office District Dir lower. WHO EHA team participated in media briefing of POLIO updates by EPI team which was chaired by DCO. WHO Team updated the partner organization about the leishmaniasis and dengue situation. WHO responded one measles Alerts received from new Kalay UC and Tehsil Balambat Dir lower.

Battagram: DPEC Meeting regarding NID April 2012 was attended as member, District Polio Control Room and shared suggestion with DCO and EDO for the coming NID. District Health Management Meeting was held on Tuesday 10th April 2012 at EDO Health Office, shared the DEWS activities with members of the DHMT. Monitoring visits conducted to areas as identified and designated in NID Supervisory plan by EDO Health Office.

Logistic:

The following supplies were supplied from WHO KP warehouse to:

Place	Item Sent
CHARSADDA	PPHI: Omeprazole 20 mg capsule 1295,

	DHQ (H) CHARSA DA: HTH Hypochlorite 1 Bucket
KOHAT	WHO WARE HOUSE KOHAT: Multipurpose Trolleys 10, Apron 10, Face Masks 10, Fixed waste Segregation Bin 60, Garbage removal trolley 5, General Waste Bin With Two Wheels 30, General Waste Collection bin With Covers 30, General Waste Collection Bin With two Wheels 10, Gloves Heavy Duty 10, Hampers bags 20, Lab Coat 10, Needle cutter 60, Waste Bags 500. KOHAT DENGUE CAMPAIGN: Dengue Fever Guideline For triage & case management 50, Malaria & dengue Book Let 50, Dengue IEC Posters 100, Meglumine Antimoniate inj 400.
D.I KHAN	DHQ (H) D.I KHAN: Multipurpose Trolleys 10, Apron 10, Face Masks 10, Fixed Waste Segregation Bin 60, Garbage Removal Trolley 5, General Waste Bin With Two Wheels 30, General Waste Collection Bin With Covers 30, General Waste Collection Bin With Two Wheels 10, Gloves Heavy Duty 10, hampers Bag 20, Lab Coat 10, Needle Cutter 50, Waste bags 1000. Aqua Tabs 0.65 Gram 72000. Aqua Tabs 67 mg 50000.
HANGU	Multipurpose trolleys 10, Apron 10, Face Masks 10, Fixed Waste Segregation Bin 60, Garbage Removal Trolley 5, General Waste Bin With Two Wheels 30, General Waste Collection Bin With Covers 30, General Waste Collection Bin With Two Wheels 10, Gloves Heavy Duty 10, Hampers Bags 20, Lab Coat 10, Needle Cutter 60, Waste Bags 500
KHYBER AGENCY	Aqua tabs 0.65 mg 36000.
MOHMAND AGENCY	AHQ (GHALANI MOHMAND AGENCY): Multipurpose trolleys 10, Apron 10, face Masks 15, Fixed Segregation bin 70, Garbage Removal trolleys 5, General Waste Bin with two wheels 35, General Waste Collection bin With Covers 35, General Waste Collection Bin With two wheels 15, Gloves Heavy Duty 15, hampers bags 20, lab coat 15, Needle Cutter 60, Waste bags 1000. Aqua Tabs 10000, chlorine Disinfection Urdu & English Poster 100, Cholera outbreak Urdu & English Poster 100, Disinfection water using Poster 100, Food Hygiene Urdu & English poster 100, Guideline For Cholera control poster 100, House held water storage English & Urdu poster 100, Mortein mat 10, safe disposal of faces in English poster 100, use of dustbin Urdu poster 100, safe drinking water Urdu & English poster 100, water hygiene English & Urdu poster 100, Clean Deliver kit 20, Eye Wear 200, hand hygiene English & Urdu Poster 100, Majestic Cleaning Hand Cart 2, Needle Cutter 2, Preventing Eye English poster 100, Scale Weighting Machine 2, solid Waste Urdu & English poster 100, Wagtech kit 1.
BAJOUR AGENCY	Multipurpose trolleys 10, Apron 10, face Masks 13, Fixed Segregation bin 70, Garbage Removal trolleys 5, General Waste Bin with two wheels 35, General Waste Collection bin With Covers 35, General Waste Collection Bin With two wheels 15, Gloves Heavy Duty 15, hampers bags 20, lab coat 15, Needle Cutter 60, Waste bags 1000. Aqua Tabs 10000, chlorine Disinfection Urdu & English Poster 100, Cholera outbreak Urdu & English Poster 100, Disinfection water using Poster 100, Food Hygiene Urdu & English poster 100, Guideline For Cholera control poster 100, House held water storage English & Urdu poster 100, Mortein mat 10, safe disposal of faces in English poster 100, use of dustbin Urdu poster 100, safe drinking water Urdu & English poster 100, water hygiene English & Urdu poster 100, Clean Deliver kit 20, Eye Wear 200, hand hygiene English & Urdu Poster 100, Majestic Cleaning Hand Cart 2, Needle Cutter 2, Preventing Eye English poster 100, Scale Weighting Machine 2, solid Waste Urdu & English poster 100, Wagtech kit 1. Meglumine Antimoniate Inj 700 Hygiene Kits 3.
PABBI SATTELITE HOSPITAL	Apron 10, Fixed waste Segregation bin 65, Face Masks 10, Garbage Removal Trolleys 5, General Waste Bins With Wheels 40, General Waste bin with two Wheels 10, general Waste Bin with Cover 40, Gloves Heavy Duty 10, Hampers

DISTT NOWSHERA	bag 20,Lab Coat 10,Multi Purpose trolleys 10,Needle Cutter 60,Waste Bags 1000. HRDS (SSD JALOZAI CAMP NOWSHERA) Sodium Hypchloride 30% 26 Gallons. PPHI NOWSHERA: Meglumine Antimonite Inj 500.
Peshawar	KTH PESHAWAR: Amlodpine 5 mg Tabs 896,Atenolol 50 mg oral 340,Dalteparin (fragmin)5000 inj90,Defazocort 6 mg oral 440,Doxycycline 100 mg oral capsule800,Face Masks53,I/V Cannula 22 G 150,I/V Cannula 24 G 100,Povidone Iodine Solution 3,Tranexamic Acid 60. WHO SUB OFFICE EHA PESHAWAR: Specimen carrier Boxes Small 6. TMA PESHAWAR: Colour Comparator kit 10,DPD Chlorine Tabs 1000.
Flowers Organization Peshawar	Auto Clave 1
Tank	Aqua Tabs 0.65 Gram 72000.Aqua Tabs 67 mg 50000