International Federation of Red Cross and Red Crescent Societies

Humanitarian Health Competency Matrix

Full instructional/evaluative matrix. v15/June 2017

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Acronyms

A	Accountability	CMAM	Community-based management of acute malnutrition
AA	Assessment & Analysis	CFR	Case Fatality Rate
ADPIC	Assessment, Development, Planning Implementation and Coordination	CMR	Crude Mortality Rate
		COOR	Coordination
AEFI	Adverse Events Following Immunization	CP	Community Participation
BPH	Basic Public Health	CTC	Cholera Treatment Centre
CS	Contextual Sensitivity	DD	Diarrhoeal Disease
C	Communication	DM	Disaster Management
CBHFA	Community Based Health & First Aid	E	Epidemics
CBS	Community-Based surveillance	ECV	Epidemic Control for Volunteers
CHW	Community Health Workers	EMT	Emergency Medical team
CL	Clinical	ERU	Emergency Response Unit
CLTS	Community Led Total Sanitation	ES	Epidemiology & Surveillance

ET	Equipment & Tools	ICRC	International Committee of Red Cross
FACT	Field Assessment Coordination Team	IFRC	International federation of Red Cross & Red Crescent National Societies
FAD	Finance & Administration		
FE	Field Epidemiology	IT	Information Technology
G	General	IYCF	Infant and young child feeding
GCS	General Clinical Skills	LT	Learning & Training
GIS	Geographic Information Systems	KAP	Knowledge Attitude Practice survey
HC	Humanitarian Context	MCH	Maternal Child Health
HID	Highly Infectious Diseases	MDAN	Medical Doctor of Anaesthesia
HHWT	Household Water Treatment	MoH	Ministry of Health
HF	High Frequency	MSM	Mass Sanitation Module
HN	Head Nurse	Muac	Mid upper arm circumference
HIS	Health Information System	N	Nutrition
HIV	Human Immunodeficiency Virus	NFI	Non-Food Items
		NS	National Society
HNS	Host National Society	OM	Operational Management

ORP	Oral Rehydration Point		RD	Respiratory Diseases
OUT	Outreach		RHA	Rapid Health Assessment
OTN	Operating Theatre Nurse		SGBV	Sexual and Gender-Based Violence
PHAST	Participatory hygiene and sanitation transformation		SMART	Standardised Monitoring and Assessment of Relief and Transitions
PHE	Public Health in Emergencies			
PI	Programme Intervention		SMO	Senior medical officer
PM	Programme Management		SOD	Sudden Onset Disaster
PNS	Participating National Societies		SOP	Standard Operating Procedure
POA	Plan of Action		SRH	Sexual & Reproductive Health
PRA	Participatory Rural Appraisal		TB	Tuberculosis
PSSiE	Psychosocial Support in Emergencies		T-LOG	Technician-Logistician
RCEC	Red Cross/Red Crescent Emergency Clinic – EMT Type 1 (formerly BHCU)		TL	Team Leader
			TOR	Terms of Reference
RCEH	Red Cross/Red Crescent Emergency Hospital – EMT Type 2 (formerly RDEH/Referral Hospital)		VBD	Vector-Borne Disease
			VCA	Vulnerability and Capacity Assessment
RCC	Red Cross/Red Crescent Context		VHF	Very High Frequency

VPD   Vaccine Preventable Disease

WASH   Water Sanitation and Hygiene

WBD   Water-Borne Diseases

WHO   World Health Organization

WSWM Water, Sanitation & Waste Management

Refer to IFRC's Humanitarian Health (HH) Competency Matrix Toolkit for guidance and tools in applying IFRC's HH Competency Matrix to training, selection and evaluation efforts

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1. General/Contextual sensitivity (G/CS)

Ability to consider diverse cultural backgrounds and customs in order to adapt health practices to unique settings while maintaining RCRC and global standards.

Tier A	Tier B	Tier C
1.G/CS.A1 Describes potential age, cultural, ethnic, gender and belief differences that may require modifying aid or programming plans	1.G/CS.B-C1 Modifies aid or programming plans in light of diverse ages, cultural, ethnic and belief differences within the target population	
1.G/CS/A2 Demonstrates awareness of and interacts with local culture, language, religion and customs	1.G/CS.B2. Interacts sensitively and respectfully with local culture, language, religion and customs	1.G/CS.C3 Applies culturally-relevant approaches to persons with diverse cultural, religious, socioeconomic and educational backgrounds
1.G/CS.A3 Demonstrate awareness of appropriate internal and external communication in emergencies with diverse groups	1.G/CS.B3 Demonstrate proficiency in appropriate internal and external communication in emergencies with diverse groups	1.G/CS.C3 Ensure appropriate internal and external communication in emergencies with diverse groups

1. General/Red Cross Red Crescent context (1.G/RCC)

Ability to apply RCRC knowledge and fundamental principles through empowering Host National Societies and mobilising Movement volunteers in emergencies.

Tier A	Tier B	Tier C
1.G/RCC.A-C1 Understands and applies Red Cross Red Crescent terminology/vocabulary including, but not limited to, the following: IFRC; ICRC; the Movement; MSM; CBHFA; National Society; NS; VCA; PHE; RHA; ERU; FACT; ADPIC; POA; DM		
1.G/RCC.A-C2 Describes own role and responsibility within the structure of Red Cross Red Crescent deployment internally and externally (e.g. TORs, position description)		
1.G.RCC.A-C3 Identifies technical resources within the movement and acts as a technical advisor when appropriate.		
1.G/RCC.A4 Understands the basic functions of Red Cross Red Crescent response teams.	1.G/RCC.B4 Applies knowledge of Red Cross Red Crescent's role as auxiliary to government and uses global and Red Cross Red Crescent policies and regulations related to response activities.	1.G/RCC.C4 Manages Red Cross Red Crescent's position among key stakeholders and partners and embeds global and Red Cross Red Crescent policies and regulations related to response activities.
1.G/RCC.A5 Establishes and maintains positive working relationships with National Society staff and volunteers	1.G/RCC.B5 Builds National Society capacity in services and projects	1.G/RCC.C5 Empowers National Society and ensures their involvement in decision making

1. General/Communication (1.G/C)

Ability to actively listen, gather, facilitate and share information (written/verbal/non-verbal) tailored to the cultural context and in order to inform and influence diverse actors.

Tier A	Tier B	Tier C
1.G/C.A-C1 Effectively interacts, facilitates discussions and manages conflict within a diverse team listening and integrating all team members' inputs and participation in collaborative decision-making.		
1.G/C.A-B2 Understands and clarifies role expectations for interaction with media when proactively engaging or by referring media to the correct focal person in a disaster		1.G/C.C2 Effectively manages media attention in a disaster
1.G/C.A3 Describes the role of advocacy in health response	1.G/C.B3 Raises critical shared humanitarian concerns for advocacy purposes	1.G/C.C3 Advocates on critical humanitarian concerns
1.G/C.A4 Identifies relevant methods and channels of communication based on the purpose, message content, urgency and sensitivity/confidentiality of message.	1.G/C.B4 Develops messages with communities and delivers key information to inform people at risk.	1.G/C.C4 Designs strategies to develop and deliver messages mobilise individuals, families, groups and communities
1.G/C.A5 Describes how to communicate risk at multiple levels	1.G/C.B5 Contributes towards creating a plan to communicate risk at multiple levels	1.G/C.C5 Leads the creation of a plan to communicate risk at multiple levels

1. General/Community participation (1.G/CP)

Ability to involve communities throughout the entire response cycle

Tier A	Tier B	Tier C
1.G/CP.A-C1 Identifies local leaders and develops local networks to promote the health of the population		
1.G/CP.A2 Explains why community participation leads to accountability.	1.G/CP.B-C2 Integrates community participation in all stages of the programme for greatest accountability.	
1.G/CP.A3 Describes key principles of community mobilization	1.G/CP.B3 Implements community mobilization interventions	1.G/CP.C3 Designs and evaluates community mobilization interventions
1.G/CP.A4 Defines at least two community-based health promotion methodologies	1.G/CP.B4 Implements community-based health promotion methodologies	1.G/CP.C4 Manages community-based health promotion methodologies

1. General/Humanitarian Context (1.G/HC)

Ability to involve and address communities and team throughout the entire response cycle in an unfamiliar environment

Tier A	Tier B	Tier C
1.G/HC.A-C1 Works outside one's comfort zone and outside one's assigned role to ensure service delivery		
1.G/HC.A-C2 Achieves outcomes in a high-stress, often unpredictable environment.		
1.G/HC.A-C3 Provides psychological first aid to community members and team members in need.		
1.G/HC.A-C4 Provides self-care as needed and appropriate that meets needs of self, team and communities in need.		
1.G/HC.A5 Identifies key requisite information and identifies gaps that supports decision-making.	1.G/HC.B-C5 Make decisions without having all the information and evaluate / modify your decisions when new information becomes information	

1. General/Coordination (1.G/COOR)

Ability to harmonise interactions and activities between and among Movement members and external partners

Tier A	Tier B	Tier C
1.G/COOR.A-B1 Identifies local and international health actors in a response		1.G/COOR.C1 Synthesizes the full health response of all actors including support systems to determine Red Cross Red Crescent aligned response
1.G/COOR.A2 Identifies and establishes working relationship with key counterparts in HNS in health response and epidemic prevention		1.G/COOR.C2 Coordinates and leads efforts in collaboration with HNS in health response and epidemic prevention between IFRC and external partners
1.G/COOR.A3 Describes the Movement coordination environment and identifies elements of the humanitarian coordination environment	1.G/COOR.B3 Identifies RCRC HH role within the Movement and humanitarian coordination environments	1.G/COOR.C3 Engages actively within Movement coordination environment and humanitarian coordination environment
	1.G/COOR.B4 Implements effectively within established partnerships and maintain relationships for implementation.	1.G/COOR.C4 Identifies and establishes key operational partnerships

	1.G/COOR.C5. Identifies priority technical working groups/clusters and ensures representation as Red Cross Red Crescent health response in the humanitarian coordination environment

1. General/Capacity Building (1.G/CB)

Ability to further develop organisational and individual capacity of NS staff and volunteers applying strength based approaches.

Tier A	Tier B	Tier C
1.G/CB.A1 Identifies RCRC tools for use in capacity building (i.e., CBHFA, ECV,	1.G/CB.B-C1 Adapts RCRC tools for use in capacity building (i.e., CBHFA, ECV) where appropriate	
1.G/CB.A2 Assesses existing capacity to determine training plan and adequate methodologies	1.G/CB.B2 Determines existing capacity needs and applies appropriate methodologies including coaching, mentoring, guiding, educating and facilitating learning	1.G/CB.C2 Designs and facilitates training particularly related to one's area of expertise
	1.G/CB.B-C3 Monitors effectiveness of trained staff and volunteers in improving community health knowledge and skills.	
		1.G/CB.C4 Leads and motivates the team to train others , capitalizing on each members' discipline and/or role

1. General/Accountability (1.G/A)

Ability to deliver programming that meets HNS and community needs and aligns with health standards

Tier A	Tier B	Tier C
1.G/A.A-C1 Applies laws, regulations and MOH policies to protect the health and safety of all ages, populations and communities affected by a disaster or public health emergency in line with the Fundamental Principles.		
1.G/A.A-C2 Identify limits to own knowledge/skills/authority and access resources for consulting and/or referring matters that exceed these limits		
1.G/A.A-B3 Actively identifies and implements appropriate actions for vulnerable populations including protection, gender and inclusion		1.G/A.C3 Designs programming with a focus on addressing vulnerable populations in , including gender protection and inclusion
1.G/A.A4 Describes appropriate methods to ensure integrity and standards of ethical conduct	1.G/A.B4 Incorporates ethical standards of practice as the basis of all interactions with organizations, communities, and individuals	1.G/A.C4 Demonstrates proficiency in the application of moral and ethical principles and policies for ensuring access to and availability of health services for all ages, populations, and communities affected by a disaster or public health emergency

1.G/A.A5 Identifies ethical dilemmas and potential solutions in a disaster setting	1.G/A.B5 Provides defensible solutions to a series of ethical dilemmas arising in a disaster setting	1.G/A.C5 Takes action to protect individuals, families, groups and communities from unsafe or unethical circumstances
1.G/A.A6 Understand Sphere and core humanitarian standards	1.G/A.B6 Implement Sphere and core humanitarian standards	1.G/A.C6 Ensure programmes adhere to Sphere and core humanitarian standards

1. General/Operational management (1.G/OM)

Ability to manage the overall program cycle including budget, PMER, personnel management, relations among stakeholders and partners responding to existing needs and capacity

Tier A	Tier B	Tier C
1.G/OM.A-B1 Describes liability issues and potential reputational risks associated with emergency health response		1.G/OM.C1 Ensures liability issues and reputational risks are appropriately covered in the emergency health response
1.G/A.A2 Demonstrates knowledge of exit strategy and the delegate's role in it	1.G/A.B2 Implements exit strategy based on existing plan	1.G/A.C2 Designs and implements entry and exit strategy
	1.G/OM.B-C2 Gathers and analyses data for effective reporting.	
	1.G/OM.B3 Implements strategies for overall project programme management in an Emergency Health context based on assessment data and responding to data trends	1.G/OM.C3 Designs and manages projects and programmes in an Emergency Health context based on assessment data and data trends
	1.G/OM.B4 Participates in determining budget priorities, developing budget and operate within budget; oversee budget and accountability processes	1.G/OM.C4 Designs, operates and manages programmes within current, forecasted and unexpected

		budget constraints within IFRC protocols; acquit/reconcile budgets as needed
	1.G/OM.B5 Advocates for effective, efficient and responsible use of resources and personnel	1.G/OM.C5 Formulates a management plan for effective, efficient and responsible use of resources and personnel.
	1.G/OM.B6 Implements and monitors the project against indicators in the project log frame.	1.G/OM.C6 Develops indicators and evaluate project against project log frame.

1. General/Assessment and analysis (1.G/AA)

Ability to identify key primary and secondary data needed and collect, review and analyse data for humanitarian health response

Tier A	Tier B	Tier C
1.G/AA.A1 Identifies sources of public health data and information	1.G/AA.B1 Recognises the integrity and comparability of data. Analyses data to determine appropriate implications, uses, gaps and limitations	
1.G/AA.A2 Describes the process for conducting a rapid health assessment in a disaster situation	1.G/AA.B2 Uses appropriate methods and instruments for collecting and analysing valid and reliable quantitative and qualitative data	1.G/AA.C2 Designs and leads a rapid health assessment
1.G/BPH.A3 Describes a Knowledge Attitude Practice (KAP) survey and how to use it in a health emergency	1.G/BPH.B3 implements a KAP survey	1.G/BPH.C3 Designs KAP surveys and modify programmes based on findings from a KAP/ baseline survey
1.G/BPH.A4 Critically assesses information, identifies key data and information that is still needed to support decision-making	1.G/BPH.B4 Defines and implements potential solutions to a problem based on existing resources and information in a timely manner.	1.G/BPH.C4 Guides and counsels team members and partners în problem solving and decision-making.

	1.G/BPH.B5 Explains the need and general process of scenario plan	1.G/BPH.C5 Conducts scenario planning to identify potential situations and calculate for appropriate response.
		1.G/OM.C6 Demonstrates proficiency and adaptation in the provision of surge capacity for health emergency

2. Basic public health (2.BPH) PICK UP HERE

Non-clinical content that is applicable across humanitarian health interventions

Tier A	Tier B	Tier C
1.G/BPH.A-C.1 Identify key concepts of health promotion and behaviour change communication. (look at Pati group health promotion stuff in community participation)		
1.G/ BPH.A6 Explain the process of ethical and safe dead body management in disasters	1.G/ BPH.B6 Identify the difference between the ethical and safe dead body management in natural disasters versus disasters with epidemic potential of highly contagious pathogens (e.g. cholera and Viral Haemorrhagic Fever)	1.G/ BPH.C6 Manage ethical and safe dead body management in natural disasters versus disasters with epidemic potential of highly contagious pathogens (e.g. cholera and Viral Haemorrhagic Fever)
1.G/BPH.A10 Define key epidemiological concepts	1.G/BPH.B10 Apply key epidemiological concepts in disaster settings	1.G/BPH.C10 Interpret and critically analyse key epidemiological data for programme implementation
1.G/B 1.G/BPH.B11 Define and support	1.G/BPH.B11 Define, implement and monitor CBS AND HIS	1.G/BPH.C11 Design CBS and HIS. Analyse the result of CBS and HIS

implementation of CBS AND HIS		data.
	1.G/OM.A9-B9 Describe public health approach versus individual focus of patient care	1.G/OM.C9 Explain how shifting the focus of patient care from individual to population outcomes changes patient management in resource-scarce environments
Identify existing and potential health risks.	Identify and manage existing and potential health risks	

2. Diarrhoeal diseases/Equipment and tools (2.DD/ET)

Tier A	Tier B	Tier C
2.DD/ET.A1 Knowledge of PHAST/Community-led total sanitation		
2.DD/ET.A2 Outline contents for cholera kit and Oral Rehydration Point (ORP) kits		
2.DD/ET.A3 Outline the contents of relevant training materials		
2.DD/ET.A4 Explain the process for excreta disposal		
2.DD/ET.A5 Implement excreta disposal		
2.DD/ET.A6 Describe Epidemic Control for Volunteers (ECV) and Community-based health and first aid (CBHFA) materials and process	2.DD/ET.B6 Implement ECV and CBHFA activities	2.DD/ET.C6 Coordinate ECV and CBHFA programming with community health workers
2.DD/ET.A7 Describe household water treatment (HHWT) interventions	2.DD/ET.B7 Implement HHWT interventions	2.DD/ET.C7 Design HHWT interventions
2.DD/ET.A8 Define how to run	2.DD/ET.B8 Decide when to run vaccination	2.DD/ET.C8 Run vaccination

| vaccination programme | programme | programme including full cold chain |

2. Diarrhoeal diseases/Programme intervention (2.DD/PI)

Tier A	Tier B	Tier C
2.DD/PI.A1 Identify hardware activities needed for proper sanitation	2.DD/PI.B1-C1 Evaluate hardware solutions for potential PH impact	
2.DD/PI.A2 Train community health workers (CHW) in diarrhoeal diseases	2.DD/PI.B2 Supervise CHW in prevention and treatment of diarrhoeal diseases	2.DD/PI.C2 Design indicators and evaluate CHW on diarrhoeal disease prevention and treatment
2.DD/PI.A3 Describe treatment protocols	2.DD/PI.B3 Train, supervise and manage nursing staff in treatment of diarrhoeal diseases	2.DD/PI.C3 Design and evaluate interventions to address diarrhoea outbreaks
2.DD/PI.A4 Describe key concepts of health and hygiene promotion in control of diarrhoeal diseases	2.DD/PI.B4 Implement key activities in health and hygiene promotion in control of diarrhoeal diseases	2.DD/PI.C4 Design and evaluate key activities in health and hygiene promotion in control of diarrhoeal diseases
2.DD/BPH.A1 Describes treatment programmes, including ORP, cholera treatment centre (CTC), infection control and protocols for cholera.	2.DD/BPH.B1 Implements treatment programmes, including ORP, CTC, infection control and protocols for cholera	2.DD/BPH.C1 Designs treatment programmes, including ORP, CTC, infection control and protocols for cholera (predict caseload)

2.DD/BPH.A2 Describes community management for diarrhoeal diseases	2.DD/BPH.B2 Implements hospital facility/clinic/community management for diarrhoeal diseases	2.DD/BPH.C2 Designs, coordinates and evaluates comprehensive management of diarrhoeal diseases
2.DD/BPH.A3 Identifies the most common outbreak-prone diarrhoeal diseases, including transmission, underlying causes/risk factors and control measures	2.DD/BPH.B3 Implements prevention and control measures of relevant diarrhoeal diseases/outbreaks	2.DD/BPH.C3 Designs, coordinates and evaluates prevention and control measures of diarrhoeal diseases
2.DD/BPH.4 Describes levels of dehydration		
1.G/ BPH.3 Explains household water treatment safe storage resource		

2. Diarrhoeal diseases/Epidemiology and surveillance (2.DD/ES)

Tier A	Tier B	Tier C
2.DD/ES.A1 Describe key concepts of surveillance systems, case definitions and outbreak investigation	2.DD/ES.B1 Implement community surveillance system	2.DD/ES.C1 Coordinate and collaborate surveillance system with MoH
2.DD/ES.A2-B2 Implement outbreak management		2.DD/ES.C2 Coordinate outbreak management
2.DD/ES.A3 Describe the process of outbreak investigation and disease confirmation		
	2.DD/ES.B4 Conduct a survey and do a preliminary analysis	2.DD/ES.C4 Design indicators and analyse result of the survey
		2.DD/ES.C5 Design outbreak management/surveillance systems

2. Diarrhoeal diseases/Assessment and analysis (2.DD/AA)

Tier A	Tier B	Tier C
2.DD/AA.A1 Interprets rates against normal thresholds of disease burden	2.DD/AA.B1 Calculates rates against normal thresholds of disease burden	2.DD/AA.C1 Decides action threshold with MoH, National Society, international standards and WHO
2.DD/AA.A2-B2 Analyses data; detects trends in baseline, represents descriptive data graphically		2.DD/AA.C2 Analyses existing graphical representations, trends in baseline, and general data analysis

2. Diarrhoeal diseases/Programme management (2.DD/PM)

Tier A	Tier B	Tier C
2.DD/PM.A1 Identifies links with WASH, Mass Sanitation Module (MSM) and ERU	2.DD/PM.B1 Coordinates delivery of aid with WASH, MSM and ERU.	2.DD/PM.C1 Coordinates delivery and evaluate effectiveness of aid with WASH, MSM, ERU and other Red Cross Red Crescent Emergency

		Health teams

3. Nutrition/Equipment and tools (3.N/ET)

Tier A	Tier B	Tier C
3.N/ET.A1 Utilises anthropometric tools to diagnose malnutrition condition of individuals	3.N/ET.B1 Evaluates accuracy and appropriateness of the use of anthropometric tools on an individual and at community level	3.N/ET.C1 Interprets results from anthropometric survey to guide programme design and implementation

3. Nutrition/Programme management (3.N/PM)

Tier A	Tier B	Tier C
3.N/PM.A1 Describes the key signs of acute malnutrition	3.N/PM.B1 Diagnoses and differentiates severe acute malnutrition diagnosis	3.N/PM.C1 Appropriately treats various types of acute malnutrition
3.N/PM.A2 Identifies need for infant and young child (IYCF) feeding programmes	3.N/PM.B2 Implements IYCF programmes	3.N/PM.C2 Designs and evaluates IYCF programmes
3.N/PM.A3 Describes the components of community-based management of acute malnutrition (CMAM) and referral pathways	3.N/PM.B3 Implements the components of CMAM programme	3.N/PM.C3 Monitors, supervises and evaluates effectiveness of various components of CMAM
3.N/PM.A4 Identifies activities that can prevent deterioration of nutritional status in communities identified at risk of malnutrition	3.N/PM.B4 Implements activities to prevent the deterioration of nutritional status of communities identified at risk of malnutrition	3.N/PM.C4 Designs and evaluates activities that prevent the deterioration of nutritional status of communities identified at risk of malnutrition
3.N/PM.A5 Describes the infection control and WASH needs for clinical care settings for malnourished	3.N/PM.B5 Provides appropriate infection control and WASH facilities to clinical care settings for malnourished children	3.N/PM.C5 Designs, monitors and evaluates infection control and WASH requirements needed to

children		implement safe and effective treatment and care of severely malnourished children.
3.N/PM.A6 Provides safe and effective care to children with severe and moderate malnutrition	3.N/PM.B6 Provides safe and effective care to children with moderate, severe and complicated severe malnutrition and treat co-morbidities	3.N/PM.C6 Trains and supervises clinical staff to provide safe and effective care of children and infants with severe acute malnutrition
3.N/PM.A7 Describes the benefits of a multi-sectoral response to malnutrition	3.N/PM.B7 Implements integrated nutrition programming including treatment protocols and prevention and root causes	3.N/PM.C7 Designs multi-sectoral nutrition interventions addressing root causes of malnutrition
3.N/PM.A8 Describes the importance of vaccination as part of comprehensive nutrition response	3.N/PM.B8 Ensures integration of vaccination programmes into comprehensive nutrition programmes	3.N/PM.C8 Supports safe and effective vaccination programmes as part of comprehensive nutrition programmes
3.N/PM.A9 Identifies barriers to access coverage to CMAM programme	3.N/PM.B9 Analyses barriers to access and coverage of CMAM programmes and adapt interventions to improve outcomes	3.N/PM.C9 Analyses barriers to access and coverage of CMAM programmes and evaluate interventions to improve outcomes
3.N/PM.A10 Describes the importance of monitoring the rate of defaulters within the CMAM programme	3.N/PM.B10 Monitors the rate of defaulters within the CMAM programme.	3.N/PM.C10 Plans effective defaulter tracing programme and monitor and analyse the results to adapt accordingly

3. Nutrition/Epidemiology and surveillance (3.N/ES)

Tier A	Tier B	Tier C
3.N/ES.A1 Identifies risk factors for malnutrition for individuals and populations	3.N/ES.B1 Implements programming that mitigates risk factors of malnutrition for individuals and populations at risk	3.N/ES.C1 Designs and evaluates nutrition programming to reduce impact of risk factors on individuals and populations at risk
3.N/ES.A2 Describes key nutrition indicators	3.N/ES.B2 Interprets key nutrition indicators	3.N/ES.C2 Utilises key nutrition indicators to plan, monitor and evaluate programme
		3.N/ES.C3 Implements and analyses coverage surveys
		3.N/ES.C4 Predicts and calculates future caseloads and needs
3.N/ES.A5 Collects data as part of Standardised Monitoring and Assessment of Relief and Transitions (SMART) survey	3.N/ES.B5 Supervises SMART surveys	3.N/ES.C5 Analyses and interprets SMART surveys
3.N/ES.A6 _Accurately conducts anthropometric measurements for	3.N/ES.B6 _Supervises and interprets anthropometric measurement and muac	3.N/ES.C6 Interprets anthropometric measurement and muac results of a

weight and height plus mid upper arm circumference (muac) measuring.		community.

3.Nutrition/Basic public health (3.N/BPH)

Tier A	Tier B	Tier C
3.N/BPH.A1 Describes participatory rural appraisal (PRA) methods that are useful in nutrition programming	3.N.BPH.B1 Implements appropriate PRA methods, based on cultural context to continually assess nutrition programmes	3.N/BPH.C1 Designs appropriate PRA methods, based on cultural context to assess, monitor and evaluate nutrition programmes
3.N/BPH.A2 Describes the importance of chronic disease such as HIV and TB on malnutrition.	3.N/BPH.B2 Ensures vulnerable groups such as those with HIV and TB are appropriately included in comprehensive nutrition response	3.N/BPH.C2 Evaluates the integration and appropriateness of the care of HIV and TB patients within nutrition programmes
3.N/BPH.A3 Identifies key materials in basic health care and referral unit ERU that can be used in nutrition programming	3.N/BPH.B3 Ensures key materials in basic health care and referral unit ERU can be appropriately used in nutrition programming	
3.N /BPH.A4 Explains household economic and food security principles	3.N /BPH.B4 Incorporates household economic and food security principles into programming	3.N/BPH.C4 Analyses household economic and food security based on cultural context
3.N /BPH.A5 Defines best practice for	3.N /BPH.B5 Implements support programmes to	3.N/BPH.C5 Designs and evaluates

malnutrition, breastfeeding, food diversification, basic maternal and child health and micronutrient deficiencies	improve care for infants under six months in relation to Maternal Child Health (MCH)/breastfeeding	support programmes to improve care for infants under six months in relation to MCH and breastfeeding

3. Nutrition/Assessment and analysis (3.N/AA)

Tier A	Tier B	Tier C
3.N/AA.A1 Identifies malnutrition in vulnerable groups including micronutrient deficiencies	3.N/AA.B1 Implements malnutrition programmes in vulnerable groups including micronutrient deficiencies	3.N/AA.C1 Designs and evaluates programmes based on analysis of malnutrition in vulnerable groups including micronutrient deficiencies
3.N/AA.A2 Explains the need for nutrition surveys and potential secondary data sources	3.N/AA.B2 Analyses secondary data sources	3.N/AA.C2 Designs programmes based on secondary data sources

4. Vector-borne diseases/Programme management (4.VBD/PM)

Tier A	Tier B	Tier C
4.VBD/PM.A1 Defines transmission routes, signs and symptoms of common VBD and referrals needed	4.VBD/PM.B1 Implements prevention and treatment of common VBD including diagnosis of disease, treatment options and prevention strategies	4.VBD/PM.C1 Designs and monitors and evaluate VBD prevention and treatment programmes
4.VBD/PM.A2 Identifies risk for VBD	4.VBD/PM.B2 Implements and monitors risk management programmes for VBD	4.VBD/PM.C2 Designs and evaluates risk mitigation for VBD specific to each disease in cooperation with other relevant actors

4. Vector-borne diseases/Epidemiology and surveillance (4.VBD/ES)

Tier A	Tier B	Tier C
4.VBD/ES.A1 Identifies surveillance tools for VBD	4.VBD/ES.B1 Implements surveillance tools for VBD	4.VBD/ES.C1 Designs surveillance tools for VBD and interpret results
4.VBD/ES.A2 Explains case term definitions for VBD	4.VBD/ES.B2 Determines case definitions of VBD with MoH	
3.N/PM.A3 Collects and transmits data based on defined case definitions as part of Community-based surveillance (CBS)	3.N/PM.B3 Interprets and adapt VBD control programme based on CBS	4.VBD/PM.C3 Designs and evaluates CBS in cooperation with existing health management
4.VBD/ES.A4-B4 Describes various types of vectors that can transmit disease and basic control measures		4.VBD/ES.C4 Differentiates and identifies vectors and recommend specific vector control strategies
4.VBD/ES.A5 Explains appropriate protocols for investigating a vector-borne disease outbreak	4.VBD/ES.B5 Demonstrates appropriate protocols for investigating a vector-borne disease outbreak including the collection of accurate information as well as the packaging, shipping and documenting of samples for	4.VBD/ES.C5 Designs and evaluates protocols for investigating a vector-borne disease outbreak including the collection of accurate

		analytical testing		information as well as the packaging, shipping and documenting of samples for analytical testing

5. Reproductive Maternal Newborn and Child Health /Programme intervention (5.SRH/PI)

Tier A	Tier B	Tier C
		5.SRH/PI.C1 Fosters SRH coordination, integration and continuity of care
	5.SRH/PI.B-C2 Provides supportive supervision to ensure quality SRH standards	
5.SRH/PI.A3 Describes appropriate physical facilities to provide quality SRH services	5.SRH/PI.B3 Contributes to the maintenance of appropriate physical facilities to provide quality SRH services	5.SRH/PI.C3 Ensures the availability and maintenance of appropriate physical facilities to provide quality SRH services
5.SRH/PI.A4 Describes comprehensive community-focused and integrated sexual and reproductive health care interventions/programmes	5.SRH/PI.B4 Contributes to comprehensive community-focused and integrated sexual and reproductive health care	5.SRH/PI.C4 Designs, leads and evaluates the provision of comprehensive community-focused and integrated sexual and

		reproductive health care
	5.SRH/PI.B5 Applies risk analysis on community-focused preventive SRH care	5.SRH/PI.C5 Designs and appraises community-focused SRH risk management and preventive care
5.SRH/PI.A6 Describes minimum SRH activities package along with its objectives, in emergencies	5.SRH/PI.B6 Implements minimum SRH activities package, in emergencies	5.SRH/PI.C6 Designs, monitors and evaluates minimum SRH activities package for emergencies settings
5.SRH/PI.A7 Identifies principles for treatment and referral in relation to SRH needs in a humanitarian setting	5.SRH/PI.B7 Assesses effectively the SRH needs for treatment and referral in a humanitarian setting	5.SRH/PI.C7 Organises and evaluates treatment and referral in SRH in a humanitarian setting
5.SRH/PI.A8 Describes high-quality care for sexually transmitted infections and reproductive tract infections	5.SRH/PI.B8 Provides high-quality care for sexually transmitted infections and reproductive tract infections	5.SRH/PI.C8 Organises and evaluates high-quality sexually transmitted infection and reproductive tract infection care
5.SRH/PI.A9 Identifies quality in care during labour, birth and immediate postpartum	5.SRH/PI.B9 Provides high-quality care during labour, birth and immediate postpartum	5.SRH/PI.C9 Organises and evaluates high-quality care during labour, birth and immediate postpartum
5.SRH/PI.A10 Identifies quality in postnatal care for women and neonates	5.SRH/PI.B10 Provides comprehensive, high-quality, postnatal care for women and neonates	5.SRH/PI.C10 Organises, monitors and evaluates comprehensive, high-quality, postnatal care for women and neonates
5.SRH/PI.A11 Identifies cost-effective	5.SRH/PI.B11 Implements cost-effective low-cost SRH	5.SRH/PI.C11 Designs and evaluates

low-cost SRH first aid interventions aiming at reducing maternal morbidity and mortality in emergencies	first aid interventions aiming at reducing maternal morbidity and mortality in emergencies	cost-effective low-cost SRH first aid interventions aiming at reducing maternal morbidity and mortality in emergencies

5. Reproductive Maternal Newborn and Child Health /Programme management (5.SRH/PM)

Oversee service delivery team in SRH, design mobilising resources, HR management, monitoring and evaluation

Tier A	Tier B	Tier C
5.SRH/PM.A1 Describes effective performance of healthcare team in humanitarian settings	5.SRH/PM.B1 Contributes to effective performance of the whole healthcare team	5.SRH/PM.C1 Manages effectively the health-care team to allow the efficient provision of quality sexual and reproductive health services
5.SRH/PM.A2 Describes SRH and gender indicators for monitoring information, research, policies and programmes	5.SRH/PM.B2 Gathers information based on SRH and gender indicators for monitoring, research, policies and programmes	5.SRH/PM.C2 Analyses complex information based on SRH and gender indicators for monitoring information, research, policies and provides decision-making support for SRH services
5.SRH/PM.A3 Knows the elements of	5.SRH/PM.B3 Applies the SRH Plan of Action and	5.SRH/PM.C3 Leads the

a SRH strategy and describe the provision of SRH integrated services	contribute to the provision of SRH integrated services	implementation of SRH Plan of Action and the provision of SRH integrated services
5.SRH/PM.A4 Understands the need for prioritization in SRH education in emergencies	5.SRH/PM.B4 Applies priorities in health education needs for SRH in emergencies	5.SRH/PM.C4 Establishes effective priorities for SRH education in emergencies
5.SRH/PM.A-B5 Identifies key SRH indicators used for monitoring purposes in humanitarian settings	5.SRH/PM.C5 Designs assessments for SRH needs in emergencies	5.SRH/PM.A-B5 Identifies key SRH indicators used for monitoring purposes in humanitarian settings

5. Reproductive Maternal Newborn and Child Health /Basic public health (5.SRH/BPH)

Tier A	Tier B	Tier C
5. SRH/BPH.A1 Describes social determinants for SRH, including barriers and facilitating factors	5.SRH/BPH.B1 Identifies social determinants for SRH, including barriers and facilitating factors	5.SRH/BPH.C1 Appraises social determinants for SRH, including barriers and facilitating factors
5.SRH/BPH.A2 Describes diverse SRH service needs for different groups, inclusive of the vulnerable and marginalized, at different points in the life-course	5.SRH/BPH.B2 Provides SRH services according to the needs of different groups, inclusive of the most vulnerable and marginalized, at different points in the life-course	5.SRH/BPH.C2 Organises SRH services according to the needs of different groups, inclusive of the most vulnerable and marginalized, at different points in the life-course

6. Field epidemiology/Equipment and tools (6.FE/ET)

Tier A	Tier B	Tier C
6.FE/ET.A1 Uses identified informatics tools in support of epidemiologic practice	6.FE/ET.B1-C1 Applies principles of informatics including data collection, processing and analysis, in support of epidemiologic practice	

6. Field epidemiology/Assessment and analysis (6.FE/AA)

Tier A	Tier B	Tier C
6.FE/AA.A1 Recognises public health problems pertinent to the population	6.FE/AA.B1 Identifies public health problems pertinent to the population and determine the need for further investigation or intervention	6.FE/AA.C1 Validates identification of public health problems pertinent to the population
6.FE/AA.A2 Collaborates with others inside and outside Red Cross Red Crescent to identify the problem	6.FE/AA.B2 Collaborates with others inside and outside the Red Cross and Red Crescent to identify the problem and form recommendations	6.FE/AA.C2 Leads collaborations with others inside and outside the Red Cross and Red Crescent to identify the problem and form recommendations
6.FE/AA.A3 Assists in conducting an emergency health assessment	6.FE/AA.B3 Participates in emergency health assessment as part of multi-sectoral team	6.FE/AA.C3 Designs an emergency health assessment as part of a multi-sectoral or multi-agency team

6. Field epidemiology/Programme intervention (6.FE/PI)

Tier A	Tier B	Tier C
6.FE/PI.A1 Assists in developing recommended evidence-based interventions and control measures in response to epidemiologic findings	6.FE/PI.B1 Implements evidence-based interventions and control measures in response to epidemiologic findings	6.FE/PI.C1 Designs new interventions on the basis of evidence and in response to epidemiologic findings
6.FE/PI.A2 Defines cultural/social/political framework for recommended interventions	6.FE/PI.B2 Establishes cultural/social/political framework for recommendations or interventions	6.FE/PI.C2 Evaluates recommendations or interventions against the local cultural/social/political framework
		6.FE/PI.C3 Evaluates interventions against scientific evidence

6. Field epidemiology/Epidemiology and surveillance (6.FE/ES)

Tier A	Tier B	Tier C
6.FE/ES.A1 Utilises existing health information system (HIS) to identify risks and patterns of disease to inform programming	6.FE/ES.B1 Assesses and contributes to the effectiveness of existing health information systems to support programme planning and implementation	6.FE/ES.C1 Develops and manages information systems to improve effectiveness of surveillance, investigation and other epidemiologic practices
6.FE/ES.A2 Assesses the appropriateness of establishing a community-based surveillance system	6.FE/ES.B2 Designs and implements community-based disease surveillance system, ensuring integration with existing systems and response mechanisms	6.FE/ES.C2 Evaluates community-based disease surveillance system, ensuring integration with existing systems and response mechanisms
6.FE/ES.A3 Establishes effective health information system in Red Cross Red Crescent health programmes that include groups subject to health disparities or other	6.FE/ES.B3 Analyses, interprets and disseminates data from internal health information system to inform programming	6.FE/ES.C3 Conducts advanced analysis including analytic epidemiology on internal data to contribute to a body of evidence

potentially under-represented groups		
6.FE/ES.A4 Recommends priorities for public health interventions based on epidemiologic data	6.FE/ES.B4 Supports public health and clinical teams in designing health interventions based on epidemiologic assessment	6.FE/ES.C4 Evaluates effectiveness of implementation of public health and clinical interventions in addressing priority health areas
6.FE/ES.A5 Identifies the need for outbreak investigation	6.FE/ES.B5 Supports and engages in outbreak investigation and response	6.FE/ES.C5 Leads outbreak investigation and support response
6.FE/ES.A6 Assesses quality of available laboratory diagnostics and the impact on clinical diagnosis and health reporting	6.FE/ES.B6-C6 Creates case definitions when required to support surveillance and health information system when definitions are not available	
6.FE/ES.A7 Implements country-specific case definitions for health information and surveillance systems	6.FE/ES.B7-C7 Assesses sensitivity and specificity of case definitions in the emergency context	
6.FE/ES.A8 Maintains databases according to information protection and ethical principles	6.FE/ES.B8-C8 Creates and manages databases in line with information protection guidelines and ethical principles	
6.FE/ES.A9 Utilises data from an epidemiologic investigation or study	6.FE/ES.B9 Analyses and interprets data from surveillance, investigations or other sources	6.FE/ES.C9 Evaluates analysis of data from surveillance, investigations or other sources.
	6.FE/ES.B10 Applies knowledge of epidemiologic principles and methods to make recommendations regarding the validity of epidemiologic data	6.FE/ES.C10 Assesses the validity of epidemiologic data, taking into consideration bias and other

	variations

6. Field epidemiology/Basic public health (6.FE/BPH)

Tier A	Tier B	Tier C
6.FE/BPH.A1 Explains how causes of disease affect epidemiologic practice	6.FE/BPH.B1 Demonstrates current knowledge of causes of disease to guide epidemiologic practice	
6.FE/BPH.A2 Describes appropriate input for epidemiologic studies, public health programmes and community public health planning processes at the state, local or tribal level including ethics and legal principles	6.FE/BPH.B2 Provides input into epidemiologic studies, public health programmes and community public health planning processes at the state, local or tribal level including ethics and legal principles	6.FE/BPH.C2 Leads epidemiologic studies, public health programmes and community public health planning processes at the state, local or tribal level including ethics and legal principles

6. Field epidemiology/Operational management (6.FE/OM)

Tier A	Tier B	Tier C
6.FE/OM.A1-B1 Conducts epidemiologic activities within the financial and operational plan of the Red Cross Red Crescent		6.FE/OM.C1 Works with National Society to create operational and financial plans for critical future epidemiologic and operational research activities
6.FE/OM.A2 Prepares Plan of Action (PoA) using epidemiological data, as necessary	6.FE/OM.B2 Modifies PoA using epidemiological data, as necessary	6.FE/OM.C2 Evaluates PoA for meeting epidemiological needs in the field
6.FE/OM.A3 Ensures use of key epidemiological indicators (CFR, CMR) to define health status.	6.FE/OM.B3 Analyses and interprets trends of key epidemiological indicators in relation to emergency and recovery contexts	6.FE/OM.C3 Uses key epidemiological indicators for advocacy and programme implementation
6.FE/OM.A4 Uses geographic information systems (GIS) and data visualization tools to support decision-making and programme support	6.FE/OM.B4-C4 Creates GIS and data visualization tools to assist in internal and external dissemination of operationally relevant data	
6.FE/OM.A5 Uses contact tracing data to support epidemic control activities	6.FE/OM.B5 Implements contact tracing activities in epidemic scenarios of person to person transmission to limit impact of epidemic	6.FE/OM.C5 Designs and evaluates effective contact tracing activities to stop epidemic transmission
6.FE/OM.A6 Utilises current research	6.FE/OM.B6 Analyses and interprets relevant research	6.FE/OM.C6 Participates or

and evidence to support programme implementation through literature reviews and secondary data analysis	and evidence to inform programme design through literature reviews and secondary data analysis	designs relevant research to create an evidence base of effectiveness

7. Epidemics/General (7.E/G)

Tier A	Tier B	Tier C
7.E/G.A1 Describes the basic principles of epidemiological calculators and thresholds and how they are used in epidemic prevention and response	7.E/G.B1 Produces high quality data for use in preparing an epidemic prevention or response plan	7.E/G.C1 Analyses and disseminates high quality data for use in preparing an epidemic prevention or response plan
7.E/G.A2 Describes the risk factors of the most common or major epidemics/pandemics especially in humanitarian contexts	7.E/G.B2 Designs and implements preparedness activities for the most common diseases in humanitarian settings	7.E/G.C2-3 Designs, plans and organises effective prevention measure activities
7.E/G.A3 Defines the diseases with epidemic and pandemic potential including their route of transmission	6.FE/EPR.B3 Assesses humanitarian contexts and identify diseases with epidemic potential	

7.E/G.A4 Describes the prevention and control measures for epidemic-prone diseases in humanitarian contexts	7.E/G.B4 Applies prevention and control measures for epidemic-prone disease in humanitarian contexts	7.E/G.C4 Monitors epidemic prevention and control measures in humanitarian settings
7.E/G.A5 Describes the key steps of an outbreak investigation and response	7.E/G.B5 Implements key steps of an outbreak investigation and response	7.E/G.C5 Organises and evaluates an epidemic response
7.E/G.A6 Describes the principles of disease surveillance and how it applies to disease prevention and epidemic response	7.E/G.B6 Implements effective surveillance systems.	7.E/G.C6 Designs, plans, organises and evaluates disease surveillance systems
7.E/G.A7 Describes the importance of integrated outbreak response including health system and communities	7.E/G.B8 Collaborates with local health actors in epidemic control	7.E/G.C8 Ensures integration and collaboration with local authorities in epidemic control
7.E/G.A8-B8 Engages with communities in epidemic response		7.E/G.C8 Organises an epidemic response in collaboration with communities
7.E/G.A9-B9 Collaborates in operational partnerships		7.E/G.C9 Identifies and maintains operational partnerships to ensure integrated response

7.E/G.A10 Explains the importance or the correct use of protocols to ensure staff safety	7.E/G.B10 Implements and controls correct use of protocols to ensure staff safety	7.E/G.C10 Ensures correct protocol and procedures to ensure staff safety

7. Epidemics/Vaccine preventable disease/Equipment and tools (7.E/VPD/ET)

Tier A	Tier B	Tier C
7.E/VPD/ET.A1 Identifies cold chain equipment and explain its importance	7.E/VPD/ET.B1 Monitors and uses cold chain equipment correctly	7.E/VPD/ET.C1 Supervises the use of cold chain equipment
7.E/VPD/ET.A1 Explains principles of sharps waste management	7.E/VPD/ET.B1 Implements safe sharps waste management correctly	7.E/VPD/ET.C2 Assesses local regulations and possibilities for safe sharps disposal and where needed set up a safe sharps waste disposal system

7. Epidemics/Vaccine preventable disease /Programme management (7.E/VPD/PM)

Tier A	Tier B	Tier C
	7.E/VPD/PM.B1 Calculates the estimated need of vaccines and vaccine storage volume as well as additionally needed items	7.E/VPD/PM.C1 Establishes a budget and order adequate supplies of all necessary items for an effective vaccination campaign
7.E/VPD/PM.A2 Identifies potential partners/additional needed staff to run vaccination campaign	7.E/VPD/PM.B2 Engages and trains potential partners/additional needed staff to run effective vaccination campaign	
	7.E/VPD/PM.B3 Contributes to the intervention report for VPD	7.E/VPD/PM.C3 Develops an intervention report for VPD
		7.E/VPD/PM.C4 Evaluates the response and surveillance system for VPD.

7. Epidemics/Vaccine preventable disease/Epidemiology and surveillance (7.E/VPD/ES)

Tier A	Tier B	Tier C
		7.E/VPD/ESC1 Designs and implements a surveillance system for VPD
7.E/VPD/ESA2 Defines case fatality rate	7.E/VPD/ES.B2 Calculates case fatality rate	7.E/VPD/ES.C2 Analyses and interprets case fatality rate and react accordingly
7.E/VPD/ES.A3 Defines how to estimate vaccination coverage	7.E/VPD/ES.B3 Calculates vaccination coverage	7.E/VPD/ES.C3 Analyses and interprets vaccination coverage and react accordingly
7.E/VPD/ES.A4 Defines vaccination utilization rate	7.E/VPD/ES.B4 Calculates vaccination utilization rate	7.E/VPD/ES.C4 Analyses and interprets vaccination utilization rate and react accordingly
7.E/VPD/ES.A5 Describes vaccination effectiveness	7.E/VPD/ES.B5 Calculates vaccination effectiveness.	7.E/VPD/ESC5 Analyses and interprets vaccine effectiveness and react accordingly when there is a

		need to calculate vaccine effectiveness.

7. Epidemics/Vaccine preventable disease/Basic public health (7.E/VPD/BPH)

Tier A	Tier B	Tier C
7.E/VPD/BPH.A1 Explains the principles of a mass vaccination campaign	7.E/VPD/BPH.B1 Implements mass vaccination campaign	7.E/VPD/BPH.C1 Designs and conducts mass vaccination campaign
7.E/VPD/BPH.A2 Lists vaccine preventable diseases	7.E/VPD/BPH.B2-C2 Manages the different vaccine preventable diseases and the respective treatment protocol, including isolation measures	
7.E/VPD/BPH.A3 Describes injection safety	7.E/VPD/BPH.B3 Applies injection safety	7.E/VPD/BPH.C3 Supervises injection safety
7.E/VPD/BPH.A4 Describes adverse events following immunization (AEFI)	7.E/VPD/BPH.B4 Monitors and treats AEFI	7.E/VPD/BPH.C4 Sets up an AEFI monitoring system
	7.E/VPD/BPH.B5 Trains health care workers to monitor and manage AEFI and respond to rumours	
7.E/VPD/BPH.A6 Describes personal protection measures	7.E/VPD/BPH.A6 Applies personal protection measures	7.E/VPD/BPH.A6 Supervises personal protection measures

7. Epidemics/Vaccine preventable disease/Outreach (7.E/VPD/OUT)

Tier A	Tier B	Tier C
7.E/VPD/OUT.A1 Identifies criteria for mass vaccination campaign	7.E/VPD/OUT.B1-C1 Conducts epidemiological investigation and review of immunization data to propose need for a mass vaccination campaign	
7.E/VPD/OUT.A2 Understands need for mass vaccination campaign	7.E/VPD/OUT.B2 Carries out mass vaccination campaign	7.E/VPD/OUT.B2 Designs and supervises the conduct of mass vaccination campaign including timing and targeted populations
	7.E/VPD/OUT.B3 Proposes a budget and supply plan for conducting a mass vaccination campaign	7.E/VPD/OUT.C3 Develops a budget and supply plan, calculate and organize sufficient supply for the campaign including customs / logistics
7.E/VPD/OUT.A4 Conducts social mobilization activities with community	7.E/VPD/OUT.B4 Organises social mobilization activities and foster community engagement	7.E/VPD/OUT.C4 Supervises social mobilization and community engagement
	7.E/VPD/OUT.B5 Proposes key players and partners for	7.E/VPD/OUT.C5 Identifies key

	mass vaccination campaign	players and partners for mass vaccination campaign with roles and responsibilities clearly coordinated
7.E/VPD/OUT.A6 Describes personal protection measures	7.E/VPD/OUT.A6 Applies personal protection measures	7.E/VPD/OUT.A6 Supervises personal protection measures

8. Clinical/General clinical skills (8.C/GCS)

Tier A	Tier B	Tier C
8.C/GCS.A1 Describes the importance of effective teamwork and collaboration within the clinical care setting	8.C/GCS.B1 Contributes to effective teamwork and collaboration within the clinical care setting	8.C/GCS.C1 Ensures effective teamwork and collaboration within the clinical care setting
8.C/GCS.A2 Describes the importance of provision of safe, efficient and ethical clinical care	8.C/GCS.B2 Contributes to provision of safe, efficient and ethical clinical care	8.C/GCS.C2 Ensures the provision of safe, efficient and ethical clinical care
8.C/GCS.A3 Describes the importance of effective occupational health safety in clinical care environment	8.C/GCS.B3 Contributes to effective occupational health safety in clinical care environment	8.C/GCS.C3 Ensures effective occupational health safety in clinical care environment
8.C/GCS.A4 Describes the	8.C/GCS.B4 Contributes to effective after care and	8.C/GCS.C4 Ensures effective after

importance of effective after care and discharge services	discharge services and ensure services are available and utilized	care and discharge services are available and utilized
8.C/GCS.A5 Describes the importance of multi-sectoral response and coordination	8.C/GCS.B5 Contributes to engagement and collaboration with other emergency response sectors to IFRC coordination mechanism and HNS	8.C/GCS.C5 Ensures engagement and collaboration with other emergency response sectors to IFRC coordination mechanism and HNS
8.C/GCS.A6 Describes the importance of accountability	8.C/GCS.B6 Contributes to accountability of services to beneficiaries, host health system and deploying National Societies	8.C/GCS.C6 Ensures accountability of services to beneficiaries, host health system and deploying National Societies.
8.C/GCS.A7 Identifies accurate record-keeping to all activities including HMIS	8.C/GCS.B7 Applies comprehensive and accurate record-keeping to all activities including HMIS	8.C/GCS.C7 Interprets and utilises health system data effectively, plan and implement clinical services and public health interventions
8.C/GCS.A8 Describes a sustainable handover and exit strategy	8.C/GCS.B8 Contributes to sustainable handover and exit strategy	8.C/GCS.C8 Ensures sustainable handover and exit strategy
8.C/GCS.A9 Describes provision to equitable access and gender sensitive clinical environment	8.C/GCS.B9 Contributes to provision to equitable access and gender sensitive clinical environment	8.C/GCS.C9 Ensures equitable access to vulnerable groups including gender sensitive clinical environment
8.C/GCS.A10 Describes the importance of representation	8.C/GCS.B10 Participates in representing internal and external context including media	8.C/GCS.C10 Represents Red Cross Red Crescent and National Society effectively in internal and external

		contexts including media relations
1.G/OM.A7 Ensures patient documentation is correct	1.G/OM.B7 Collects individual patient data records for reporting	1.G/OM.C7 Ensures quality of weekly reporting and interpret results for programme modification

8. Clinical/Team leader (8.CL/TL)

Tier A	Tier B	Tier C
		8.CL/TL.C1 Leads the health management team (Lead Administrator, Head Nurse, Senior Medical Officer, Medical Coordinator, Lead Technician), providing direction and coordination for the day to day management of activities
8.CL/TL.A2 Follows the set Red Cross Red Crescent Code of Conduct, SOPs, security guidelines and other applicable policies	8.CL/TL.B2 Ensures compliance with Red Cross Red Crescent Code of Conduct, SOPs, security guidelines and other applicable policies by all team members	8.CL/TL.C2 Ensures compliance with Red Cross Red Crescent Code of Conduct, define and assure compliance with SOPs, security guidelines and other applicable policies by all team members
	8.CL/TL.B3 Chairs regular status update/coordination meetings with the management team and with overall Red Cross Red Crescent health team	8.CL/TL.C3 Chairs regular status update/coordination meetings with the management team and with overall Red Cross Red Crescent health team and other actors and attend cluster meetings

	8.CL/TL.B4 Ensures that safety guidelines are in place and well understood by delegates and local staff	8.CL/TL.C4 Develops and defines safety guidelines and put in place ensuring they are well understood by delegates and local staff
		8.CL/TL.C5 Assumes responsibility for the security and safety of local staff and delegates
8.CL/TL.A6 Applies the health team security and contingency plans (including medical evacuation)	8.CL/TL.B6 Regularly reviews the health team security and contingency plans (including medical evacuation)	8.CL/TL.C6 Elaborates and regularly reviews the health team security and contingency plans (including medical evacuation)
	8.CL/TL.B7 Conducts performance reviews	8.CL/TL.C7 Makes recommendations on transition, hand-over and early recovery strategies
	8.CL/TL.B8 Reports regularly to IFRC on matters of concern.	8.CL/TL.C8 Reports regularly on team activities and issues according to ToRs and SOPs
		8.CL/TL.C9 Conducts performance evaluations of management team against core competencies and expected tasks
		8.CL/TL.C10 Develops strategies and plans for the health team to

	address/adjust for unmet health needs in collaboration with Red Cross and Red Crescent partners and other stakeholders as required.
	8.CL/TL.C11 Monitors the team's capacity needs according to the changing context of the operation
	8.CL/TL.C12 Ensures that sound human resources practices are in place, and are consistent with the applicable local regulations and ERU standards. Liaise and coordinate with IFRC and/or the local National Society as required
	8.CL/TL.C13 Ensures and maintains a safe working environment for the ERU personnel, beneficiaries and visitors through safe practices, preventive measures and training in order to reduce the potential for injuries caused by the equipment
	8.CL/TL.C14 Ensures safe, rapid and qualitative health care service to affected populations and the well-being

	of the ERU team and national staff and volunteers

8. Clinical/Head nurse (8.CL/HN)

Tier A	Tier B	Tier C
8.CL/HN.A1 Identifies the HIS tool	8.CL/HN.A2 Ensures daily/weekly data complies with MoH data	
8.CL/HN.A2 Describes basic function of HIS in RCEC, RCEH and ERU, including processes for collection of daily data which comply with MoH national requirements	8.CL/HN.B2 Collects appropriate HIS data in line with MoH requirements	8.CL/HN.C2 Analyses and interprets HIS data and demonstrate knowledge of relevance of trends and outbreak predictions
	8.CL/HN.B3 Analyses daily HIS data including trends and outbreak predictions	8.CL/HN.C3 Demonstrates knowledge of outbreak response
8.CL/HN.4 Utilises hospital equipment appropriately to safely manage patients		
8.CL/HN.5 Describes correct procedures for storage, charging and cleaning of equipment		
	8.CL/HN.B6-C6 Oversees and plans training of clinical staff including staff orientation for new clinical staff	
8.CL/HN.A7 Trains local staff in daily shift routine at ward/unit level	8.CL/HN.B7-C7 Develops training plan in response to emergency including all training requirements for local staff working in ERU/RCEC/RCEH	

8.CL/HN.A8 Describes and demonstrates key concepts of hygiene protocols	8.CL/HN.B8-C8 Demonstrates understanding of standard operating procedures	
8.CL/HN.9 Demonstrates sound understanding of treatment protocols and guidelines		
8.CL/HN.A10 Demonstrates awareness of required and safe staff numbers and roles for each shift	8.CL/HN.B10 Implements staff roster with appropriate staff mix for all shifts	8.CL/HN.C10 Establishes staffing requirements and numbers for ERU/RCEC/RCEH based on bed numbers, staff experience, expertise and daily needs to develop staff roster for subsequent rotations
		8.CL/HN.C11 Establishes a working schedule and call schedule to ensure uninterrupted delivery of services
	8.CL/HN.B12-C12 Monitors staff morale to appropriately determine psychological needs based on events and presentations	
8.CL/HN.13 Demonstrates sound understanding of ERU SOP		
8.CL/HN.14 Attends health cluster meetings and work effectively with the MoH		
8.CL.HN/15 Demonstrates exit strategy for ERU/RCEC/RCEH		

8. Clinical/Finance and administration (8.CL/FAD)

Tier A	Tier B	Tier C
8.CL/FAD.A1 Manages and supervises living quarters for staff, including services to the delegates such as accommodation, kitchen and laundry	8.CL/FAD.B1 Oversees quality of staff facilities	8.CL/FAD.C1 Plans staff facilities
8.CL/FAD.A2-B2 Ensures that procurement supporting the operation is done on time including water, fuel and construction materials		
8.CL/FAD.A3 Sets up and maintains the IT/telecom system as needed		
		8.CL/FAD.C4 Hires local staff according to the needs of the ERU
		8.CL/FAD.C5 Manages and coordinates movement of delegates in and out of the country including flights, visa and transportation to/from airports
		8.CL/FAD.C6 Manages financial systems, including cash flow, local payments, payroll, record keeping and financial monitoring

		8.CL/FAD.C7 Prepares regular financial reports and tracks expenditure against budget
		8.CL/FAD.C8 Manages and coordinates local procurement for goods and services

8. Clinical/technician – logistician (8.CL/T-LOG)

Tier A	Tier B	Tier C
		8.CL/T-LOG.C1 Manages, supervises and is accountable for the provision of technical services to the ERU, including provision of safe water, electricity, sanitation, tented or permanent structures and fleet maintenance.
		8.CL/T-LOG.C2 Sets up and secures the continuous provision of water, sanitation, electricity and tented infrastructure

		8.CL/T-LOG.C3 Develops and implements maintenance routine for all ERU equipment
		8.CL/T-LOG.C4 Develops and implements safety measures into the day to day delivery of technical services.
8.CL/T-LOG.A5 Works with local counterparts and suppliers for the provision of technical services		8.CL/T-LOG.C5 Identifies local counterparts and suppliers for the provision of technical services in close collaboration with the Lead Administrator,
		8.CL/T-LOG.C6 Act as the main technical advisor for site planning and site layout, and advise on site and equipment constraints
		8.CL/T-LOG.C7 Appropriately staffs the technical team to allow proper functioning, maintenance and development of the ERU as per the operational needs
		8.CL/T-LOG.C8 Briefs and trains technical and non-technical staff to allow safe operation of the equipment

8.CL/T-LOG.A9 Assigns priorities during the setup of the ERU in collaboration with the management team, ensuring that services can be delivered by the ERU as soon as possible
8.CL/T-LOG.A10 Implements further changes and development to the ERU site layout, according to operational needs
8.CL/T-LOG.A11 Advises on technical constraints, possibilities and options during site planning
8.CL/T-LOG.A12 Secures the safe and reliable provision of electricity throughout the site, according to needs and the technical requirements
8.CL/T-LOG.A13 Implements proper procedures for the maintenance of the generator and the electrical distribution system
8.CL/T-LOG.A14 Monitors the distribution system, fuel consumption, electricity consumption, electricity needs and load balance

8.CL/T-LOG.A15 Prepares and trains staff on mitigation measures to compensate any system failure	
8.CL/T-LOG.A16 Facilitates the reception of the equipment, and its storage when required	
8.CL/T-LOG.A17 Ensures that the ERU is properly set up, including generator, installation of electrical, lighting and water and sanitation systems, erection of tents and staff quarters	
8.CL/T-LOG.A18 Serves as the technical focal point for matters pertaining to the equipment, including during the set up and pack down phases	
8.CL/T-LOG.A19 Maintains and repairs the equipment ensuring that it remains in good working condition	
8.CL/T-LOG.A20 Sets up the VHF radio antenna or any other hardware that will allow the ERU team to efficiently communicate in the field	

| 8.CL/T-LOG.A21 Installs VHF and/or HF radios or any other mean of communication on ERU vehicles | |
| 8.CL/T-LOG.A22 Ensures that VHF and HF radios installed in cars remain in good working order | |

8. Clinical/Water, sanitation and waste management (8.CL/WSWM)

Tier A	Tier B	Tier C
8.CL/WSWM.A1-B1 Sets up and secures the continuous provision of water, sanitation, electricity and tented infrastructure		
8.CL/WSWM.A2-B2 Sets up a water and sanitation system throughout the site, which includes the provision of safe water and the disposal of grey and black water		
8.CL/WSWM.3 Adheres to the highest national or international recognized standards, and follow the Sphere guidelines as a minimum standard		
8.CL/WSWM.A4-B4 Controls and monitors quality of water, ensuring water is of appropriate quality		

8.CL/WSWM.A5-B5 Organises water trucking if applicable and ensure that stock levels remain at appropriate level	

8. Clinical/Senior medical officer (8.CL/SMO)

Tier A	Tier B	Tier C
		8.CL/SMO.C1 Ensures clinical guidelines are in place, adhered to by all staff and comply with local regulations of the country of deployment
		8.CL/SMO.C2 Demonstrates high quality skills in medical team management and leadership and conflict management in humanitarian environments
		8.CL/SMO.C3 Provides effective management and leadership to the medical staff under their line management
		8.CL/SMO.C4 Demonstrates skills in operational planning (entry and exit strategies) and flexibility in prioritizing needs

	8.CL/SMO.C5 Demonstrates experience in producing quality reports including operational and critical incident management
	8.CL/SMO.C6 Ensures adequate data management systems are in place and used to review and support operational needs
	8.CL/SMO.C7 Establishes appropriate referral mechanisms for the response
	8.CL/SMO.C8 Provides appropriate staff and patient advocacy in the current context

8. Clinical/Doctor of anaesthesia (8.CL/MDAN)

Tier A	Tier B	Tier C
8.CL/MDAN.A1-B1 Maintains professional registration to deliver anaesthetics in their country of origin and comply with regulations of country of deployment		
8.CL/MDAN.A2-B2 Provides high quality anaesthetic services including the following: i) Anaesthetic clinical care including resuscitation, general and regional anaesthesia and patient recovery iii) Resuscitation with airway control +/- surgical airway		
8.CL/MDAN.A3-B3 Manages, bears responsibility for and utilises the anaesthetic equipment		

8. Clinical/Operating theatre nurse (8.CL/OTN)

Tier A	Tier B	Tier C
8.CL/OTN.A-B1 Manages, bears responsibility for and maintains the OT equipment		

9. Pyschosocial Support/mental health and psychosocial support (9.PSS/MHPSS)

Tier A	Tier B	Tier C
9.PSS/MHPSS.A1 Demonstrates knowledge of protection and psychosocial assessment, monitoring and evaluation tools and different types of psychosocial interventions	9.PSS/MHPSS.B1-C1 Analyses and recommends appropriate psychosocial interventions of communities in need.	

9.PSS/MHPSS.B2 Explains concepts of child protection, SGBV prevention and response, violence prevention and mental health and psychosocial support intervention and activities in emergencies	9.PSS/MHPSS.B2-C2 Implements mental health and psychosocial community-based supports and protection approaches and interventions with an inclusive approach