

# VIRTUAL 12<sup>th</sup> NATIONAL NUTRITION CLUSTER MEETING Via ZOOM LINK

## KATHMANDU, NEPAL

FRIDAY, 16<sup>th</sup> JESTHA 2077 (29<sup>th</sup> MAY 2020)

The nutrition cluster was officially activated, led by the Family Welfare Division (FWD) of Department of Health Services (DoHS) of Ministry of Health and Population (MoHP) to initiate nutrition preparedness and response Actions to address nutrition issues in existing Covid-19 targeting to under five years children, pregnant and lactating women and elderly (60 years plus) population. This is the 12th meeting after activating the nutrition cluster for COVID-19 preparedness and response. The meeting was chaired by Mr. Kedar Raj Parajuli, Chief of Nutrition Section of FWD/DoHS/MoHP as well as Nutrition Cluster lead of Federal Level Nutrition Cluster and co-chaired by the Mr. Anirudra Sharma, Nutrition Specialist UNICEF as well as Cluster co-lead. Altogether 130 plus people from different organizations were invited out of which 96 plus attended via zoom link.

AGENDA FOR NUTRITION CLUSTER MEETING	
Time	Agenda Items
11:00 AM	<ol style="list-style-type: none"> <li>1. Chair of the meeting, scenario setting, welcome and sharing of meeting agenda</li> <li>2. Major updates: Chair of the meeting, Nutrition cluster lead</li> <li>3. Review of action points from previous meetings: Nutrition cluster co-lead</li> <li>4. Progress updates from the provincial nutrition cluster lead (PHD Directors) – major briefs on the achievement of action points including Vitamin A campaign, screening of 6-59 months children, supply plan, continuation of nutrition services including NRH and others.</li> </ol>
To	
01:30 PM	<ol style="list-style-type: none"> <li>5. Progress from each 6 TWG with concrete action points : (i) IMAM – SFP SOP, Family MUAC and IPC in NRH, (ii) IYCF, (iii) BCC, (iv) IM, (v) Assessment, (vi) (MN)</li> <li>6. Briefing of BMS act, regulations and monitoring tools including Breastfeeding protection and promotion committee</li> <li>7. Remarks from NRH</li> <li>8. Remarks from MOFAGA</li> <li>9. Remarks from NPC</li> <li>10. Remarks from the Director of FWD/DoHS</li> <li>11. AOB and closing by Chair Mr. Kedar Raj Parajuli</li> </ol>

MAJOR DISCUSSIONS/ACTION POINTS
<b>Agenda 1: Chair of the meeting, scenario setting, welcome and sharing of meeting agenda</b>
<p><b>Chair of the Meeting:</b> Mr. Kedar Raj Parajuli, Chief of Nutrition Section of FWD/DoHS/MOHP and the National Nutrition Cluster Lead Chair the Session with Co-Chairing by Mr. Anirudra Sharma, Nutrition Specialist UNICEF and National Nutrition Cluster Co-lead.</p> <p><b>Welcome to the participants and agenda sharing:</b> Chair of the meeting welcome to the all participants via zoom link and Co-chair shared the meeting agenda as mention above</p> <p>This was the 12<sup>th</sup> virtual cluster meeting of nutrition cluster after COVID-19 Global Pandemic disease (COVID 19) arise. In this meeting, altogether 96 participants attended <u>(see annex 1 for detail of participants)</u>.</p>
<b>Agenda 2: Major briefing from nutrition cluster:</b>
Mr. Kedar Raj Parajuli, Nutrition cluster-lead presented <b>the Global and National situation of Covid-19 and the major achievements of nutrition cluster</b> . The major outcomes presented by Mr. Parajuli has been attached in the <b>annex 2</b>
<b>Agenda 3: Review of action points from previous meetings</b>
Mr. Anirudra Sharma Nutrition cluster co-lead shared the action points and progress agreed in last meeting ( <b>See Annex 3</b> for details of the status of the achievements)

**Agenda 4: Progress updates from the provincial nutrition cluster lead (PHD Directors) focusing on nutrition service continuity and monitoring of ongoing nutrition services**

Discussion	Follow up actions
<p><b>Province number 1:</b> Mr. Chandra Dev Mehta, Provincial Health Directorate updated the major highlights as follows:</p> <ul style="list-style-type: none"> <li>• Finalized ToR of provincial health and nutrition cluster and drafted preparedness and response plan to address nutrition issues in COVID-19 and monsoon situation.</li> <li>• Transported 15 cartons of RUTF to Panchthar district and planning to transport to Sankhuwashava district.</li> <li>• Reported Information collection for essential nutrition serviced.</li> <li>• MSNP Coordinators and Volunteers in 3 districts (Khotang, Udayapur and Panchthar) are supporting and facilitating to local level nutrition and food security steering committees for Covid-19 response on nutrition.</li> <li>• Distributed relief materials to 395 PLWs by local governments.</li> <li>• MSNP Coordinators and Volunteers in 3 districts (Khotang, Udayapur and Panchthar) supporting and facilitating to local level nutrition and food security steering committee for relief materials distribution targeting to PLWs where 395 received the relief materials.</li> <li>• Suaahara programme support; (i) supported District health office of Sankhuwasabha for case investigation and case management orientation and also oriented to health workers on IYCF and Suaahara community Covid19 intervention package; (ii) deployed one resource person (medical doctor) for province-1 to support Covid19 related work in province-1; (iii) coordinated 1,200 (7-9 month) pregnant women and referred them to visit birthing center for delivery; (iv) delivered 14,158 SMS to 1,000 days mother on health and nutrition and Covid19 related massage this week; (v) Suaahara field staffs continuing follow up of community people and raising awareness on Covid19 for which more than 10,000 HH were reached this week; (vi) updating nutrition stocks from the health facilities; (vii) Following up of MAM case and counselling them through phone.</li> <li>• 300 HH in Udayapur and 100 HH Morang received relief package from World Vision International.</li> <li>• Nutrition cluster discussed and recommending Health facility model in Terai and FCHV model in hills and mountainous districts for Vitamin A campaign and screening of the children aged 6-59 months as well as counselling on prevention and control of malnutrition.</li> <li>• SAM screening has been doing and has been doing through OTCs and NRH (Mechi) and even during the immunization clinic (one case identified in Hilihang Panchthar and admitted)</li> <li>• Nutrition services are being provided at quarantine camps by providing egg, milk to younger children and IFA to pregnant women</li> <li>• Procure super cereal plus. However, quality test is yet to be done.</li> </ul>	<ul style="list-style-type: none"> <li>• Develop nutrition supply plan for the province</li> <li>• Finalize and endorse nutrition response plan for Covid-19 context plan for the province</li> <li>• Finalize and endorse nutrition in monsoon emergency response plan considering Covid-19 situation</li> <li>• Continue nutrition service monitoring</li> <li>• Coordinate with the Medical Superintendent and Manager of NRH and Chief of Koshi Hospital for continuation of NRH.</li> <li>• Endorse TOR of H&amp;N cluster.</li> <li>• Prepare an action plan and implement for nutrition response to PLW and under five children in quarantine camps and isolated room</li> <li>• Develop specific plan for screening and treatment of the 6-59 months children with SAM considering Covid-19 context</li> <li>• Request to Central Medical Store and UNICEF to supply as per the request from Mechi and Koshi NRH.</li> </ul>
<p><b>Province number 2:</b> Mr. Harishchandra Shah, the Director of Provincial Health Directorate (PHD) of province number 2 briefed the following points:</p>	<ul style="list-style-type: none"> <li>• Finalize and endorse nutrition response plan in COVID-19 context and Monsoon</li> </ul>

<ul style="list-style-type: none"> <li>• COVID-19 cases are increasing, and districts have imposed restriction of movement which impacts on the service utilization and livelihood of most people. People are dying because of the lack of food. Pregnant and lactating women and children of under five years are more vulnerable and experience the adverse effects of food insecurity.</li> <li>• During meeting of Provincial Health and Nutrition Cluster held on 27th May 2020 following points were taken as action points: <ul style="list-style-type: none"> <li>- Decided the modality of Vitamin A supplementation (FCHV model),</li> <li>- MUAC screening during the Vitamin A supplementation following IPC strictly</li> <li>- Continue support and monitor the continuity of the services.</li> <li>- Decided to organize the district wise meeting with District Health Coordinators and Health Offices.</li> <li>- Continue BCC messages- airing from FMs throughout the province</li> <li>- Facilitate NRH: 2 NRHs (Rajbiraj and Birgunj) are opened and Janakpur NRH is still closed</li> <li>- Prepare the requirement of the nutrition commodities for Province 2 and will also discuss during the meeting of Provincial supply chain management working group meeting and finalize.</li> <li>- Nutrition response plan for COVID-19 – will be finalized by next Monday; similarly, nutrition response plan will also be finalized very soon considering COVID-19 situation.</li> </ul> </li> <li>• <b>MSNP Coordinators and MSNP Volunteers</b> are supporting to local levels for <b>information collection of 1000 days Households, relief distribution focused on 1000 days mothers, activation of Nutrition and Food Security Steering Committees and Health and Nutrition cluster meeting in the district.</b></li> <li>• <b>WHH and Aasman Nepal/Forward Nepal</b> have provided following support in the following districts: <ul style="list-style-type: none"> <li>- 452 pregnant mothers and 2,064 lactating mothers received counselling on nutrition, breastfeeding and complementary feeding in Saptari and Rautahat districts</li> <li>- 3,030 mothers received the soap along with the messages of prevention of COVID and participated in the Demo of Hand Washing in Saptari and Rautahat.</li> </ul> </li> </ul>	<p>response plan considering COVID-19 context for the province.</p> <ul style="list-style-type: none"> <li>• Develop detailed plan for FCHV model after an appropriate guidance from National Nutrition Cluster.</li> <li>• Develop plan with IPC measures to screen children by FCHVs during Vitamin A distribution.</li> <li>• Federal nutrition cluster to coordinate for supplementary feeding programme for young children, pregnant and lactating women.</li> <li>• Develop a plan to address nutrition issues of children under five years and pregnant and lactating women.</li> <li>• Develop nutrition supply plan for the province.</li> <li>• Continue nutrition service monitoring</li> <li>• Facilitate to continue all nutrition rehabilitation homes with IPC measures</li> <li>• Identify children with SAM and provide treatment services to them – it is urgently required to manage SAM among young children.</li> </ul>
<p><b>Bagmati province:</b> Mr. Shambhu Kafle, Public Health Administrator of Provincial Health Directorate (PHD) briefed following points:</p> <ol style="list-style-type: none"> <li>1. Continuing phone counseling by Suaahara staffs on Health and Nutrition services as well as awareness on COVID-19 to pregnant and lactating mothers including HHs members in Five implementing districts of province number 1. Till date 79,561 HHs 4,637 pregnant and lactating women are reached for phone counselling. In this week, they have reached to 11,089 HHs and 861 pregnant women.</li> <li>2. Suaahara technical officer has been continuously following up with Health Facilities to ensure availability of Health &amp; Nutrition service and commodities and as a result of 20 HF's reported that 10 HF's are stock out (Vit A, RUTF MNP) and 4 Health Facilities are reported that nutrition services as Growth Monitoring and</li> </ol>	<ul style="list-style-type: none"> <li>• Develop Province wide Vitamin A supplementation plan and propose in the next cluster meeting</li> <li>• Develop nutrition supply plan for the province</li> <li>• Continue nutrition service monitoring</li> <li>• Continue nutrition service monitoring</li> <li>• Facilitate to continue all nutrition rehabilitation homes</li> <li>• Finalize health and nutrition cluster TOR and submit for approval</li> <li>• Develop specific plan to provide treatment of SAM considering Covid-19 context wherever essential</li> </ul>

<p>IYCF is being halted. During phone counseling - this week - 2266 HHs are assessed on food availability, out of them 236 HHs referred 49 HHs benefitted from local government food aid program. During phone counseling, COVID suspected 47 persons are referred to Health Services for checkup.</p> <ol style="list-style-type: none"> <li>3. During phone counseling, COVID suspected 47 persons are referred to Health Services for checkup.</li> <li>4. Suaahara continue supporting to air nutrition related Radio program Bhanchhin Aama, COVID prevention related Hello Bhanchhin Aama and different PSAs for promotion Nutrition through 13 FMs and Radio Nepal in Bagmati Province. Also, SMS have been sent to Pregnant and lactating mothers related to Nutrition and COVID.</li> <li>5. In addition to this, audio message related to Covid prevention developed by Health directorate is also airing by all 14 FMs in Suaahara program districts.</li> </ol>	<ul style="list-style-type: none"> <li>• Finalize and endorse nutrition response plan in Covid-19 situation for the province</li> <li>• Finalize and endorse nutrition in monsoon emergency response plan considering Covid-19 situation</li> <li>•</li> </ul>
<p><b>Gandaki Province:</b> On behalf of Gandaki Province, Mr. Nawaraj Sharma, the health education and communication officer of Provincial health Directorate briefed the following points:</p> <ul style="list-style-type: none"> <li>• Resumed the NRH of Parbat from last week. Three mal-nourished cases are under treatment.</li> <li>• Distribution plan of received Commodities from Province 5 to concern authorities is ready. It's already informed to concern districts and NRHs.</li> <li>• Regularise MR campaign.</li> <li>• Prevalence of COVID-19 infection in Gandaki Province is increasing. Recently, 2 cases in Syangja and 4 cases in Baglung are confirmed.</li> <li>• Risk Communication and community engagement activities are smoothly conducting by Suaahara in 6 program districts of Gandaki province. Till the date, 91296 HHs were reached by telephone counseling. Out of them, 26173 HHs were 1000 days' Households, 193 suspected people were referred for health check-ups, 1851 HHs were referred for food relief from local government. Similarly, radios messages have been massively broadcasting on daily basis through 16 different FM stations of Gandaki Province.</li> </ul>	<ul style="list-style-type: none"> <li>• Develop nutrition supply plan for the province</li> <li>• Finalize and endorse nutrition response plan in Covid-19 situation for the province</li> <li>• Finalize and endorse nutrition in monsoon emergency response plan considering Covid-19 situation</li> <li>• Include nutrition response to the children under five years and PLWs of quarantine camps in the COVIS-19 response plan</li> <li>• Facilitate to continue all nutrition rehabilitation homes</li> <li>• Monitor essential nutrition services ongoing in the provinces</li> <li>• Activate all NRH and OTCs for the treatment of 6-59 months children with SAM.</li> <li>• Develop Vitamin A Province Wide Supplementation plan and mechanism to do screening during campaign.</li> <li>• Develop Specific strategy to provide screening services to the children 5-69 months.</li> </ul>
<p><b>Province number 5:</b> On behalf of Provincial Health directorate, Ms. Huma Kumari Pun, Senior Health Administrator briefed the following points:</p> <ul style="list-style-type: none"> <li>• Traced total 12 people including PLWs, and under-five children in isolation and quarantines of 3 districts (Banke, Kapilvastu, and Rupandehi). Among them, 1 PLW, 2 lactating mothers and three children aged 3-4 are Corona positive. Coordinated with respective Health Offices and hospitals for providing necessary nutrition services to them.</li> <li>• Ongoing follow-up of positive cases and those in quarantines. One positive PW and one PW from quarantine have been discharged.</li> <li>• The nutrition status of 4-year-old girl child in Bhim Hospital deteriorated as she did not eat properly, and doctor started giving her RUTF.</li> <li>• All the children in quarantine received MNP. One young child aged 17 months in quarantine, whose both parents are positive</li> </ul>	<ul style="list-style-type: none"> <li>• Develop province wide Vitamin A supplementation plan based on the situation not to leave the eligible children</li> <li>• Develop detail plan for nutrition commodities and asks to the FWD/federal nutrition cluster.</li> <li>• Finalize and endorse nutrition response plan in Covid-19 situation for the province</li> <li>• Finalize and endorse nutrition in monsoon emergency response plan considering Covid-19 situation – integrating children and PLWs of quarantine camps</li> <li>• Continue nutrition service monitoring</li> </ul>

<p>and under observations is being taken care by relatives, HW, and the ward chairperson.</p> <ul style="list-style-type: none"> <li>• A 11.5 months old girl child identified with SAM is provided with treatment with RUTF and is called for follow-up on Sunday.</li> <li>• Radio PSA on breastfeeding in COVID-19 context is ready with support from UNICEF and will be in air from next week.</li> <li>• 4 SAM children from Dang, Banke, and Rupandehi are enrolled in OTC and 29 defaulter cases were follow-up. Suaahara coordinated with Siyari Rural Municipality of Rupandehi to provide one crate of eggs, 1 kg of Super flour, and MNP to one SAM child.</li> <li>• 2449 PLWs received nutrition counseling.</li> <li>• With support from Suaahara, stock status in 86 HFs, and with 50 FCHVs monitored and the stock-out status of 27 HFs are reported to respective Health Offices.</li> </ul>	<ul style="list-style-type: none"> <li>• Facilitate to continue all nutrition rehabilitation homes</li> <li>• Develop alternative modality to bring SAM children to NRH and OTCs for treatment.</li> </ul>
<p><b>Karnali province:</b> Ms. Man Kumari Gurung, Public Health Nurse of Provincial Health Directorate briefed the following points from PHD of Karnali province:</p> <ul style="list-style-type: none"> <li>• Health and Nutrition cluster formed, and functional.</li> <li>• Conducted Provincial level nutrition and food security steering committee meeting and discussed on how can be given priority to nutrition program in the upcoming fiscal year.</li> <li>• With the support from UNICEF, nutrition BCC messages are been aired from different 14 FMs of the province covering all districts of the province. 7, 18, 729 (40% of total population) people has reached through the nutrition messages, out of which 1, 43, 835 women with reproductive age group has listened to this message.</li> <li>• With support from WFP distribution of the Government's Super Cereal for May 2020 completed in 97 HFs, ongoing in 20 HFs and plans to start the distribution in 11 HFs within this week for an estimated 29,000 PLW and children 6 to 23 months in 5 Karnali districts under MCHN programme</li> <li>• SUA AHARA supporting under "Bhanchhin Aama" through 12 FM radios and 250 field staff on capacity development activities at field level, Save the Children supporting IECs, RMNCHN and nutrition messaging through FM radios and SSBH continuing to support system strengthening of local governments.</li> <li>• More coordination with local governments needed following many returnees from India arriving in the districts, fears abound among people as per local sources, more material, managerial and technical support from all organizations to help government better manage the quarantine set-ups needed.</li> <li>• Vitamin-A capsule support is needed from federal government.</li> </ul>	<ul style="list-style-type: none"> <li>• Develop province wide Vitamin A supplementation plan and propose in the next cluster meeting</li> <li>• Develop supply plan for the province for nutrition response and asks for FWD/federal nutrition cluster</li> <li>• Finalize and endorse nutrition response plan in Covid-19 situation for the province</li> <li>• Finalize and endorse nutrition in monsoon emergency response plan considering Covid-19 situation – integrating children and PLWs of quarantine camps</li> <li>• Continue nutrition service monitoring</li> <li>• Monitor the nutrition situation of upper Karnali districts and support for nutrition supplies</li> <li>• Identify the options to bring SAM children to the NRH and OTCs for treatment.</li> <li>• Integrate MUAC screening of 6-59 months children during distribution of Supercereal in five districts of Karnali province</li> </ul>
<p><b>Sudur Paschim province:</b> Dr Bhusan Mishra and Mr Min raj joshi of Provincial Health Directorate of Sudurpaschim Province briefed the following points:</p> <ul style="list-style-type: none"> <li>• Health and Nutrition cluster formed.</li> </ul>	<ul style="list-style-type: none"> <li>• Develop province wide Vitamin A supplementation plan and propose in the next cluster meeting</li> <li>• Develop nutrition supply plan for the province</li> </ul>

<ul style="list-style-type: none"> <li>• With the support from UNICEF and SAAHARA commodities stock taking and functionality of OTCs and NRHs is being carried out and is regularly ongoing.</li> <li>• One NRH (Dhangadhi) out of 3 from the province has been operated and 7 children are admitted for treatment.</li> <li>• Kanchanpur and Dadeldhura NRH will take time to operate as it has been converted to isolation for treatment of COVID-19.</li> <li>• SAAHARA, UNICEF and MoFAGA-MSNP team regularly follow up for SAM management and at recent SAAHARA supported to manage 2 case referring to Dhangadhi NRH and follow up SAM case and 9 SAM children admitted in OTC in Kailali in last week.</li> <li>• With the support from UNICEF and SAAHARA, nutrition BCC messages are being aired in three different languages (Nepali, Doteli and Tharu) regularly from different 42 Local FMs (19 from UNICEF and 23 from SAAHARA) of the province covering all districts of the province. Approx. 40% people has reached through the nutrition messages.</li> <li>• This week total 23,417 (Total 1,65,869 HHs) Households are counselled by SAAHARA front line worker, has send push message to HHs, expert interview conducted and send message thorough social media about COVID-19 and Nutrition promotion.</li> <li>• This week 49 Health Facility (Total 377HHs) counselling done by SAAHARA technical officers for and support for reviving the services.</li> </ul>	<ul style="list-style-type: none"> <li>• Develop Covid-19 response plan for the province</li> <li>• Finalize and endorse nutrition response plan in Covid-19 situation for the province</li> <li>• Finalize and endorse nutrition in monsoon emergency response plan considering Covid-19 situation – integrating children and PLWs of quarantine camps</li> <li>• Facilitate to continue all nutrition rehabilitation homes</li> <li>• Develop an implementation plan to reactivate Stabilization Centers in the IMAM districts</li> <li>• Develop and apply alternative mechanism to bring 6-59 months children with SAM to the NRH and OTCs.</li> </ul>
<b>Technical Working Group (TWG)</b>	
<p><b>Information Management (MN) TWG:</b> Ms. Manisha Shrestha, member of IM TWG explained the following points in nutrition cluster:</p> <ul style="list-style-type: none"> <li>• Ongoing collection of information of nutrition services. Out of 20 districts, the information was collected from 10 districts. Started information collection process from 20 second phase districts.</li> <li>• The information from remaining 10 districts will be collected within a week and compiled and disseminated.</li> <li>• Updated Nutrition 3W mapping-General for the nutrition intervention</li> <li>• Updated bi-weekly Covid-19 response tracking sheet</li> <li>• First phase of data collection is completed. There is data from only 10 districts. Partner are continuing the data collection in the remaining districts and health facilities.</li> <li>• First phase of data collection was share in the cluster meeting.</li> </ul>	<ul style="list-style-type: none"> <li>• Coordinate agencies to complete the nutrition information based on NIS from the remained districts planned for the first phase</li> <li>• Start data collection from 20 districts planned for second phase</li> </ul>
<p><b>Micro-nutrient (MN) TWG:</b> <b>Micro-nutrient (MN) TWG:</b> Mr. Naveen paudel, the Chair of MN TWG briefed that MN TWG has presented the outcomes of MN TWG discussed on the Vitamin A supplementation which was postponed by MoHP until further notice. Major points were as follows:</p> <ul style="list-style-type: none"> <li>• Ongoing continuous advocacy through Nutrition Cluster meetings and information received is, VAC will arrive in country by the end of May 2020.</li> <li>• Three option identified for VAS distribution: (1) Health Facility as contact point, (2) FCHV/ Parents and caretakers as contact point, and (3) ORC as contact point.</li> </ul>	<ul style="list-style-type: none"> <li>• Based on the information shared by Provincial Cluster/Health Directorate in the nutrition cluster meeting, MN TWG to prepare final modality for VAC supplementation nationwide, and;</li> <li>• Develop final draft of guidance note for Vitamin 'A' supplementation considering COVID-19</li> </ul>

<ul style="list-style-type: none"> <li>• A draft VAS guideline shared in the nutrition cluster with health facility as contact point for VAC distribution in Covid 19 context. However, waiting further response from the Provincial Health Service Directorate if FCHV/ Parent and Caretakers as contact point is still feasible under Covid 19 considering all technical difficulty and operation problem associated with the FCHVS/ Parents and Caretakers as option..</li> </ul>	
<p><b>IYCF TWG:</b> On behalf of IYCF TWG, Ms Bhim Kumari Pun, Senior Manager from SUSAHARA/USAID briefed the following points:</p> <ul style="list-style-type: none"> <li>• Final version of the joint statement was submitted to nutrition cluster for endorsement</li> <li>• Ongoing development of NUTRITION App</li> <li>• Vender selection process is completed. A meeting with concern stakeholders is scheduled on 29 May from 2-3 PM wider discuss on it.</li> <li>• No reporting of violations of BMS act except nation reputed media</li> <li>• SBC TWG members are worked on this issue</li> <li>• IYCF TWG meeting was held on 27 May 2020 and decided/ requested to take lead by Nutrition section chief on this matter.</li> <li>• Ongoing,</li> </ul> <p><b>Challenges – to put in action point</b></p> <ul style="list-style-type: none"> <li>• Establish a mechanism of counselling through FCHV at household levels.</li> <li>• phone-based counselling in all the 77 districts.</li> <li>• Get update phone # of FCHVs &amp; HH</li> </ul>	<ul style="list-style-type: none"> <li>• Propose to endorse IYCF-E statement in next nutrition cluster meeting for endorsement</li> <li>• Complete the process for developing NUTRITION App (standalone)</li> <li>• Develop monitoring mechanism as per BMS act and regulations by coordinating with MoHP.</li> <li>• Initiate dialog with media persons from different forums</li> <li>• Coordinate with MoHP to reactivate BPPC committee at federal and form BPPC at province level to monitor BMS act and regulation</li> </ul>
<p><b>IMAM TWG</b></p> <ul style="list-style-type: none"> <li>• Interim SOP for Blanket Supplementary Feeding Programme (BSFP) targeting children and PLW has been drafted and circulated for feedback/comments. FBF calculations (target population and requirements) and area selection criteria for BSFP are being developed.</li> <li>• Family/mother MUAC concept note has been drafted and circulated for feedback / comments among TWG members.</li> <li>• IMAM TWG members have identified need for assessment of Nutrition Rehabilitation Homes (NRHs) and has requested Assessment TWG for support.</li> </ul>	<ul style="list-style-type: none"> <li>• Develop interim guidance note for Supplementary feeding (blanket and targeted)</li> <li>• Develop mechanism to initiate Family/ Mother MUAC (videos, supply chain of MUAC tapes, global guidance etc.) along with other alternatives such as; EPI clinics, MCHN, targeted mobile services from partners mobilizing FCHVs and HWs etc.</li> <li>• Develop IPC measures for NRH (status, challenges, assessment etc.) – some alternative modality</li> <li>• Consider a strategy for weekly phone follow up and implementation.</li> </ul>
<p><b>BCC TWG:</b> On behalf of BCC TWG Mr. Kunj Joshi, the Chair of BCC TWG from NHEICC briefed as follows:</p> <ul style="list-style-type: none"> <li>• New episode of Hello Bhanchhin Aama broadcast through over 120 radio stations in 42 districts and Radio Nepal National network</li> <li>• Integrate and broadcast/disseminate nutrition messages in Corona capsules and Corona care programme broadcasting through FM radio and TV</li> <li>• Friday (today) 6:30 to 7:00 pm, half an hour radio interview on “Avenues” television for importance of breastfeeding, infant and young child feeding during COVID-19.</li> </ul>	<ul style="list-style-type: none"> <li>• Develop monitoring mechanism to monitor the messages disseminated through different media such as; FM radios, TV and others.</li> <li>• Identify coverage status of nutrition messages whether nutrition messages cover throughout the country or not.</li> <li>• Integrate and broadcast/disseminate nutrition messages in Corona capsules and Corona care programme broadcasting through FM radio and TV</li> </ul>

<ul style="list-style-type: none"> <li>• Suaahara/USAID is working on adding the COVID-19 related SMS on the existing breastfeeding PSA and will soon start broadcasting through partner radio stations.</li> <li>• Initial meeting with IMAM TWG and IYCF TWG for developing video on Family MUAC and developing IPC materials for FCHVs.</li> </ul>	<ul style="list-style-type: none"> <li>• Organize a virtual interaction programme/conference with journalist from reputed national medias on IYCF and Breast Milk Substitute Act (1992) under leadership of FWD &amp; NHIECC.</li> <li>• Identify the contract numbers of FCHVs and develop mechanism to orient them on IYCF and other nutrition related topics</li> </ul>
<p><b>Nutrition Assessment Group:</b> On behalf of Nutrition Assessment Group Mr. Sanjay Rijal, Chair of assessment TWG updated the following points:</p> <ul style="list-style-type: none"> <li>• Drafted SOP to carry out SMART survey in the context of Covid-19</li> <li>• Sample size calculation</li> <li>• Tentative budget per district</li> <li>• Draft Workplan for SMART survey</li> <li>• Drafted Matrix for mapping resources (organizations, available fund and required fund)</li> <li>• Support to IMAM technical working Group for rapid assessment (needs further discussion)</li> </ul>	<ul style="list-style-type: none"> <li>• Finalize concept note of SMART survey</li> <li>• Assess for the funding arrangement</li> <li>• Finalize action plan for SMART survey</li> <li>• Coordinate for PPE and other IPC measures to conduct SMART survey</li> </ul>
<p><b>Agenda: Briefing of BMS act, regulations and monitoring tools including Breastfeeding protection and promotion committee</b></p>	
<p>Ms. Nisha Sharma, from Research Manager-ARCH, HKI presented the Nepal's Breast-milk Substitute Act 2049. The presentation has been attached herewith.</p>	<p>Family Welfare Division and IYCF TWG to work with BMS protection Committee for further actions to establish BMS protection committee and develop effective monitoring mechanism for BMS monitoring</p>
<p><b>Agenda 6: NRH update and information sharing</b></p>	
<p><b>Discussion</b></p>	<p><b>Follow up actions</b></p>
<ul style="list-style-type: none"> <li>• Dr. Pradeep Mishra, Seti Zonal hospital briefed about NRH of Seti Hospital. He explained that we are all aware of nutritional status of children prior to COVID-19, during COVID-19 and post COVID-19. In Seti hospital during pre-COVID-19 the nutritional status was highly vulnerable, during COVID-19 number malnourished children rate has been increased. However, due to the lockdown and lack of community approach, the cases are not coming to the NRH. After COVID-19, the number of malnourished children will be exponentially high. For these we have only three NRH in Sudurpaschim Province and this will be very less in comparison to the number of malnourished children to be treated. So, we should start to establish and treat children in community setting/district hospital also. In community setting/district, MAM children should be treated which prevents them from suffering to SAM and the severe one should only be referred to NRH.</li> <li>• For the management of SAM children through NRH and its implication mechanism they are having frequent meeting with Provincial Director Dr Guna Raj Awasthi.</li> <li>• He also focused on survey done by HKI 2013 regarding BMS Act and from that survey it was found that the most culprit to violate BMS ACT is the health workers. He added one of the causes during summer season might be dehydration fever to the mothers and they are unable to express milk as they could do. During this time the health personnel have only two options one is to rehydrate mothers and the next is to suggest providing Breast Milk Substitute to the child.</li> </ul>	<ul style="list-style-type: none"> <li>• Continue NRH to provide treatment of 6-59 months children with SAM</li> <li>• Develop protocol/policy to manage MAM children in community and hospital/district hospital settings and the severe one only should be referred to the NRH.</li> </ul>

**Remarks from Ms. Bhola Gautam on behalf of MoFAGA**

Ms. Bhola Gautam on behalf of MoFAGA highlighted the following points:

- After recommendation from National Nutrition cluster meeting PLNFSSC meeting were held in several provinces (Sudur Paschim, Karnali, Gandaki, Bagamati). Similarly, the LLNFSSC meeting are being held in several local government levels. MoFAGA, UNICEF, MSNP district coordinators and volunteers have been facilitating and providing technical support to make these meetings more effective and focused for the prevention and support to G1000 days mothers.
- In local level MSNP district coordinators and volunteers have been supporting to provide Health desk formation, quarantine management and coordination to distribute relief package. In 308 palikas of 30 MSNP districts, 581,000 people received relief package and out of those 131,000 G 1000 days mothers were included to receive relief package.
- MSNP district coordinators and volunteers are continuously doing advocacy and lobby for the management of nutrition especially focusing on G1000 days mothers in this COVID -19 context.
- MoFAGA, UNICEF, MSNP district coordinators and volunteers have been supporting to prepare preparedness, response and recovery plan focusing on COVID-19 and other humanitarian context and till date 61 districts out of 77 districts has already prepared and are in frequent contact with the team to support it.

**Remarks of Dr Binod Giri, Provincial Health Director of Province number five**

High number of COVID-19 cases are identified in Province number five, until 18 May 2020, province number five was leading for this. Now, Province 2 has overlapped it. We are working continuously to provide basic health and nutrition services. Since Nutrition program is multisector and multidimension program, we should more focus to reach out the affected/infected population to provide nutrition services. At this stage, food, WASH and nutrition is very critical in the province everywhere and also in the quarantine camps. Community transmission of COVID-19 has been started in Nepal and mostly it is seen in Province number five and two. Due to the very poor situation of food, WASH and nutrition, he added that he has requested to National nutrition cluster to support for nutrition status for quarantine camps and in the most vulnerable areas focusing to focusing on G1000 days mothers.

**Action points:**

- The priority should be supplementary food should be provided at quarantine camps focusing on G1000 days mothers to prevent from hunger and death.
- Nutrition cluster to coordinate with federal government to plan to address these three issues as soon as possible.

**Remarks from National Planning Commission:** On behalf of National Planning Commission, Ms. Anju Acharya has shared some of the following points:

- NPC has requested through letters to Provincial Planning Commission and Ministry of Finance (MoF) to prepared next year Fiscal Budget plan giving priority more on Covid-19 context.
- NPC has also requested and coordinated through letters to all seven PLNFSSC for scale-up, strengthen and budget allocation for MSNP program.
- For these MSNP district coordinators and volunteers are supporting for dissemination for letters.

**Action points:**

- Nutrition cluster to coordinate with National Planning Commission to organize Nutrition and Food Security Coordination Committee through virtual meeting.

**Remarks from Dr Bhim Singh Tinkari, Director, Family Welfare Division, DOHS/MoHP**

Dr. Bhim Singh Tinkari, Director family Welfare Division thanked to all presenters, and participants including to all provincial government, nutrition cluster lead and co-lead, UNICEF and other development partners for their updates, coordination, management of nutrition in current context. he also added that the basic services should be continued and there is a fear that many people may die due to lack of food, health services and social security rather that COVID. Therefore, basic health services should be continued. Therefore, Government has been working to address COVID-19 together with essential basic service delivery.

**Action Points:**

- Continue all basic health and nutrition services in the Covid-19 context also. As a result of the lockdown and fear of COVID-19, there are maternal deaths more than previous years. Therefore, all basic health and nutrition services such as; safe motherhood, nutrition, immunization, child health should be equally prioritized continued together with the services to address COVID-19 .
- Cluster meeting should be organized in a coordinated way with other relevant sectors such as; health, WASH, food and other sectors .

**Closing of the meeting and next nutrition cluster meeting**

Mr. Anirudra Sharma, the nutrition cluster co-lead and the meeting facilitator thanked to the meeting Chair Mr. Parajuli, Director of FWD Dr Tinkari and their team members for their excellent leadership and coordination for nutrition programme management in such very difficult context. Similarly, he also thanked and appreciated to all presenters (provincial Directors and representatives), nutrition cluster members at federal and provincial levels, NRH staff members and all participants for their active participation in the cluster meeting. Similarly, he requested to **Mr. Kedar Raj Parajuli, Chief of Nutrition section of FWD and Federal level nutrition cluster lead** to close the meeting with his closing remarks. During the remarks, Mr. Parajuli highlighted the following points:

- Every week the cluster meeting is taking more time than expected and we will try our best to complete next cluster meeting within the time frame.
- He thanked to all participants including Chief of Family Welfare Division, provincial health Directors and other representatives from NPC, MOFAGA, all cluster members from federal and provincial nutrition cluster as well as other invitees;
- Multisector approach with all sector should be activated and request to invite all sectors in the next cluster meeting.
- Basic health services such as NCD, communicable disease, immunization, Nutrition, Reproductive health should be prioritized aligning with Covid-19 context.
- He closed the meeting by announcing the next nutrition cluster meeting to be held on **Friday, 23<sup>rd</sup> Jestha 2077 (5<sup>th</sup> June 2020) from 11:00 to 13:00 hrs. via zoom link.**

The zoom link and agenda for next meeting will be shared as soon as possible.

## **Annex 1: List of Participants in the meeting:**

1. Dr. Bhim Singh Tinkari, Director of Family Welfare Division
2. Mr. Kedar Raj Parajuli, Chief of Nutrition Section of FWD/DOHS/MoHP –Nutrition cluster lead
3. Mr. Anirudra Sharma, Nutrition Specialist, UNICEF – Nutrition cluster co-lead
4. Dr. Krishna Bista, Chairperson, Nepal Pediatrics Society
5. Dr. Binod Giri, health directorate, province 5
6. Ms. Rita Joshi, Health Directorate, Karnali Province
7. Mr. Harish Chand Shah, Provincial Health directorate, Province 2
8. Mr. Kunja Joshi, Senior Health Education Administrator, NHEICC
9. Dr. Bhushan Mishra from PHD, Sudurpaschim Province
10. Dr. Pradeep Mishra, Pediatrics of Seti Zonal Hospital
11. Dr. Punya Poudel, chief of safe motherhood, FWD
12. Ms. Kabita Aryal, chief of Adolescent and Reproductive Health, FWD
13. Mr. Shambhu Kafle, PHA, PHD Bagamati province
14. Dr. Shailesh Thakur, Narayani Provincial Hospital, Birgunj
15. Mr. Minraj Joshi, health Assistant, Sudur Paschim Province
16. Ms. Kalpana Pandey, FWD/DOHS/MoHP
17. Ms. Meena Mote, FWD/DOHS/MoHP
18. Mr. Harihar Prasad Sharma, FWD/DOHS/MoHP
19. Mr. Nawaraj Sharma, Health Education and Communication Officer, PHD, Gandaki Province
20. Mr. Om Prakash Yadav, Health Assistant, PHD, Province 1
21. Mr. Dharmendra Neupane, Pharmacy Officer, PHD, Karnali province
22. Mr. Debendra Adhikari, Nutrition Specialist, USAID
23. Ms. Dale Davis, Country Representative, HKI
24. Ms. Pooja Pandey Rana, Deputy Chief of the Party, Suahaara II/USAID
25. Mr. Anteneh Grima, Nutrition Advisor, WFP
26. Ms. Naomi Saville, Nutritionist, WFP
27. Ms. Bhim Kumari Pun, Senior Manager, Suahaara II
28. Mr. Santosh Acharya, Programme Officer, UN Women
29. Mr. Jeevan Ghimire, Health policy Officer, DFID
30. Mr. Gyan Bahadur Bhujel, Nutrition officer, UNICEF
31. Mr. Sanjay Rijal, M and E officer, UNICEF
32. Ms. Anju Adhikari, Nutrition officer, UNICEF/FWD
33. Mr. Indra Bhujel, Governance Expert, UNICEF
34. Ms. Anju Acharya, MSNP expert, UNICEF
35. Ms. Astha Thapa, PHD, Province number 1
36. Ms. Sabina Hora, Nutrition and IEC Experts/HKI
37. Mr. Sujay Nepali Bhattacharya, Head of Health and Nutrition department, ACF
38. Ms. Manisha Katwal, Senior Program Officer, Health and Nutrition, ACF
39. Ms. Pabitra Sapkota MSNP Coordinator, Karnali Province
40. Mr. Sandesh Adhikari, NTAG
41. Mr. Binod Kumar Aryal, Senior programme Manager, GHAN
42. Ms. Abhilasha Gurung, World Vision International
43. Ms. Sarita Yadav, NRH Birgunj
44. Mr. Ngima T. Sherpa, Chairperson, HHESS
45. Ms. Aarju Hamal, Nutrition Officer, HHESS
46. Dr. Maureen Dariang, Lead Advisor, NHSSP
47. Ms. Nisha Singh, Knowledge Management Officer, Aasman Nepal
48. Mr. Phulgendra Prasad Singh, Nutrition Officer, UNICEF
49. Ms. Sumi Maskey, Nutrition Officer, UNICEF

50. Ms. Dibya Manandhar Rijal, Nutrition Officer, UNICEF
51. Mr. Prakash Joshi, Nutrition Officer UNICEF
52. Ms. Bindu Panthi, Nutrition Officer, UNICEF
53. Mr. Sudip Chiluwal, Program Coordinator, NEPHEG
54. Mr. Nanda Adhikari, Coordinators, SDPC
55. Mr. Amrit Gurung, WFP, Karnali Province
56. Mr. Raj Nandan Mandal, Nutrition Advisor, SUSAHARA II /USAID
57. Mr. Nitesh Shrestha, Community Nutrition Specialist, Suaahara II/USAID
58. Mr. Chiranjibi Dahal, Care Nepal
59. Mr. Lokendra Thapa, SUSAHARA II /USAID
60. Mr. Yam GC, SUSAHARA II /USAID
61. Mr. Sunil Khatiwada, SUSAHARA II /USAID
62. Ms. Femila Sapkota, Nutrition Manager, SUSAHARA II /USAID
63. Mr. Krishna Prasad Lamsal, WFP/FWD
64. Mr. Gyanendra Dawadi, MSNP coordinator
65. Mr. Rajendra Adhikari, Suaahara II/USAID, Surkhet
66. Mr. Bharat Sarma - Program Coordinator/Provincial Focal person Province-1, Suaahara II/USAID
67. Mr. Bhola Gautam, IMO, MOFAGA
68. Mr. Bhumishwar Sharma-MSNP Coordinator, MoFAGA
69. Mr. Chiranjibi Dahal-program coordinator/provincial focal person, province-3, Suaahara II/USAID
70. Dr. Atul Upadhyay, CEO, Baliyo Nepal Nutrition Initiative
71. Ms. Thuma Pun, Nursing Officer, Health Directorate/ province 5
72. Mr. Raj Kumar Mahato, World Health Organization, Provincial Health Officer, Bagmati Province
73. Mr. Deependra Chaudhari, Project Coordinator- Nutrition, Welthungerhilfe (WHH)
74. Mr. Shraddha Manandhar, Program Coordinator, Save the Children
75. Mr. Manis Thakur, MSNP Coordinator, Saptari
76. Mr. Hemanta Jha, MSNP Coordinator (Province #2)
77. Ms. Ritika Dahal, MSNP Coordinator (Bagmati Province)
78. Mr. Bhumi Sharma, MSNP Coordinator (Gandaki Province and Province #5)
79. Mr. Man Bahadur Kunwar, MSNP Coordinator (Sudur Pashchim Province)
80. Mr. Bhola Gautam, Reporting and Documentation Officer, MoFAGA
81. Mr Deepak Adhikari, Logistic Management Officer, Logistic Management Division, Kathmandu
82. Ms. Laxmi Ghimire, Program Director, NPC
83. Mr. Lokendra Thapa SUSAHARA II/USAID Program Coordinator, Sudurpaschim Province
84. Ms. Puja Chand Dadeldhura NRH, Program Manager.
85. Ms. Prabha Singh, Surkhet NRH
86. Ms. Indra Bhatta, Kanchanpur NRH
87. Ms. Sunita Rimal, NYF, Kathmandu
88. Mr. Binod Kumar Aryal, GHAN
89. Ms. Sanjeev Lama Ghishing, DC, Rautahat/Sarlahi, MSNP, MoFAGA
90. Ms. Chhamkala Kafle program manager (Bharatpur NRH)
91. Ms. Kusum K. C. NRH coordinator from Dailekh
92. Mr. Deependra Chaudhari, Welthungerhilfe
93. Ms. Gita Bista, NRH Kailali
94. Ms. Nisha Sharma, HKI
95. Mr. Kuber Prasad Adhikari, Health Nutrition and WASH lead, World Vision International
96. Mr. Uttam Acharya, Nutrition Specialist, FAO

## Annex 2: 12th Meeting of National Nutrition Cluster (29 May 2020)

### Major Updates (last week situation):

सुचाङ्क	विश्वको अवस्था		नेपालको अवस्था	
	२१ मे २०२०	२८ मे २०२०	२१ मे २०२०	२८ मे २०२०
संक्रमण देखिएको	५,१३१,२४४	५८३३७९५	४५७	१,०४२
मृत्यु भएका	३३१,०८७	३५८,४३८	०३	५
निको भएका	२,०४४,७९५	२,५२६,८८४	४९	१८७
PCR परिक्षण गरिएको			३८,७३७	६०,९१६
RDT परिक्षण गरिएको			७८,६९५	१०२,०३४
क्वारेन्टाइनमा			२५,०३०	८६,०५७
आइसोलेसनमा (पुस्टि भएका केशहरु)			४०२	८५०
संक्रमण पुस्टि भएका जिल्लाहरु				५१

### Last week Progress:

- In province number five, 13 pregnant and lactating women and 5 under five children are in three isolation and quarantine camps. Among these 3 children and 2 lactating women are positive. These children and pregnant and lactating women are receiving nutrition counselling services. In the isolation, one child is with SAM and treating by RUTF also.
- 2,882 Golden1000Days HHS received nutritious relief package from the local governments in this week.
- 14,158 HHs were reached with SMS messages on IYCF in this week.
- 37,023 PLWs were counselled with telephone in this week
- 29,000 PLWs received Supercereal plus in this week.
- Golden1000Days population is as follows:

0-23 months	1,224,926
Expected pregnancies	753,866
<b>Total G1000D population</b>	<b>1,978,792</b>

- Ongoing airing the BCC messages on nutrition in Covid-19 context from more than 147 FM radio services nationwide.
- Approximately 90% OTCs have RUTF for the treatment of the children with severe acute malnutrition. However, as per HMIS only 676 children aged 6-59 months with SAM admitted in the OTCs nationwide in last three months (Phagun, Chaitra and Baishakh).
- IYCF TWG has prepared joint statement on IYCF and caution about unnecessary and potentially harmful donations and feeding of Breast Milk Substitutes which will be proposing nutrition cluster today for endorsement.
- IMAM TWG has drafted interim SOP for BSFP, concept note for family / mother MUAC and Assessment checklist to assess the IPC status of NRHs and circulated to the TWG members for comments.
- Micro-nutrient TWG drafted a VAS guideline shared with in the last nutrition cluster as health facility a contact point for VAC distribution under Covid 19 context.
- Information management TWG has been leading for information collection of the ongoing nutrition services. The status will be presenting in next nutrition cluster meeting
- IMAM and IYCF guidance notes are already in the field with health workers and community outreach workers for interim use in Covid-19 context.
- Ongoing discussion to manage supplementary feeding programme to prevent acute malnutrition of under five children, pregnant and lactating women.

### Annex 3: Achievement against action points agreed in the nutrition cluster meeting (22 May 2020)

SN	Action Points	Progress	Remarks
<b>Federal level</b>			
1.	Coordinate for Supplementary Feeding programme to prevent acute malnutrition of 6-59 months children and Pregnant and lactating women	Ongoing coordination with NPC, DoHS, WFP and UNICEF, series of meeting ongoing and resources to be identified still.....	
2.	Coordinate to Provincial Health Directorates to develop implementation plan for Vitamin A supplementation in the provincewide in the concerned provinces	National Vitamin A supplementation plan will be coming from PHD based on their own, once plan is prepared.	
3.	Coordinate NPC to organize nutrition and food security Coordination committee meeting to update on and plan for nutrition response in Covid-19	Ongoing coordination with NPC for the provision of blanket supplementary food	
4.	Coordinate with Food Security Cluster to strengthen nutrition and food security response through coordinated way	Meeting between Nutrition and FSC co-lead agencies will be held today and discuss about SFP and other collaboration between nutrition and food security matters	
5.	Coordinate for IPC measures and social distancing in the NRH and revitalize all NRH for the treatment of SAM and/with medical complications.	IMAM TWG has been working for the IPC measurement process in the NRH	
6.	Follow up of the procurement status of nutrition commodities (Vitamin A, RUTF, MNP etc..)	RUTF and Vitamin A is on the way to Nepal from India	
7.	Coordinate with each Technical Working Group of Nutrition cluster to achieve the agreed action points.	Ongoing coordination, lead and co-lead also attending in the TWG meetings as per the time permits	
8.	Coordinate with MoHP to address the issues of "Stigma" against Covid-19 cases and replace the word "Sealed" by other appropriate words.	It will be discussed with incident chief/health cluster lead next week.	
9.	Ensure nutrition supply provisions on Programme districts and the areas where the situation becomes deteriorated – RUTF, Balvita, Vitamin A etc....	Need to discuss more based on the supply plan to be received from all PHDs	
10.	<p><b>Micronutrient TWG:</b></p> <ul style="list-style-type: none"> <li>Advocate with the government to bring Vitamin A capsules in the country on time and transport them</li> <li>Identify the specific options for Vitamin A supplement to 6-59 months children and develop a guideline for the implementation.</li> <li>Develop final draft of guidance note for Vitamin 'A' supplementation considering COVID-19</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing continuous advocacy through Nutrition Cluster meetings and information received is, VAC will arrive in country by the end of May 2020.</li> <li>Three option identified for VAS distribution: (1) Health Facility as contact point, (2) FCHV/ Parents and caretakers as contact point, and (3) ORC as contact point.</li> <li>A draft VAS guideline shared in the nutrition cluster with health facility as contact point for VAC distribution in Covid 19 context. However, waiting further response from the Provincial Health Service Directorate if FCHV/ Parent and Caretakers as contact point is still feasible under Covid 19</li> </ul>	

		considering all technical difficulty and operation problem associated with the FCHVS/ Parents and Caretakers as option.	
11.	<b>IYCF TWG:</b> <ul style="list-style-type: none"> <li>Finalize IYCF-E statement for nutrition cluster</li> <li>Initiate process for developing NUTRITION App (standalone)</li> <li>Continue monitoring compliance of BMS Act and ensuring dissemination of IYCF messages in line with the guidelines.</li> <li>Initiate dialog with media persons from different forums</li> <li>Coordinate with MoHP to reactivate BPPC committee at federal and form BPPC at province level to monitor BMS act and regulation</li> <li>Coordinate and compile different mode of IYCF counselling in Lockdown situation and recommend the lesson learned to all cluster members</li> </ul>	<ul style="list-style-type: none"> <li>Final version of the joint statement was submitted to nutrition cluster for endorsement</li> <li>Ongoing development of NUTRITION App</li> <li>Vender selection process is completed. A meeting with concern stakeholders is scheduled on 29 May from 2-3 PM wider discuss on it.</li> <li>No reporting of violations of BMS act except nation reputed media</li> <li>SBC TWG members are worked on this issue</li> <li>IYCF TWG meeting was held on 27 May 2020 and decided/ requested to take lead by Nutrition section chief on this matter.</li> <li>Ongoing,</li> </ul>	
12.	<b>IMAM TWG:</b> <ul style="list-style-type: none"> <li>Develop interim guidance note for Supplementary feeding (blanket and targeted)</li> <li>Develop mechanism to initiate Family/ Mother MUAC (videos, supply chain of MUAC tapes, global guidance etc.)</li> <li>Develop IPC measures for NRH (status, challenges, assessment etc)</li> </ul>	<ul style="list-style-type: none"> <li>Drafted SOP for BSFP and shared with TWG members for further correction</li> <li>Developed concept note for Family MUAC and shared with TWG members for comments</li> <li>Ongoing to integrate IPC measures in the guideline of NRH operation</li> </ul>	
13.	<b>BCC TWG:</b> <ul style="list-style-type: none"> <li>Coordinate with IYCF and provincial nutrition clusters to review and standardize IYCF and other nutrition messages as well as audio visual aid across the provinces.</li> <li>Develop monitoring mechanism to monitor the messages disseminated through different media such as; FM radios, TV and others.</li> <li>Identify coverage status of nutrition messages whether nutrition messages cover throughout the country or not.</li> <li>Integrate and broadcast/disseminate nutrition messages in Corona capsules and Corona care programme broadcasting through FM radio and TV</li> <li>Organize a virtual interaction programme/conference with journalist from reputed national medias on IYCF and Breast Milk Substitute Act (1992) under leadership of FWD &amp; NHIECC.</li> </ul>	<ul style="list-style-type: none"> <li>Provincial nutrition cluster support agencies have standardized IYCF and nutrition messages in line with the messages developed at federal levels</li> <li>Ongoing monitoring mechanism by the provincial cluster members/support agencies the messages broadcasted through public media</li> <li>Radio contents, through Radio Nepal, CIN, Ujyaalo and Suaahara/USAID partner, radio stations, reach across all geographic areas.. Recent survey shows 67% people are receiving nutrition BCC messages.</li> <li>Ongoing to integrate nutrition messages on Corona capsules and Corona care broadcasting by NTV and FM radio services</li> <li>This is under plan</li> </ul>	

	<ul style="list-style-type: none"> <li>Identify the contract numbers of FCHVs and develop mechanism to orient them on IYCF and other nutrition related topics.</li> </ul>	<ul style="list-style-type: none"> <li>Mobile numbers of FCHVs being updated through Suaahara/USAID field staff; as well as mobile number of FCHVs in non-Suaahara districts will be updates soon through different media</li> </ul>	
14.	<b>Information management TWG:</b> <ul style="list-style-type: none"> <li>Coordinate agencies to complete the nutrition information based on NIS from the remained districts planned for the first phase</li> <li>Start data collection from 20 districts planned for second phase</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing to complete the information collection process</li> <li>Started second phase data collection process in additional 20 districts</li> </ul>	
15.	<b>Assessment TWG:</b> <ul style="list-style-type: none"> <li>Finalize concept note of SMART survey</li> <li>Assess for the funding arrangement</li> <li>Finalize action plan</li> <li>Coordinate for PPE and other IPC measures to conduct SMART survey</li> </ul>	<ul style="list-style-type: none"> <li>Drafted SOP to carry out SMART survey in the context of Covid-19</li> <li>Calculated sample size for the survey</li> <li>Estimated tentative budget per districts</li> <li>Draft Workplan for SMART survey is ready</li> <li>Drafted Matrix for mapping resources (organizations, available fund and required fund)</li> </ul>	
<b>Province number 1</b>			
16.	Develop Vitamin A province wide supplementation plan and propose in the next cluster meeting	Developed consensus to use health facility model in Terai and FCHV model in mountain for the implementation of VAC supplementation campaign	
17.	Develop nutrition supply plan for the province	Transported 15 Cartoon RUTF to Panchthar and planning to transport to Sankhuwasabha also	
18.	Develop Covid-19 response plan for the province	First draft of Covid-19 response plan for the province is ready will be endorsed from next H&N cluster meeting	
19.	Develop Monsoon response plan considering Covid-19 situation	First draft of Monsoon response plan for the province is ready will be endorsed from next H&N cluster meeting	
20.	Continue nutrition service monitoring	Ongoing	
21.	Facilitate to continue all nutrition rehabilitation homes	<ul style="list-style-type: none"> <li>NRH Mechi has continuing the services</li> <li>NRH in Koshi is closed due to fever clinic in operation</li> <li>NRH in Okhandhunga: construction is ongoing and will resume by next FY</li> </ul>	
22.	Finalize Health and Nutrition cluster TOR	Draft TOR is ready and will be submitted to MoSD in next week	
23.	Prepare an action plan and implement for nutrition response to PLW and under five children in quarantine camps and isolated room	It will be discussed in next health and nutrition cluster meeting. The cluster meeting couldn't happen in this week.	
24.	Develop specific plan for screening and treatment of the 6-59 months children with SAM considering Covid-19 context	Pending	