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**Report on the implementation of the Memorandum of  
Understanding and Agreement on Operational  
Arrangements  
Dated 28 November 2005  
Between Magen David Adom in Israel and Palestine Red  
Crescent Society**

**Report prepared by Minister (Hon.) Pär Stenbäck, Independent Monitor  
appointed by the International Committee of the Red Cross (ICRC) and  
the International Federation of Red Cross and Red Crescent Societies  
upon request of the 30th International Conference of the Red Cross and  
Red Crescent**

**31 May 2008**



## **INTRODUCTION AND SUMMARY**

Based on the decisions taken and resolutions passed by the Council of Delegates and the International Conference of the Red Cross and the Red Crescent in November 2007, the ICRC and the International Federation asked Minister (Hon.) Pär Stenbäck of Finland to continue as Monitor of the implementation of the Agreements between Magen David Adom in Israel (MDA) and the Palestine Red Crescent Society (PRCS) signed in 28 November 2005. In light of the strengthened mandate approved by the Council of Delegates and the International Conference, Minister Stenbäck accepted the request in January 2008. He acknowledged the fact that the International Conference resolution was approved unanimously, which means that the PRCS, MDA, the Israeli government and the Palestinian Authority all supported the mandate of the Monitor without reservations and expressed their support for the full implementation of the agreements.

The International Conference requested the Monitor to issue a follow-up report by 31 May 2008.

Since the International Conference, the Monitor has made three visits to the region and held meetings with the National Societies, the ICRC, the International Federation and various diplomatic and government representatives.

As a general conclusion of the six months which have elapsed since the International Conference, the Monitor observed that the implementation of the Agreements has continued, but only limited progress can be recorded. To some extent, the political situation may have reflected on the process. Furthermore, the follow-up to the introduction of the five new PRCS ambulances based in East Jerusalem has remained a problem and has been time-consuming.

Nevertheless, the Monitor praises the continued goodwill and cooperation between the President and Chairman of the PRCS and MDA and their staff. These make the task of the Monitor easier.

The Monitor made the issue of the passage of ambulances through checkpoints one of his priorities. Only marginal improvements can be recorded up to now.

Within the remit of the Monitor's mandate, aspects of the deteriorating humanitarian situation in Gaza were reviewed. There remain practical questions on how the two Societies could best contribute to the improvement of transport arrangements for patients needing an ambulance out of and into Gaza.

An additional monitoring priority has been the issue of the geographical scope of activities of the Societies. A plan worked out by the Societies for resolving the question of MDA presence in the occupied Palestinian Territories was presented in the Monitor's previous report. Implementation of this plan is gradually taking place. The Monitor is following closely the different phases and remains confident that the final outcome will be in accordance with the Statutes and Rules of the Movement.

Several National Societies outside the region have shown interest in promoting cooperation between the PRCS and MDA. The Monitor welcomes the strengthening of the international and regional role of the Societies as a positive factor, which can enhance their bilateral cooperation. Through increased coordination, such initiatives would surely strengthen the monitoring process, as envisaged in the International Conference resolution. An assessment should be made on how other National Societies could best contribute to the implementation process in a more coordinated way and in line with the resolutions of the Council of Delegates and the International Conference.

The Monitor will continue to liaise with Israeli and Palestinian authorities, but is concerned about the bureaucratic hurdles that the implementation of the Agreements continues to face. Some of these are related to security concerns, but the Monitor maintains that the PRCS should be accepted as a bona fide humanitarian institution. The initial acceptance of the five ambulances in Jerusalem was a positive step in this direction, but it must be followed by further steps.

In view of the limited progress registered over the past six months, the Monitor is of the opinion that the monitoring needs to be maintained at a sustained intensity. The release of at least another interim report to the ICRC and the International Federation before the Council of Delegates in November 2009 is to be considered.

## **1 The five PRCS ambulances stationed in East Jerusalem**

It should be recalled that of the different issues related to the Agreements, the issue of the five ambulances was the one into which the most efforts were invested during the period of monitoring leading up to the International Conference.

During the 30<sup>th</sup> International Conference, in a last-minute, but welcome effort, the Israeli authorities granted the necessary permission for these five ambulances to operate from the Red Crescent Maternity hospital in Jerusalem.

Since then the ambulances have been able to operate within most of East Jerusalem. However, a number of significant problems remain unresolved.

The aforementioned problems pertain to (a) access of the ambulances to West Jerusalem hospitals, (b) the service of the population residing within the boundaries of East Jerusalem municipality, but living on the other side of the West Bank Barrier, and (c) the number of PRCS West Bank staff permitted by the Israeli authorities to drive the ambulances in Jerusalem.

**a Access to West Jerusalem hospitals**

The two Societies have reported to the Monitor that access to a number of West Jerusalem hospitals is required to ensure safe medical treatment of patients. The Israeli authorities have also recognised this fact. Some of the West Jerusalem hospitals have a higher level of specialisation, including equipment that is lacking in East Jerusalem, which can save the life of seriously injured patients.

Furthermore, residents of East Jerusalem belong to the Israeli health insurance scheme and pay for it. They are therefore entitled to choose treatment in any Israeli hospital. In this regard, the operating procedures issued by the Israeli Ministry of Health (operation permit No. 56/178) and signed by the PRCS specify that patients decide in which hospital they should be treated. While West Jerusalem is not within the geographical scope of activities of the PRCS, MDA indicated that it has immediately given its general consent for PRCS ambulances to bring patients to West Jerusalem hospitals, recognising that the health of patients should not risk being compromised.

The Monitor has observed that soon after the five ambulances of the PRCS began providing emergency medical services to the population of East Jerusalem in December 2007, the problem of access to West Jerusalem Israeli hospitals, as well as Hadassah Mount Scopus in East Jerusalem, materialised. Although there have been a few exceptions, in practice the ambulances of the PRCS are no longer permitted to pass the security gates of these medical institutions.

**b Service to the population residing within the boundaries of East Jerusalem municipality, but living on the other side of the West Bank Barrier.**

The Societies have stressed that around 60,000 residents of East Jerusalem live beyond the West Bank Barrier, but within the boundaries of Jerusalem municipality as defined by the Israeli authorities. These residents are also part of the Israeli health insurance scheme and therefore entitled to treatment in any Jerusalem hospital. MDA ambulances access these areas only with a police escort. MDA favours the idea that the five PRCS ambulances serve these areas. Apart from occasional and exceptional emergencies, the PRCS has indicated that it has refrained from picking up patients in these areas, as the PRCS has heard complaints from Israeli authorities about the security concerns involved, and wishes to operate with full transparency. The PRCS has declared that it has always been ready to submit to reasonable security procedures, such as quick searches of ambulances, or the installation of *global positioning system* (GPS) devices if so required.

**c *Number of PRCS West Bank staff authorised by Israeli authorities to drive the ambulances in Jerusalem***

As agreed between the PRCS and Israeli authorities, the five ambulances are to be manned by a mix of PRCS staff from the West Bank and East Jerusalem. 32 PRCS staff members from the West Bank have been granted permits to access Jerusalem to operate the five ambulances. Previously, the PRCS was not allowed to have an EMS (Emergency Medical Service) structure in East Jerusalem. Consequently, it has been training 15 new staff members as Emergency Medical Technicians (EMT) from January to May 2008. These members of staff will however have to complete additional training before they can obtain the special driver's licence for ambulances.

Among the 32 PRCS staff members from the West Bank, 25 are both medics and drivers. However, at the time of the International Conference, only seven staff members had been granted permission to drive in Jerusalem by the Israeli authorities. At the time, representatives of the Ministry of Foreign Affairs agreed to expedite the provision of additional permissions to drive to individuals among the 32 staff members. This has however not materialised, resulting in a reduced operational capacity of the ambulances.

The Monitor has followed the different attempts made to solve these problems, which would allow the five ambulances to operate at their full capacity. The Monitor notes that from the outset of the operation of the ambulances, MDA has spared no effort in lobbying and liaising with the authorities, in order to ensure a smooth start and to try to solve problems faced by the ambulances.

The Societies have reported to the Monitor that from December 2007 to February 2008, several discussions were held with the authorities, in particular with regard to access to West Jerusalem hospitals. Despite the fact that the principle of access to these hospitals appears to have been accepted by the authorities, appropriate procedures have not yet been issued.

The Societies reported to the Monitor that a meeting between the PRCS and the authorities, aimed at solving some of the abovementioned problems, had been called for by the Ministry of Foreign Affairs for 23 February 2008. This meeting was cancelled by the PRCS, following a misunderstanding about the purpose of the meeting, and disagreements over the content of the agenda to the meeting, which was prepared and sent by the Ministry only one day prior to the meeting. Subsequently, the PRCS suggested organising lower level technical meetings in order to prepare proposals for the resolution of these issues. At the time of the writing of this report, there had been no favourable reaction to this suggestion from the authorities. On 23 April 2008, the PRCS President sent a letter to the MDA Chairman detailing the problems faced by the ambulances and asking the MDA Chairman to share the letter with the Israeli authorities concerned. MDA forwarded the letter to the authorities. At the time of the writing of this report, the PRCS had yet to receive a formal response from the authorities.

The Monitor observes that six months after the beginning of the operation of the five ambulances, it is time to resolve the outstanding problems related to them.

While there may have been misunderstandings and disagreements on how and who to meet in order to solve remaining problems, the authorities must now take the necessary steps so that the five ambulances can operate to their full capacity and provide medically appropriate and comprehensive services to the population of East Jerusalem.

## **2 Geographical scope of activities**

In the previous report of the Monitor, it was noted that the Societies had agreed to a process that would gradually address issues related to the geographical scope of activities of the two Societies. The responsibility for services previously provided by MDA would be transferred to other entities. The previous report noted that there was a need to ensure that the transfer of the responsibilities be made visible. The EMS stations, the uniforms of their staff and the appearance of their vehicles should not be identical to those of MDA.

The Monitor reports that the process has continued. MDA has reviewed the contracts it concludes with local entities taking upon themselves the responsibility of running the EMS services. This review has focused on the legal validity of the transfers and on the appearance of the ambulances. This has been done in order to ensure that once the transfers have occurred, it is apparent that the ambulances are not operated by MDA.

The Monitor notes with satisfaction the way in which the two Societies have worked to address this politically sensitive issue. They have sought to find a solution that is in line with the Statutes and Rules of the Movement. The Monitor wishes to emphasise that due to the significance of this issue, it is important to maintain momentum on this process.

## **3 Access through checkpoints in general**

One of the objectives of the Agreements, more specifically of the Agreement on Operational Arrangements (AOA), is to facilitate the passage of PRCS and other ambulances through checkpoints and the establishment of separate humanitarian fast lanes where necessary. It is a well-known fact that, from a humanitarian perspective, the proliferation of the number of checkpoints and the tightening of security controls has necessarily a great impact on the lives, the economic activities, and the wellbeing of the general Palestinian population. In light of the commitments made in the Agreements, and the mandate given to the Monitor, this section of the report focuses only on access of ambulances and their staff through checkpoints.

At the beginning of September 2007, the PRCS transmitted to the Israeli authorities, through MDA, a list of problematic checkpoints or barred roads. Fast passage of ambulances through these checkpoints or the reopening of these roads to ambulances was considered essential for the effective and safe operations of the medical mission.

As only limited progress had been registered until the November 2007 statutory meetings, the PRCS transmitted to the authorities in February 2008 an updated list commenting on progress or the lack thereof at the different checkpoints. The checkpoint of Asira Ash Shamalya was added to the list. This checkpoint is considered critical for the rapid transfer of patients in the northern part of the West Bank. The checkpoint was closed for all traffic including ambulances after the transmission of the September 2007 list.

During the period under review, the Monitor and his assistant re-visited most of the checkpoints that the PRCS had listed as problematic. The Monitor also paid an extensive visit to the Nablus area.

The Monitor notes with satisfaction the re-opening of the checkpoint of Asira Ash Shamalya - closed from October 2007 to April 2008. The Monitor has also been made aware of some improvements at a limited number of checkpoints, but which at this stage remain insufficient. The Monitor is not aware of any new humanitarian fast lanes for ambulances having been built. Some rehabilitation work on checkpoints has been undertaken, but without sufficiently addressing the problems linked to the rapid passage of ambulances.

As for access by ambulances to the hospitals of East Jerusalem from the West Bank, the Israeli authorities had indicated before the 30<sup>th</sup> International Conference that new procedures had been devised to deal with situations where an ambulance claims to be on an emergency call and the right of access is disputed at the checkpoint. According to these new procedures, access cannot be denied by soldiers at checkpoints or non-medical staff from the health coordination body of the armed forces, but can only be done so after due consultations with an appointed medical doctor from the Ministry of Health. The PRCS however still reports cases of emergency patients whose access has been denied at checkpoints entering Jerusalem, as well as cases where patients have had to be transferred from one ambulance to another at the checkpoint (so called "back-to-back procedure").

For its part, MDA has continued to undertake efforts of advocacy and lobbying towards the authorities concerned, in order to facilitate access for ambulances through checkpoints. In addition, MDA facilitated the monitoring process by arranging for the monitoring team to visit together with representatives of the authorities a number of checkpoints in the periphery of Jerusalem.

As in the previous monitoring period, the issue of access by ambulances through checkpoints has often been linked to developments in the general political or security situation. Since the wellbeing of the patients is a purely humanitarian issue, the Monitor can only repeat that access for ambulances should not depend on political or security developments.

As a conclusion, the Monitor underlines that the passage of patients through checkpoints is an issue of great humanitarian importance and that progress should be more substantial. Additional steps must be undertaken in order to ensure an adequate and fast passage of ambulances through all checkpoints.



## **4 Allenby Bridge**

There are no major issues to be reported on the situation at the Allenby Bridge crossing. However, there is still room for improvement. According to the PRCS, by 20 May, there had been 119 patient transfers at Allenby Bridge during 2008. Of these, 69 were patients going for medical treatment to Jordan, and 50 returning to the West Bank.

The PRCS, MDA and the authorities have met to improve transfer procedures used at the bridge. The PRCS has submitted new names to be approved, in order to meet operational needs of transfers. The parties have agreed to attempt to find security and sealing options on ambulance equipment, so that instead of using so-called "stripped" ambulances, which have significantly less equipment, future patient transfers could be done using regular ambulances.

A major cause of delay in patient transfers has been related to contradictory information about the presence of ambulances on the Jordanian side of the border. At times the PRCS ambulances are told by the bridge authorities that their counterparts on the Jordanian side are not in place, despite contrary information received by the PRCS through direct communication with their Jordanian counterparts. At a meeting in May the different parties agreed to improve pre-notification procedures. Furthermore, the ICRC agreed to facilitate a meeting with the Jordan Red Crescent and possibly other ambulances that partake in patient transfers, in order to address coordination issues on the Jordanian side of the border. Furthermore, the Israeli authorities have accepted that, based on a case-by-case evaluation, simultaneous patient drops and pickups could occur.

The Monitor notes the constructive atmosphere that has prevailed in the meetings held to improve the situation at Allenby Bridge.

## **5 Transfers from Erez to East Jerusalem and West Bank hospitals**

The Monitor is acutely sensitive to the impact the developments in and surrounding the Gaza Strip have had on both the need for and the ability of patients to leave Gaza in order to obtain certain medical services not available at Gaza hospitals. In March 2008, the Monitor paid a visit to the Gaza Strip and, among other things, met with the PRCS branch in Gaza City.

As recalled in the previous monitoring report, up until the breakdown between the two Palestinian factions in June 2007, three ambulances of the Palestinian MoH based in Erez were used to transport patients from Erez crossing in Gaza to East Jerusalem and West Bank hospitals, when warranted by the medical condition of the patient. Since June 2007, patients have had to use other means of transport, including private ambulances, MDA ambulances and private taxicabs. MDA is currently transporting a number of patients requiring such care against the indirect reimbursement of its expenses by the Palestinian Ministry of Health.

The two Societies have reported to the Monitor on their discussions about how they could best contribute to improving the transport arrangements for patients leaving and entering Gaza.

## **6 Co-operation**

A number of steps have been taken to enhance cooperation between the Societies. Considering the deteriorating, at times tense, general political situation, the Monitor wishes to commend the efforts of the Societies to uphold the good rapport prevailing between them at the time of the International Conference, and to further develop their cooperation.

The restrictions on the freedom of movement have continued to set obstacles for deeper cooperation. Despite numerous efforts, MDA has been unable to obtain a permit from the Israeli authorities for its Chairman to pay a visit to the PRCS Ramallah headquarters. The Monitor underlines that such a visit would be a significant trust-building gesture.

The Societies have continued to work together to ensure that new staff members for the five ambulances stationed in East Jerusalem are appropriately certified, by arranging an equivalency verification workshop for them. The two Societies have also worked together to ensure that the PRCS could obtain an adequate emergency phone number for its ambulances in East Jerusalem.

In December 2007 the head of the PRCS disaster management department participated in a MDA national disaster response training event in Ashkelon. It is hoped that this will lead to further cooperation in this field. There have also been discussions about participation in a project funded by the European Commission, on the needs of medical first-responders to disasters.

MDA has expressed its wish to develop cooperation on earthquake disaster preparedness with the PRCS as well as with other National Societies. The Monitor appreciates the concerns of the two Societies that a major earthquake may strike the region and that appropriate response strategies must be developed in advance. Increased cooperation in this field is encouraged. The International Federation has committed itself to coordinate and facilitate such cooperation.

MDA has invited the PRCS to participate in training sessions to be held for MDA volunteers who have Arabic as their mother tongue. The two Societies are also planning to jointly organise an International Trauma Life Support (ITLS) course, to be held by the PRCS for MDA staff.

Different components of the Movement are taking steps to reinforce goodwill and cooperation between the two Societies and within the region. The Monitor wishes to express his appreciation for such initiatives. At the same time, the Monitor emphasises the need for coordination between these initiatives in order to avoid overlapping. Through coordination, such initiatives can lead to a strengthening of the monitoring, as envisaged in the resolution passed at the International Conference.

Despite the number of positive developments listed above, the Monitor notes that the two Societies have yet to formalise and institutionalise cooperation on the staff level, as envisioned by the Agreements. More specifically, the Societies are encouraged to initiate regular meetings between their youth and volunteers.

## **7 Combating misuse of the emblem**

Both Societies have continued to follow closely the legislative processes on the emblems.

The President's office of the Palestinian Authority forwarded the draft legislation to the Prime Minister's office, which in turn has sent it to the legal advisory office.

On the Israeli side, the amendment of the national MDA law regulating the use of the emblem is still pending in the Knesset.

As was mentioned in the previous report, the Societies continue to disseminate information about the emblems to their staff and volunteers.

## **8 Awareness-raising programmes**

The activities of the Societies have continued as mentioned in the previous report of the Monitor.

According to the PRCS 2008 action plan regarding the dissemination of humanitarian values, there are going to be 12 dissemination workshops for PRCS staff and volunteers (6 West Bank, 6 Gaza Strip), 4 IHL workshops for PRCS staff and volunteers (2 West Bank, 2 Gaza Strip), 4 IHL workshops for Palestinian Authority security forces, local health providers and human rights activists (2 WB, 2 GS), 5 dissemination workshops for the public (3 West Bank, 2 Gaza Strip), in addition to 5 emblem seminars for the public (3 West Bank, 2 Gaza Strip). Up until the time of the writing of this report, 11 training sessions had been held, benefiting 339 persons.

The MDA continues to hold orientation training about the Movement for all of its new staff and volunteers.