Global Tools Review



Final report

30 November 2016

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Acronyms and abbreviations

AP	Asia Pacific
CBPF	Country-Based Pooled Funds
CCST	Country Cluster Support Team
CHS	Common Humanitarian Standard
DCM	Disaster and Crisis Management Department (later Directorate)
DM	Disaster management
DMIS	Disaster Management Information System
DMWG	Disaster Management Working Group
DREF	Disaster Relief Emergency Fund
DRR	Disaster risk reduction
EA	Emergency Appeal
ECHO	European Commission Office of Humanitarian Aid and Civil Protection
EMT	Emergency Management Teams
ENA	Emergency Needs Assessment
EPOA/POA	Emergency Plan of Action / Plan of Action
ERAT	Emergency Rapid Assessment Teams
ERU	Emergency Response Unit
EU	European Union
FACT	Field Assessment and Coordination Team
FERST	Federation Early Recovery Surge Team
GAR	Gap Analysis Report
GRT	Global Response Tool
GTR	Global tools review
GSWG	Global Surge Working Group
HCT	Humanitarian Country Team
HEOps	Head of Emergency Operations (D-HEOps = Developing HEOps)
HES	Household Economic Security
ICRC	International Committee of the Red Cross
IFRC	International Federation of Red Cross and Red Crescent Societies ¹
IM	Information Management
INGO	International non-governmental organisation
IPC	Integrated Food Security Phase Classification
M&E	
	Monitoring and evaluation
MENA	Middle East and North Africa
MSC	Minimum Standard Commitments
MSF	Médecins Sans Frontières (Doctor Without Borders)
NDMA	National Disaster Management Authority
NDRT	National Disaster Response Team
NGO	Non-governmental organisation
NS	National Society
OCHA	Office for the Coordination of Humanitarian Affairs
OSOCC	On-Site Operations Coordination Centre
P&Rs	Principles and Rules of Humanitarian Assistance
PMER	Planning, monitoring, evaluation and reporting
PSS	Psychosocial support
RDM	ICRC Rapid Deployment Mechanism
RDRT	
	Regional Disaster Response Team
RFL	Restoring Family Links
RIT	Regional Intervention Team (equivalent to RDRT in Americas region)
RRU	Regional Response Unit
RTE	Real-Time Evaluation
SCT	Shelter Coordination Team
SGBV	Sexual and gender-based violence
SIMS	Surge Information Management System
SMCC	Strengthening Movement Coordination and Cooperation
SOP	Standard operating procedures
STT	Shelter Technical Team
ToR	Terms of Reference
UNDAC	United Nations Disaster Assessment and Coordination
WHS	World Humanitarian Summit

¹ In this report, IFRC refers to the Secretariat (Geneva HQ, regions, CCSTs, country and local offices)

Executive summary

Over the last 20 years the International Federation of Red Cross and Red Crescent Societies (IFRC) and its National Societies (NS) have focused significant effort on the creation and ongoing development of a set of Global Response Tools (GRT). The tools have been designed to respond to sudden onset emergencies and not for slow onset or protracted crises or in urban environments. As such, the ability of the GRT system to respond to all situations of disaster and crisis in which the Movement is active has its limitations.

While a number of the individual tools that make up the system have been reviewed and evaluated, there has been no review of the system as a whole for many years. In order to ensure that the GRTs have the capacity to respond to the changing nature of crises in the coming decade, the IFRC's General Assembly approved a review of the GRT system in November 2013. The humanitarian environment in which the tools operate has changed over the last decade. Research points to potential trends that will affect humanitarian response, including an increase in the number of: medium to small-scale disasters; neglected crises; urban-based disasters; and, slow-onset and complex crises. This review aims to bring the Movement's global tools and the external environment together by reviewing the tools against a single, comprehensive picture of the future humanitarian environment and resulting needs.

A Steering Group comprising five NS (the American, British, Canadian, Netherlands and Norwegian Red Cross) oversaw the review process and had the budgetary responsibility. In addition, the IFRC Disaster and Crisis Management (DCM) Department was part of the Steering Group, along with process managers from the Swedish Red Cross and the Canadian Red Cross, providing further support in managing the review.

The review was undertaken in two phases between September 2015 and November 2016. Both phases took into consideration perspectives across the Movement (sending and receiving NS; the IFRC; the ICRC; external humanitarian actors; and representatives from affected communities). Phase I of the review produced an initial gap analysis report (GAR) (presented to the General Assembly in November 2015). Phase II provided the opportunity for more in-depth consultation and detailed analysis, including field visits to IFRC Regional and Country Offices, a number of NS and to field locations with ongoing response operations.

Objectives and scope

The review terms of reference (ToR) set out three objectives as follows:

- a scoping of the humanitarian environment looking forward at least ten years (2025) identifying changes to the environment, and resulting trends within which the global tools will operate and the needs they will seek to address; This will include natural and man-made disasters, population movements and complex emergencies in fragile States.
- a retrospective review of the global tools to date identifying, not only their strengths and weaknesses from the individual technical/sectoral perspective, but also that of their inter-dependency and inter-operability and the decision-making framework within which they are deployed (or not), to give a current "state of health" picture:
- determination of the required functionality of the global tools to meet identified future needs, with recommendations on how to achieve any required changes.

The review focused on the following global tools, with greatest emphasis on the first four listed below:

- Emergency Response Units (ERU)
- Field Assessment and Coordination Teams (FACT)
- Regional Disaster Response Teams (RDRT) or Regional Intervention Teams (RIT)
- Head of Emergency Operations (HEOps) and Developing (D-HEOps)
- Household Economic Security roster (HES)
- Shelter Technical (STT) and Cluster Coordination (SCT) Teams
- Cash Transfer Programming (CTP) roster
- Federation Early Recovery Surge Team (FERST)
- ICRC Rapid Deployment Mechanism (RDM)

The review had no mandate to consider the Disaster Management Information System (DMIS), Surge Information Management System (SIMS), Disaster Relief Emergency Fund (DREF), Emergency Appeals (EA), National Disaster Response Teams (NDRT) or National Intervention Teams (NIT).

Methodology

A team of four independent consultants, who undertook the review, adopted a variety of data collection methods. Research was conducted primarily in English but a number of interviews were conducted in French and Spanish, as required. Key tools used in both phases of the review included:

 161 semi-structured interviews with IFRC, NS and ICRC staff as well as with representatives from other humanitarian organisations;

- 9 group discussions with NS staff/volunteers and those at training sessions;
- attendance at two operational meetings (MENA Disaster Management and Migration RTE findings), and the Disaster Management Working Group (DMWG) meeting in Luxembourg;
- establishment of an online portal/discussion group to receive inputs from NS and IFRC representatives;
- review of documentation; and
- visits to eight field locations².

Response environment

The number of recognised humanitarian crises has steadily risen in the last 50 years, with slow onset or chronic emergencies becoming a new norm, necessitating longer-term assistance. Urban areas have become increasingly disaster-prone, with overlapping hazards. In addition, many crises that the Movement and other humanitarian actors respond to today are regional in nature and characterized by large-scale and often cross-border population movements.

Today's response environment is populated with a broad range of actors, including government bodies, international and national non-governmental organisations (NGOs), the United Nations (UN), the Movement, military forces, religious institutions, individuals or groups of private citizens, private sector entities and diaspora groups. This makes the environment increasingly complex from an operational and political perspective.

A number of recent crises have been marked by poor coordination as well as competition and duplication of response effort. However, at the same time, larger humanitarian organisations are becoming more professional, as evidenced by the growing number of emergency-response policies and tools and of common standards and criteria.

State of health of the Movement's Global Response Tools

The review was primarily able to access data on FACT, ERU and D/HEOps deployments. It gathered information on the other tools, although generally not of a statistical nature.

In the last 15 years the number of FACT, ERU and D/HEOps deployments has increased twenty-fold. A third of FACT and ERU deployments for 2000–2015 were in support roles such as logistics, IT and telecommunication, base camp, communications/media, administration/finance, reporting and information management. The Movement has deployed RDRT/RIT, primarily for WASH, relief, health and logistics, to large- and small-scale disasters. Geographically, Asia Pacific has seen most ERU (42%) and FACT deployments (39%) followed by Africa (28% and 32% respectively).

The GRTs have been infrequently used in response to protracted and slow-onset crises partly as they are not adapted for such types of disaster but also linked to the scale of these crises and the difficulties in obtaining funding to respond to them.

The review was able to identify a number of strengths of the GRT including:

- the unique scale and scope of the GRT resources are considered to be an enormous asset for the Movement, particularly with the development of new tools as needs have been identified;
- the rapid response and motivation of Movement volunteers, which the GRTs have been able to complement and reinforce in a number of disasters;
- confirmation of the relevance of the tools in responding to sudden onset disasters.

In addition, some weaknesses of the tools were identified including:

- lack of inclusive strategy and vision for the GRTs across the Movement;
- under resourcing of field operational leadership;
- absence of agreed global standard operating procedures (SOPs) for the tools;
- lack of integration by affected NS in the tools system,
- siloing of competencies in the tools;
- challenges of deploying beyond sudden onset disasters.

The links between the different tools are not always clear, particularly in relation to the more specialized tools, such as the STT (in reality linked to Shelter FACT) or the HES roster. Linkages between ERUs, HEOps and FACT are however relatively strong and based on defined reporting lines.

Decision-making

The Movement's Principles and Rules (P&R) for Humanitarian Assistance clearly set out how requests for assistance (including support from the global tools) should be put forward. However, neither requesting nor deploying NS consistently follow these principles and they remain challenging to enforce.

² Budapest; Panama; Ecuador; Greece (x2); Jordan; Kuala Lumpur; Nairobi and South Sudan

The decentralization of IFRC decision-making remains to an extent in a state of flux. A proliferation of layers and structures has resulted in a lack of clarity in authority and responsibility, rendering decision-making challenging. Whether decisions on surge deployments should be taken at the country, country cluster, regional or Geneva level is not always clear or consistent. It is essential for National Societies providing and requesting the tools to have clarity about *when* certain tools should be deployed and *why* they have been selected for deployment. The IFRC has made an effort to formalise decision-making processes but there is no common agreement here. The absence of agreed trigger mechanisms as well as extension and deactivation guidance for the GRTs contributes to the lack of clarity surrounding their activation. A lack of clarity lingers between the Regions and Geneva on deployments and how/why NS are selected (or not) for deployment and this is causing some frustration among National Societies.

Gap analysis

A central part of the review process has been to provide a gap analysis of the GRTs. In November 2015 an initial GAR was produced as part of the review and this has been consolidated for the final version. This review identified technical, strategic and support system gaps. In addition, NS specifically highlighted the following:

- Preparedness and recovery as part of their response the GRTs need to factor in both pre-disaster and transition phases
- Needs assessment and evaluation it is important to strengthen these areas in order to enable the Movement to continuously analyse evidence-based response options
- Administration/finance/reporting for ERUs, other tools and NS the lack of support services within the surge system was emphasized
- Shelter expertise the focus on the Cluster coordination role for emergency shelter appears to have left less capacity available for technical advice to the NS.

The top five demands from National Societies spoken to as part of the review were:

- the need for more agile response options in terms flexibility and increased modularity
- better integration and inclusion of more NS
- improved coordination framework to clarify who does what
- deployment of personnel with local knowledge
- an improved and financed assessment/planning phase.

Required functionality of the tools

With the likelihood of an increase in humanitarian needs in complex operating environments, the Movement faces ongoing challenges in responding to crises and disaster in a timely and effective way. The Movement's surge capacity needs to be available for all emergencies, which are diverse across regions. While the primary goals of the Movement's surge system will remain to support affected populations and secondarily to support affected NS, additional objectives include to:

- assess and identify the immediate unmet humanitarian needs of affected populations;
- ensure that the right capacity is available quickly where and when needed;
- maximize the effectiveness and efficiency of the response in the early phase;
- facilitate coordination within and outside the Movement during the emergency phase;
- be accountable and responsive to affected populations during the surge phase;
- facilitate the visibility and accountability requirements (or expectations) of donors, the media and public;
- enhance the capacity and reputation, and fulfil the visibility/profile requirements of the Movement.

Tier ³	Example standards of competency	Example seniority
Tier 1	 knowledge of RC principles, national DM role local knowledge, including of NS knowledge of national disaster risk profile online IFRC training in key general skills online IFRC training in key technical skills some experience of disaster response 	Mastered skills in a specific field or fields and capable of functioning effectively as part of a RC team; Capable to manage aspects of national surge response as part of a team; Counterpart for larger or more complex response; Technical coordinator or team member

³ These will be tiers of qualification and certification, based on centralised and standardized training and performance assessment

Tier 2	 knowledge of RC DM knowledge of neighbouring NS knowledge of regional risk profiles or international disaster types online training (IFRC or other) in technical, coordination and managerial skills participation in IFRC courses (technical, coordination or specialised) experience in disaster management at national and international/regional levels good performance appraisals 	Same as above, plus the ability to effectively manage an operational RC team as part of a larger operation; Ability to support NS through a DREF or small EA where there is no other surge in country Manage aspects of larger response; Counterpart for multi-component or complex response
Tier 3	 knowledge of all Movement policies, principles, structures, and surge capacity tools knowledge of global risk profiles, disaster types participation in IFRC training at technical, coordination and leadership levels considerable experience of international disaster responses, in more than one region coordination or specialist roles at international level leadership roles at regional level 	Same as above, plus the ability to manage all aspects of a multi-sectoral, multi-stakeholder response of any magnitude; Management of complex, multi-component, large response; Management of small but complex operation when there is no other surge in country; HEOps or counterpart to HEOPs.

To ensure that the Movement's surge response tools are fit for the future, the review made key proposals, including the development of a competency-based approach rather than the current siloed one, and the development and agreement of surge triggers to support decision-making processes. These two critical proposals are outlined in the two tables below:

Proposed competency tiers for surge personnel

There is a need to finalize a disaster classification and surge trigger framework in order to ensure consistent application of clear triggers to disaster types (classified by colour). This would lead to the clear allocation of decision-making authority for the deployment of surge capacity. While the IFRC has discussed classification systems for a number of years, this has not led to any global agreement on the framework itself or the decision-making processes within it. There is an urgent need to address this major obstacle to improving the Movement's surge response capacity.

Disaster classification and surge deployment

Level	Description (to reflect in SOPs) ⁴	Classification process	Decisions on surge	Types of surge	Criteria for surge deployment
White Very small	Single incident, limited number of people affected	NS only	None	none	none
Yellow Small	Single country, small area Max 10,000 people affected May require DREF Single country Max 100,000 people affected directly or 500,000 indirectly May require DREF or EA	NS + advice from CCST Region can challenge	Region based on NS request	Single manager with DREF Technical as required – single advisors	 existence of unmet needs ability to have
Orange Medium		NS + Region Geneva can challenge	Region based on NS request or Region's analysis	Single manager or small team with DREF or EA Technical as required – advisors or small teams/units	 required effect proximity (efficiency) preference of NS
Red Large or mega	Single or multiple countries > 100,000 people	NS(s) + Region Geneva to	Region based on NS request, Region or	Management and coordination team for EA	 cultural compatibility SCT can be

⁴ In all cases, if few or no other actors are present, the level may be increased even when the numbers affected are smaller (i.e. based on analysis on unmet needs)

	directly or 500,000 indirectly affected Will require EA or EAs	ratify	Geneva analysis	Technical advisors, coordinators, teams and units as required	deployed separately by the
Blue	Triggers for key events	NS(s) +	Region or	Fully flexible according	cluster / HCT
Protracted	or spikes pre-identified	Geneva	Geneva	to need	

Recommendations

The review makes 10 recommendations in the areas below. It proposes that the allocation of responsibility for the implementation of each recommendation (for instance between the GSMT of the IFRC, sending or receiving NS, the IFRC secretariat at different levels and the ICRC) be developed as part of the Plan of Action (POA). Annex G provides draft input for the POA based on working sessions from the November 2016 meeting of the DMWG, with contribution from the October 2016 meeting of the Global Surge Working Group (GSWG).

	Thematic area	Recommendations
1	Clarification of the surge decision- making processes	 a) Finalize and agree a full set of detailed and effective global and regional SOPs for disaster response, with clear stipulation of authority and accountability. b) Apply consistent and recognised triggers, which lead to rapid classification of crises. c) Develop rationale and criteria for the deployment of surge teams and tools. d) Agree compliance tests against the P&Rs for NS involved in surge deployments.
2	Development of a competency framework	 a) Build and enforce the competency framework (tiered at the technical, managerial and leadership levels), for the training and qualification of all surge personnel. b) Confirm a comprehensive system of functions and capabilities (units, teams or individuals), which can be held accountable against agreed performance management criteria.
3	Tool development	 a) Revise the functions, composition and performance management norms for the non-technical and coordination surge team members (as separate from development of ERUs). b) Describe and develop the complete range of "emergency response services" as a standard model for specialist and bolt-on components (CTP, CEA, PSS and many others). c) Ensure that all technical functions and services are sufficiently qualified and resourced, from a range of NS. d) Replace FACT, RDRT, ERU and TL qualifications with tiers 1, 2 and 3 as appropriate. e) Standardize funding and deployment mechanisms for all surge personnel.
4	Do No Harm and Protection	 a) Enforce the code of conduct (including behaviour towards the affected population) for all surge personnel. b) Align the Movement in competencies, training and programme design for "protection-related" and prevention activities. c) Deploy appropriate expertise with the initial surge team (for example, expand the concept of the ICRC/NS RFL pool).
5	Coordination	 a) Apply adequate dedicated resource to both Movement and external coordination functions / competencies, at all tiers. b) Develop coaching, mentoring and shadowing opportunities for coordination career path development. c) Deploy appropriate dedicated expertise with the initial surge team.
6	Needs assessments	 a) Apply the latest ENA methodologies (from ENA WG) used by surge personnel. b) Deploy appropriate ENA competency with the initial surge team. c) Train first responders in basic ENA methodology, including disaggregation of risks, contexts and vulnerable groups.
7	Preparedness and training	 a) Create a surge-training unit within the IFRC (in Geneva and/or regions). b) Develop a core training curriculum (online and courses) for each function and competency. c) Reinforce and standardize a performance management system, based on appraisals, post-training, post-mission and after promotion to the next tier. d) Introduce a system of partnering / sponsoring to bring more NS into the surge responses. e) Develop methodology to incorporate response lessons into preparedness planning for cyclical and seasonal disaster risks.
8	Support services, including financial tools & IM	 a) Deploy adequate finance, administration, human resources and other support-service profiles in the initial surge teams. b) Review the DREF and EA/EPOA mechanisms in alignment with the outcome of this review. c) Develop modular options for key support services, including ITT, logistics, human resources, base camp, communications, information management, monitoring and evaluation, as required.

		d) Incorporate project GO into the thinking on information management in surge capacity.e) Provide information management analytical support to decision making as part of the initial surge team.
9	Transition planning and protracted operations	 a) Define the role of, and ensure resources for, surge capacity in transition planning and early recovery. b) Apply consistent criteria for the incorporation of transition and early recovery planning in surge capacity terms of reference. c) Develop human resource systems that can bridge the gap between surge deployment and "normal" recruitment, to facilitate transition phase HR. d) Apply recent lessons learned from protracted crises and climate-related disasters to surge capacity system. e) Pre-allocate funds specifically for response to neglected and protracted crises (similar to DREF) f) Identify triggers for the deployment (and stand-down) of surge capacity to spikes in protracted crises. g) Identify criteria, mechanisms and funding modalities for extended deployments of surge capacity in case of protracted needs.
10	Cross-cutting issues (e.g.) CEA, gender and diversity (G&D), environment	 a) Introduce training on basic CEA techniques as part of surge training courses. b) Include CEA skills in TORs and job descriptions for surge teams. c) Introduce a common CEA approach in all surge response planning and implementation, based on the IFRC/ICRC CEA guidelines. d) Introduce G&D, SGBV prevention and mitigation policies and practices into all training for surge staff e) Integrate disaggregated data for sex, disability and age into assessment and intervention data. f) Mainstream G&D, SGBV prevention and mitigation policies and practice across all surge response planning and implementation. g) A Green Response approach should be incorporated within the plan of action to accompany this review. h) Develop Green Response checklists for the SOPs/ TORs of surge tools and teams.

The diagram below provides a visual summary and links between the main findings and recommendations of this review.

GRT Strengths	GRT Weakne	esses	
 High quality resources 	- Lack of GR	T strategy and vision	
- Scale & scope	-Under resou	arcing field operations leadershi	
 Availability/predictability 	- Surge roles	not integrated	
- Technical capacity	- Absence of	SOPs	
- Volunteer response	- Integration	of affected NS	
- All Movement response	- Siloing of co	ompetencies	
- Sudden onset role	- Deploying i	n non sudden onset disasters	
- Positive impact	- Cross-cuttin	ng issues absent	
Build on strengths	Cou	nter weaknesses	
Global trends	Recommend	lations	
- Urbanisation	1. Decision	-making processes	
 Fragile economies 	2. Compete	ency framework	
- Climate change	•	elopment	
- Slow onset crises Respond to trends		on capacity	
- Chronic crises			
- Linking to resilience			
- Innovative responses		ssessments	
 Competitive/flexible funding 	7. Preparedness and training		
 Strengthened local actors 	8. Support services		
- Greater accountability	9. Transitio	n / protracted operations	
*	10. Cross-cu		
	101 01000 00	A	
Secure fund	tionality	Fill gaps	
GRT required functionality	GRT gap	S	
- Assess immediate unmet needs		n-making	
- Quick & "right" capacity	- Leaders	ship & coordination	
- Effective & efficient response	- Prepar	edness and recovery	
- Internal/external coordination	•	assessment & evaluation	
- Accountable to affected population		stration/finance/reporting	
- Visible & reputable profile		expertise capacity	
		sutting issues	
		cal and service delivery	
		t services	
		xibility & modularity	
	- Inclusio		
		ed staff local knowledge	
	Deploy	ca starr local knowledge	

1. Introduction to the review

The Global Tools system within the International Federation Secretariat and National Red Cross and Red Crescent Societies has been working for over 20 years. Over the years the system has undergone improvement, modification and expansion, according to needs and opportunities. However, its capacity–and more broadly that of the Movement–to respond effectively in all cases of disaster and crisis has come under scrutiny in some regions of the world, including among NS in Africa, the Middle East and Europe. The system was not designed for slow onset or protracted crises, nor for disasters in primarily urban and peri-urban settings, which contain many of the acute humanitarian needs today. Unless the Movement adapts to these new situations, it risks losing credibility and relevance within the emergency response sector and being bypassed by others more nimble and adaptive.⁵

Although many individual tools have undergone review and evaluation over the years, this has not been the case for the surge system as a whole for many years. In early 2013, the IFRC and a group of NS made a proposal to hold a review of the Federation's Global Response Tools. The aim was to ensure that the GRT was fit to respond to the changing nature of disasters and the needs of disaster-affected communities over the next five-ten years, and to changes within the Movement. The Federation's General Assembly endorsed the proposal in November 2013. Terms of reference for the review can be found at Annex C.

The review was divided into six distinct yet interlinked phases $(\text{phases } 0 - \text{V})^6$. Phases 0 - 1 were completed by November 2015, with the remaining phases completed by the end of November 2016.

A Steering Group comprising five NS (the American, British, Canadian, Netherlands and Norwegian Red Cross societies) oversaw the review process and had the budgetary responsibility. In addition, the IFRC Disaster and Crisis Management (DCM) Department⁷ was part of the Steering Group, along with process managers from Swedish Red Cross and Canadian Red Cross, providing further support in managing the review.

Additionally, National Societies who expressed support at the 2013 General Assembly made up a Sponsor Group for this task⁸. During 2016, terms of reference were developed for the sponsor group and a wide invitation was extended to other National Societies to join it and act as a point of reference for the work. No formal group was set up however, although it is expected that some National Societies might provide comment on the draft report.

The **first phase** of the review took into consideration perspectives from the following, using a set of questions developed for each stakeholder group:

- NS that "own" and maintain, or contribute to, the current tools;
- NS that received, or were likely to receive, global and regional response resources to assist them in their own disaster management (DM) activities;
- NS that have developed their own deployable response capacities and tools beyond the current system;
- The IFRC Secretariat (Geneva, regions, local offices);
- ICRC teams and delegations which use or deploy the Rapid Deployment Mechanism (RDM)
- External humanitarian actors from the United Nations and non-governmental organisations.
- Beneficiaries of emergency response interventions from affected communities (where possible)

The **second phase** of the research (phases II–V) took perspectives from the same group of stakeholders as phase 1, but comprised more in-depth consultation and detailed analysis. A second set of questionnaires was developed for the different stakeholder groups. This phase included interviews with actors who are external to the humanitarian sector and included perspectives from a wider range of source materials⁹. The second phase also included field visits to IFRC Regional Offices, a number of National Societies and to field locations with ongoing response operations¹⁰.

⁵ Refers to quotes from NS and IFRC interviews

⁶ See Annex C for breakdown of review phases (TOR)

⁷ later the Disaster and Crisis Directorate

⁸ Initially made up of: American Red Cross, British Red Cross, Canadian Red Cross, Colombian Red Cross, Danish Red Cross, Dominican Red Cross, Finnish Red Cross, Kenyan Red Cross, Lebanese Red Cross, Mexican Red Cross, Netherlands Red Cross, Norwegian Red Cross, Palestine Red Crescent, Swedish Red Cross, Syrian Arab Red Crescent

⁹ See Annex B for source materials

¹⁰ South Sudan, Ecuador, Greece, Jordan and IFRC Regions in Kuala Lumpur, Budapest, Panama and Nairobi

2. Background, purpose, scope and objectives

Background

The original proposal for a review of the global tools followed discussions at the global Disaster Management Working Group (DMWG) meeting in Washington DC in February 2013, which agreed on an action point to propose such a review. The DMWG meeting in Hong Kong later that year discussed draft terms of reference.

A consultant group was engaged in June 2014 to conduct the initial phase of the review. The group submitted their interim report in January 2015 and a subsequent decision was made not to offer them Phase II. A new consultant group AAKO, comprising four consultants, was engaged in September 2015 and are the authors of an interim report¹¹ and this final report.

Purpose

A variety of different IFRC GRTs have existed for well over a decade.¹² During that time most have been the subject of a review process at some point. Many reviews have been undertaken post-deployment and reflect lessons identified during deployment. Some have included a forward-looking component or suggested adjustments to keep tools relevant to a changing humanitarian environment. Reviews have adopted different methodologies, which makes it difficult to maintain consistency, draw comparisons or transfer lessons between them. Reviews have not always included a focus on the inter-dependencies between tools. Additionally, the regional component and identity of some of the tools (such as the new Regional Response Unit (RRU) as an adaptation of the Emergency Response Unit (ERU) and not a standard tool) has seen a degree of adaptation that may challenge inter-operability with non-regional tools. Linked to this is the growing number of NS that are capable of and ambitious to lead on responses in their own countries and contribute to the wider Movement response with tools and resources of their own. This review is the most ambitious attempt to date to review the GRT system holistically, with a view to helping the IFRC and NS make the tools fit for purpose for the next decade.

Objectives

The review terms of reference set out three objectives. Lines of enquiry were developed from the objectives and used to guide questionnaires developed for each stakeholder group. The objectives and lines of enquiry are summarized in the table below:

Objectives	Lines of enquiry		
 A scoping of the humanitarian environment looking forward at least 10 years (2025), identifying changes to the environment, and the resulting trends within which the global tools will operate and the needs they will seek to address. This will include natural and man-made disasters, population movements and complex emergencies in fragile States 	resource stresses, causes for population movement		

Table 1: Objectives and lines of enquiry

¹¹ <u>https://globaltoolsreview.com/2016/02/01/interim-gap-analysis-report-available/</u>

¹² The term "global tool" can refer to an NS or IFRC disaster response resource, which can be used nationally or internationally in any country (no distinction is made between "regional" and "global").

2.	A retrospective review of the global	-	contexts in which the GRTs have been utilized
	tools to date, identifying not only		contexts in which the GRTs were not requested or deployed, with
	their strengths and weaknesses		reasons
	both from the individual	-	strengths and weaknesses (holistic and strategic, not individual) of the
	technical/sectoral perspective but		GRTs
	also that of their inter-dependency	-	interlinked nature of the different GRTs and associated strengths and
	and inter-operability and the		weaknesses
	decision-making framework within	-	impact ¹³ of GRTs in selected recent deployments
	which they are deployed (or not) to	-	detailed map of required functionality of the GRTs for next decade
	give a current "state of health"	-	challenges associated with GRT deployment and utilization – past and
	picture		future
		-	strategic gap analysis
3.	Determination of the required	-	practical and political challenges relating to global tool deployment
	functionality of the global tools to	-	opportunities and challenges in terms of the future operating
	meet identified future needs.		environment
		-	opportunities and challenges in light of potential changes in the
			Movement
		-	requirements that should/will be required of the tools over the next
			decade.

The initial stage of the project (the Interim Gap Analysis Report) included some general conclusions about the impact of the global tools in their recent deployments. However, detailed analysis of effectiveness, efficiency and value for money depended on the availability of comparable financial and performance data, which has not been easy to access. While strong on effectiveness and efficiency, the resulting analysis cannot be categorical about the relative economy between using the GRTs, and situations where they don't exist. When deployed, GRTs deliver value for money in that they provide good service, and can serve as fundraising tools for the National Society that owns them (so return on investment can be excellent). However, it has not been possible to determine whether GRTs are good value for money compared to a different type of intervention.

Scope

The "GRT system" is used here as a term to describe the Movement's globally established surge capacity tools, as well as the decision-making system around them: the NS and IFRC are key players and processes at national, regional and Geneva levels. Where possible, findings and conclusions are attributed to individual tools, but many comments are aimed at the system as a whole.

The review focused on the following global tools, with greatest emphasis on the first four listed below:

- Emergency Response Units (ERU)
- Field Assessment and Coordination Teams (FACT)
- Regional Disaster Response Teams (RDRT) or Regional Intervention Teams (RIT)
- Head of Emergency Operations (HEOps) and Developing (D-HEOps)
- Household Economic Security roster (HES)
- Shelter Technical (STT) and Shelter (cluster) Coordination (SCT) Teams
- Cash Transfer Programming (CTP) roster
- Federation Early Recovery Surge Team (FERST)
- ICRC Rapid Deployment Mechanism (RDM)

The review had no mandate to consider: the Disaster Management Information System; Surge Information Management System (SIMS); the Disaster Relief Emergency Fund (DREF); Emergency Appeals (EA); National Disaster Response Teams (NDRT); or National Intervention Teams (NIT). Nevertheless, reference was inevitably made to some of these, and indeed financial and information management mechanisms proved to be of critical importance for the future of the GRTs.

¹³ The ability to measure impact depended on the availability and quality of information such as evaluation reports and other analytical documents.

Respondents to the review made it clear that the information management tools (DMIS, SIMS) and the funding mechanisms (DREF, EA) are key aspects of the Movement's surge capacity and should be referred to in the outcomes of this study. The DREF has been reviewed and the EA is due for review in 2017. The information management systems are now subject to a comprehensive review ("Project GO"), which is at too early a stage for outcomes to be available.

3. Review methodology

The review adopted a variety of methods, with a methodological approach outlined in its Inception Report and approved by the review Steering Group.

The four independent consultants possessed sound understanding of humanitarian operating environments, the Movement, and surge response mechanisms. They carried out research primarily in English but conducted a number of interviews in French and Spanish, as required¹⁴.

Key tools used in both research phases of the review are described in the following table.

Tools	Description	Stakeholder groups	No planned	No completed
Semi-structured interviews ¹⁵	The review team conducted semi- structured interviews by telephone or in person. The interviews comprised a series of questions from the interview guide. Each interview lasted 40–60 minutes in the first phase and 60–90 minutes for the second phase.	IFRC Secretariat in Geneva, regions and countries NS staff "emerging" NS staff NS staff ICRC, donor reps	Phase I 24 – 30 Phase II 180	Phase I 40 Phase II 121 TOTAL 161
Field visits	The team carried out visits to field operations where one or more of the global tools had been or were still deployed. It conducted face- to-face interviews with global tools staff and Federation and NS staff and other stakeholders involved in the response.	IFRC regions, CCSTs and delegations Receiving NS Sending NS	5 regions + 5 operations	4 + 4 Ecuador, Greece, Jordan and South Sudan; Africa, Asia Pacific, Americas and Europe regions
Group discussions	The review team conducted discussions with small groups of NS staff / volunteers. The interviews were based on the same questionnaires as the individual interviews.	FACT, ERU and RDRT Team Leader trainees and delegates		9
Attendance at meetings		NS staff IFRC Secretariat staff	2	MENA disaster management meeting – Mar 16 Migration RTE findings meeting– Jul 16
Establishment of a GTR portal/ on-line discussion group	An on-line portal or discussion group was established, highlighting four key questions. www.globaltoolsreview.com	NS staff or representatives IFRC Secretariat staff	1 42 comments received	1 8 comments received
Documentation review ¹⁶	The team reviewed a broad range of ongoing crises to provide backgro			eal-time evaluations

¹⁴ A fifth consultant, Patricia Goldschmid, assisted the review team with the interviews in Spanish.

¹⁵ A list of those consulted can be found at Annex A.

¹⁶ A list of key documents reviewed can be found at Annex B

Stakeholder interviews

During both research phases of the review, the team used questionnaires to conduct detailed interviews against the checklist of key issues. One-to-one stakeholder interviews allowed for an open line of questioning and questionnaires were designed to ensure flexibility in order to respond to the different stakeholder groups. Questions were semistructured allowing for a deeper exploration into the complexity of some topics.

One-to-one discussions reached respondents across the globe and from different operating environments. Most interviews were carried out by Skype although a number, where possible, were undertaken face to face.

Table 3: Interviews

Region / stakeholder	Planned interviews	Completed interviews
African NS	33	27
Asia Pacific NS	28	14
Americas NS	24	24
European NS	29	24
Middle East and North Africa (MENA) NS	18	11
IFRC Geneva & regions	53	43
IFRC HEOps	2	2
ICRC Geneva/field	6	8
FACT, ERU & RDRT Team Leaders	-	1 (group) 5 individuals
Others OCHA/UNDAC, NGOs, donor representatives	-	3
TOTAL	193	161

More than 180 interview requests yielded a total of 161 interviews. Respondents, representing NS and the IFRC in all five regions, Geneva HQs, GRT delegates, included both sending and receiving NS as well as the ICRC, the United Nations and NGOs. In total, staff members or leaders of 59 NS were interviewed during phases of the review (some were interviewed for both phases and counted in each phase, or more than one person was interviewed in one interview and it was counted as one).

4. Overview of the current humanitarian response environment

The following is a summary of the current humanitarian response environment, with a full overview and analysis available in the Initial Gap Analysis Report (GAR), which can be found at: https://globaltoolsreview.files.wordpress.com/2016/02/gtr-interim_final_report.pdf)

The current humanitarian response environment is shaped by a number of natural and man-made factors. The number of crises and disasters has steadily increased in the past 50 years. Despite a recent downturn in the numbers of individual crisis events, it is the complexity and duration of crises that marks the landscape.¹⁷ In 2014, the United Nations declared four Level 3 emergencies, more than ever before (in September 2016, there were three ongoing declared Level 3 emergencies; Iraq, Syria and Yemen). In the same vein, both UN and IFRC emergency appeals now tend to last longer (on average over 2 years).

The number of deaths from disasters and conflicts has decreased but the number of people affected continues to grow. In 2016, nearly 60 million people have been forcibly displaced worldwide, while 80 million are in need of humanitarian assistance¹⁸. These numbers are likely to increase.¹⁹ At the same time, the expectations of assistance are growing as people have access to more and better information.

Slow onset, chronic emergencies have become the new norm, necessitating longer-term assistance²⁰. In the past 50 years, the number of natural disasters has incrementally risen five-fold. Asia is the hardest-hit region, accounting for

¹⁷ International Disaster Database <u>http://www.emdat.be/</u>

¹⁸ OCHA (2015), *Global Humanitarian Overview*: <u>http://reliefweb.int/sites/reliefweb.int/files/resources/GHO-FINAL-web.pdf</u>

¹⁹ Red Cross Red Crescent Climate Centre forecast <u>http://www.climatecentre.org/news/651/global-seasonal-forecast-nov-2015-jan-2016</u>

²⁰ ALNAP (2015), the State of the Humanitarian System.

70 – 80% of all disaster victims annually. Disasters tend to affect mostly low- and middle-income countries. Crises are increasingly interconnected.

Some of the most densely populated areas have seen rapid unplanned urban growth. These are also the most disaster-prone zones, where hazards overlap and increasingly occur²¹.

Many crises have become more regional in nature. Examples include: the Syria regional crisis, which has expanded across Europe with the spread of refugees; the Nigeria regional conflict; the *El Niño* climate cycle which affects Africa, Asia and the Americas, as well as food insecurity and conflict in the Sahel. A common feature of regional crises is significant population movement, which is often cross-border. Regional crises threaten to destabilize entire regions, thereby presenting even greater challenges for humanitarian agencies.

5. Overview of current state of humanitarian surge

The following is a summary of the main trends identified in humanitarian surge. A more detailed overview can be found in the Gap Analysis Report <u>https://globaltoolsreview.files.wordpress.com/2016/02/gtr-interim_final_report.pdf</u>)

A broad range of actors support humanitarian response today, including government entities, international and national NGOs, UN agencies, the Movement, military forces, religious institutions, individuals or groups of private citizens, private-sector entities and diaspora groups, in addition to the use of remittances and home-grown initiatives, creating more competition between responders.

Technology advancements make it easier for individuals who want to take action to help those they see suffering– especially when humanitarian needs are apparent in easily accessed locations. Crowd-sourcing funds, and organizing over social media, make it possible to take this type of action quickly and cost-effectively.

Recent crises have been marked by poor coordination among responders, including host governments, UN agencies, donors and NGOs, and by competition or duplication in emergency response. While recent UN reforms have helped improve collaboration among agencies and INGOs, as well as internal coordination, the rapidly changing environment, politicization of aid and the arrival of new actors with sometimes competing agendas continue to pose a challenge to existing mechanisms.

Crises of lesser public interest or those plagued by security constraints, such as those in the Central African Republic, South Sudan or Yemen, attract far fewer responders.²² Many smaller humanitarian actors are unable to work in these complex crises for lack of critical mass, experience or independent funding sources.

Disparities in funding are apparent as larger organisations focus on working with national and grassroots partners, often local NGOs and National Societies. In most instances, the national partner receives little or no capacity building or investment and often can barely cover even basic operating costs. But local actors play a key role in the first and final stages of delivery, and feedback from communities indicate that local partners are best placed to understand and respond to their needs.

National Disaster Management Authorities have increasingly invested in disaster risk reduction (DRR), preparedness and response and are able to lead their own response to small to medium-scale disasters without international support.

Responders are becoming more efficient, effective and accountable. Large humanitarian organisations have had to become more professional, as evidenced by the increase in emergency response policies and tools as well as in common standards and criteria.

Response activities have grown from the traditional food, medical and relief assistance in kind. Innovative uses of cash and vouchers rather than relief materials are becoming the approach of choice, and may be the norm within a few years.

Discrepancies are evident between the stated needs and the funding provided by type or sector. This is due not only to donor priorities but a lack of operational definitions and approaches between organisations. A recent development has been the pre-positioning of funds for emergency response. New financial initiatives are emerging to

²¹ Dilley, M. (2005). *Natural disaster hotspots: a global risk analysis* (Vol. 5). World Bank Publications.

²² Healy, S, Tiller, S. (July 2014), Where is everyone? Responding to emergencies in the most difficult places, MSF; Austin, L. & O'Neil, G. (August 2015), Baseline Report, Transforming Surge Project, Start Network.

respond more efficiently at local level. OCHA's pooled funds have proved to be a rapid and flexible source of funding at the country level, as has the DREF for NS.

Surge tools have been developed and refined by organisations in the past ten years, coupled with an increased focus on organisation-wide response policies. At the same time, national governments of affected countries have further developed their own strategies, plans and tools for disaster response²³.

6. Analysis of the future humanitarian response environment

Overall trends

The world will continue to experience large complex crises but *"the occurrence of humanitarian emergencies can't be reliably predicted, and will always be 'spiky"*²⁴. Pressures on organisations responding to crises are likely to intensify and will be shaped by environmental factors but also by the changing humanitarian response environment and actors.

Urbanization and urban violence will continue to pose threats, with an increasing global population and 4 billion people expected to live in cities by 2030 and with 50% of these in high-risk informal settlements. In 2009, the world population transitioned from a rural to an urban majority, bringing with it the benefits as well as the challenges of urbanization.

Large-scale displacement is likely to remain a feature of the response environment. Nearly 60 million people were forcibly displaced worldwide in 2015, while 80 million were in need of humanitarian assistance²⁵.

Fragile economic conditions will continue to have an impact, with financial systems becoming increasingly interdependent. This is likely to cause political instability, migration, falling/rising living standards, greater inequality and changes in economic power bases.

Climate change and extreme weather will increase the number and intensity of storms, floods, typhoons and droughts. Population movements of climate-change refugees will compound other factors, such as urbanization and worsening economic conditions.

Populations in fragile or conflict-affected States will suffer the affects of multiple man-made and natural crises with long-term consequences, such as massive population movements, disease outbreaks and insecurities associated with development. Scarcity of water, food and energy resources will fuel and provoke conflict.

Technological disasters are an increased risk due to growing urban populations that are vulnerable to secondary effects, and overlaps with other disasters as well as the impact of the event itself.²⁶

Conflict zones will be influenced by the proliferation of transnational armed and "terrorist" groups and easy access to weapons. Civilians will continue to suffer when international humanitarian law is violated. Access to those affected will be constrained.

Disease epidemics will occur due to increased mobility and urbanization that provide opportunities for them to spread rapidly, whether these be new diseases, strains, existing ones (tuberculosis, pneumonia) or "dormant" ones (leprosy, polio, the bubonic plague). Antimicrobial resistance will add to known, emerging and unknown global health challenges.

Changing humanitarian response. The changing nature of humanitarian crises will dictate the need for an adapted response. The Movement is not alone in recognising the opportunity to review and analyse current practices and implement necessary change in order to deliver a more efficient and effective response, fit for purpose for the 21st century.

Actors responding to crises will continue to evolve. National governments of emerging economies will be step up their presence in crises either by funding their own NGOs to be present or through bilateral funding to disaster-affected governments.

National governments will be more present in leading humanitarian response. The 2016 World Humanitarian Summit (WHS) promoted national and local leadership, which will require current players to share space with national governments and local actors. As a result, national governments are likely to gain the support of their allies in

²³ Austin, L. & O'Neil, G. (August 2015). *Op. Cit.;* IFRC. (2015), *Op. Cit.;* ALNAP. (2015), *Ibid*.

²⁴ ALNAP. (2015), *Op Cit.*, p. 34.

²⁵ OCHA (2015) Global Humanitarian Overview

²⁶ IFRC World Disaster Reports 2012, 2014

increasing the role of the military and civil defence (for instance civil protection in the European Union). Continuing reinforcement will ensure that regional organisations remain capable of responding to small- to medium-scale disasters without international assistance.

Non-State armed actors of varying degrees of political maturity and legitimacy, and their role in obstructing or facilitating humanitarian action will remain a standing presence in many natural disasters and armed-conflict situations.

The role of local actors will grow in importance even if they do not receive the necessary resources and support in situations where insecurity may necessitate that they are the only option for direct intervention. In middle-income economies they will serve as partners to strengthen national governments. Diaspora remittances will remain an important coping mechanism. The further spread of telecommunication systems will provide quick and inexpensive communications and access to information. Cheap and accessible mobile phone services will facilitate beneficiary feedback, registration, distribution of assistance and monitoring.

Greater accountability will be required of humanitarian organisations to affected populations and governments, donors, peers and supporters. The WHS placed strong emphasis on accountability.

Funding will become more competitive and possibly more flexible. There is a need for predictable funding to support emergency response and dedicated funds to ensure rapid reactions. The funding pool will become more nuanced as new funders enter the market, altering the nature of humanitarian assistance. Donors will want more feedback on how their donations achieve results. More flexible funding pools from traditional donors could emerge. Limitations will linger however, given fears of money laundering, corruption or inadvertent funding of proscribed organisations.²⁷

Linking resilience, poverty and inequality will become prominent as chronic emergencies push the humanitarian system to reach beyond its mandate. Responding to the underlying causes of crises will become key. Humanitarian organisations will find themselves filling the gap as development actors favour State building over projects that develop local resilience and capacity²⁸.

Humanitarian agencies will seek innovative approaches for responses. Cash/voucher programming, digital mapping and crowd sourcing for needs analysis, and the use of drones to support assessments as well as aid delivery will increase. Funding is and will be available for humanitarian innovation and agencies have established new units, initiatives and innovation labs to develop and foster new ideas and approaches²⁹.

Some shaping of the international system in response to the changing environment is already in evidence.

World Humanitarian Summit

The first-ever WHS took place in Istanbul in May 2016 and was a call to action by the UN Secretary-General to reduce human loss and suffering from crises. The summit declared that the challenges and demands of the 21st century are global issues that require global solutions. The WHS set an agenda for change to make humanitarian action fit for the great challenges we face now and in the future.

One key agenda item of the WHS was the "Grand Bargain", a new way to deliver humanitarian financing. Donors and aid agencies agreed that the current financing system could not cope with today's increasingly frequent and severe global crises. Donors at the WHS committed to provide more, longer-term funding and less earmarking in exchange for greater efficiency and transparency from aid agencies in the way they spend the funds. The provision of unearmarked funds and fewer restrictions should allow humanitarian agencies to work better in 'forgotten crises' and deliver better responses to needs on the ground by channelling funds to local organisations.

The deal includes a commitment to deliver at least 25% of humanitarian funding to local and national responders, who currently receive only around 1% despite being the best placed to act and taking the greatest risks. Another aspect of the Grand Bargain entails massively scaling up cash-based humanitarian assistance, which has proved to be more efficient, empowering and effective at meeting needs. Currently, only 6% of all humanitarian aid is provided through cash.

It remains to be seen how well donors and humanitarian providers will live up to the responsibilities required by both sides of the Grand Bargain.

²⁷ Gingerich, T. R., & Cohen, M. J. (July 2015), *Op. Cit.*

²⁸ Ibid.

²⁹ Betts, A. & Bloom, L. (November 2014), *Humanitarian Innovation: The State of the Art*. OCHA Policy and Studies Series, 009. The Humanitarian Innovation Fund has provided some GBP 1,800,000 to over 50 innovation projects to date: <u>http://www.elrha.org/hif/home/</u>

UNDAC review³⁰

In order to create greater efficiency in responding to needs in the changing humanitarian environment, OCHA's United Nations Disaster Assessment and Coordination (UNDAC) system, has recently undergone evaluation. Recommendations for changes in the way UNDAC operates take into account the same factors of the changing humanitarian environment as outlined in this report. A key finding of the report was that, 'the UNDAC concept is sound, has utility in serving both disaster management and international humanitarian systems, but suffers from poor knowledge and understanding of its role, including mixed perceptions of its usefulness and performance". The final report states: 'While the UNDAC concept remains valid and bridges a critical gap between disaster management and humanitarian response coordination, *it is largely the processes through which the UNDAC system is delivered which require improvement'*.

Thus, it may not be necessary to modify radically the concept of how current humanitarian response is delivered to make it fit for purpose for future challenges; but there is a need to change the internal processes that drive and deliver the response in order to make it fully efficient and effective.

START Network

The innovative multi-donor fund to NGOs – the START network– was set up in the UK in 2014. The aim was to ensure an available pot of predictable start-up funding exclusively for leading INGOs to respond immediately at the onset of a crisis. This would prevent having to seek donor funding hastily in the face of a sudden onset emergency, when priorities, needs and numbers are unclear and before accurate assessments can be done. Currently 39 INGOs across 14 countries are in the partnership, which requires pre-approval for membership. Governed by INGOs, the network enables members to make collective decisions on the basis of need alone and respond quickly to 'under-the-radar' emergencies around the world. Donors include the UK Department for International Development (DFID), Irish Aid and the Netherlands Government. In just over two years the START network has responded to 100 emergencies, demonstrating efficiencies of time and scale that could not have been achieved through previous government funding disbursal systems.

7. State of health of the RC/RC Global Response Tools

This section provides an assessment of the overall state of health of the eight main GRTs considered by this review³¹, describing their deployments, main strengths, weaknesses and linkages.

Contexts in which GRTs³² have been utilized

In describing the contexts where the GRT have been utilized, the information concentrates on the four tools where statistical data were available on their deployments: FACT, ERU, RDRT/RIT and HEOps/D-HEOps³³. For other tools, few compiled statistics were found, or if available, they were not significant (for example, the STT has been deployed officially only twice).

The number of deployments of the GRTs has increased twenty-fold over the past 15 years: moving from six deployments in 2000 (5 FACT members and 1 ERU) to 198 deployments in 2015 (104 RDRT/RIT, 76 FACT members, 16 ERU and 2 D/HEOps). Major deployments responded to large-scale disasters as illustrated in figure 1. RDRT/RIT have been deployed for all levels of disasters (small to large), for example 56 RDRT/RIT were deployed for the 2015 Nepal earthquake and at least 30 for the 2016 Ecuador earthquake. At the same time, in the Americas, each Disaster Relief Emergency Fund (DREF), used for rapid financial support to National Societies, was accompanied by an RDRT/RIT (similar practices have recently been adopted in Africa and Asia Pacific).

The cost of GRT **deployments** varies enormously, making it hard to establish objective cost per beneficiary (one measure of value for money). The cost of deploying an RDRT/RIT varies from CHF 1,000 – 12,000 per month, with an average of CHF 6,000 per person; FACT deployments average about CHF 15,000 per person; additionally it costs about CHF 3,500 to train each FACT delegate, and at least CHF 2,000 for each ERU or RDRT person. The HEOps programme requires some CHF 800,000 per year to employ, train, equip and deploy the three specialists; the sending National Society usually covers the D-HEOps deployment costs (about the same per month as for FACT).

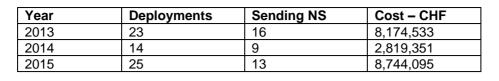
³⁰ http://www.urd.org/IMG/pdf/UNDAC_REVIEW_REPORT.pdf

³¹ Excluding the ICRC RDM

³² All references to GRT include both "global" and "regional" tools as appropriate.

³³ Unless specified, the unit of measurement in the graphs is the following: FACT – 1 unit= 1 individual (regardless of rotation); RDRT/RIT – 1 unit = 1 individual; ERU – 1 Unit = 1 deployment of an ERU (if ERU shared by different NS only counted once); D / HEOps: 1 unit=1 individual.

The sending NS usually covers ERU costs, which vary from a few thousand Swiss francs for individuals to two or three million for a full hospital deployment. Multi-lateral ERU deployments over the last three years are summarized below:



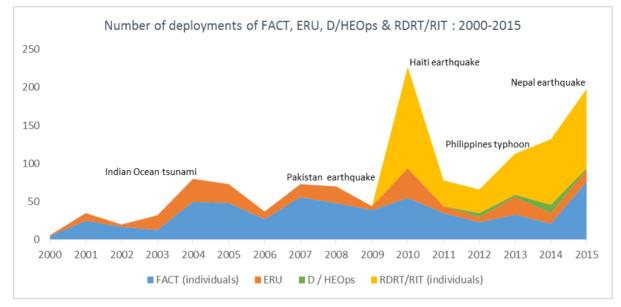


Figure 1: Number of deployments of FACT, ERU, D/HEOps & RDRT/RIT: 2000-2015³⁴

In terms of **type of disaster**, over the past 15 years, the main events to which FACT and ERU responded were earthquakes, floods and meteorological events, such as cyclones hurricanes and storms, as seen in figure 2.

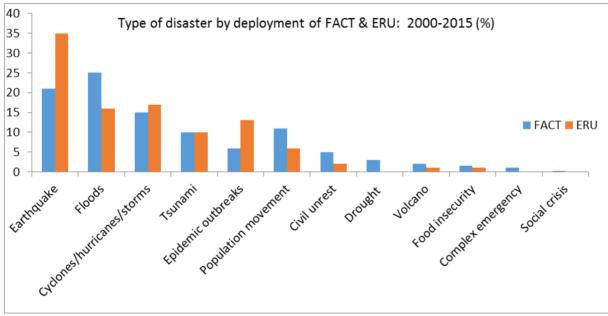


Figure 2 : Type of disaster by deployment of FACT & ERU: 2000-2015

³⁴ Graph displays only 2010-2015 RDRT/RIT deployments (based on available data).

In the past four years, since the HEOps (and then D-HEOps) initiatives became active, the profile of major crises has varied slightly from previous norms; in this period, epidemic outbreaks (cholera and Ebola in Africa) and population movements (mainly the Syria crisis, migration to European and Tanzania) have been dominant, as shown in figure 3.

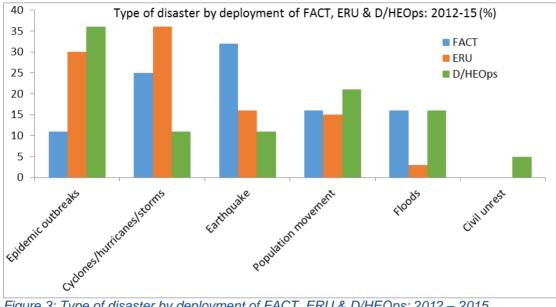


Figure 3: Type of disaster by deployment of FACT, ERU & D/HEOps: 2012 – 2015

By sector, an analysis of FACT and ERU deployments for 2000 - 2015 indicates that about a third of deployments were in support roles, such as logistics, IT and telecommunication, base camp, communications/media, administration/finance, reporting and information management as seen in figure 4. Based on the information collected, RDRT/RIT tended to deploy mainly in water, sanitation and hygiene (WASH), relief³⁵, health and logistics. For example, for the Nepal earthquake, some 30% of RDRT deployed were relief, 20% were WASH and 16% were logistics. In Africa, out of 85 deployments reported from 2012 - 2015, 36% were for WASH, 27% for health, 15% for general disaster management, 11% for logistics and 9% for shelter³⁶. In the Americas, for 2015, 33% of RIT deployed were general (coordination/support roles), 20% for livelihoods, 14% for logistics, 13% for WASH, 7% for health, 7% for information management/relief and 7% for finance. Of note, a sectoral analysis would consider D/HEOps deployments as being 100% coordination.

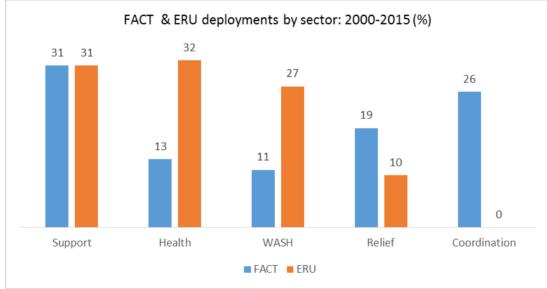


Figure 4: FACT & ERU deployments by sector 2000 - 2015

³⁵ Relief sector includes staff deployed in livelihoods, shelter, early recovery and relief roles.

³⁶ Higgins, N. (August 2015). Review of RDRT and NDRT/BDRT system in East Africa and Indian Ocean Islands, IFRC.

In terms of geographical distribution, Asia Pacific was the region that saw the most deployments of ERU (42%) and FACT (39%), followed by Africa (28% and 32% respectively) for 2000 – 2015. For the period 2012 – 2015, D/HEOps were mainly deployed to Africa (48%) and the Middle East and North Africa (MENA) (24%) and Asia Pacific (19%). RDRT/RIT were mainly active in the regions of Africa (32%), Asia Pacific (26%) and the Americas (38%) (Europe and MENA had underdeveloped RDRT/RIT).

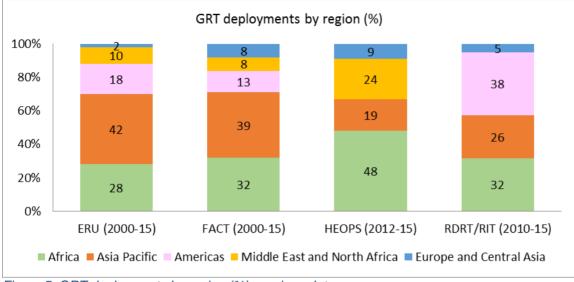


Figure 5: GRT deployments by region (%) - various dates

Contexts in which the GRTs have not been utilized

As detailed in the interim GAR for this review, meteorological disasters (including floods) make up 70% of current disasters, with a trend towards protracted and slow-onset crises. In this regard, the GRTs have been well placed to respond to meteorological disasters as described above.

Use of the GRTs in response to protracted and slow-onset crises has been less pronounced. This review found that few deployments were made for slow-onset crises, such as drought or food insecurity, as illustrated in figure 2. This may be due to a number of factors, notably: the lack of media profile and of available funding (e.g. needs are less visible in the early stages); the GRTs were not adapted to respond to such types of disaster, for example because of less well defined triggers, and the need for longer deployment periods. The review team saw examples of RDRT/RIT deployed to respond to slow-onset crises, such as droughts in the Americas. The level of needs, and numbers of people affected, can equal or surpass those relating to sudden-onset events. (For example, over 20 million people in Africa are estimated to have endured severe food insecurity from *El Niño*-related phenomena in 2015-16.)

There has also been limited use of GRTs in protracted crises. For example, very few GRTs have been mobilised for population movements linked to the Syria conflict in neighbouring countries, which is one of the greatest crises in recent years³⁷. The use of GRTs in crises that are becoming protracted, such as the migration crisis in Greece, has brought to light issues about their suitability for such crises. An example is the amount of time needed to deploy health ERUs and meet the health needs of the migrants (as detailed further below).

Strengths of GRT

The interim GAR identified strengths of the four key GRTs³⁸. These strengths were confirmed in phase II and are summarized and built upon as follows:

Strengths identified by the interim GAR: the availability of high quality resources that the GRTs bring to emergency response; their availability and predictability; the technical capacity they bring to the response and to affected NS; their ability to involve all three components of the Movement.

In phase II, these strengths were confirmed across the GRTs, with additional aspects highlighted:

³⁷ Based on available data, the following GRT were deployed between 2012-15 for the Syria crisis: a FACT team of 7-10 persons (Iraq-2014), 4 HEOPs deployments in Lebanon/Jordan and one ERU (field hospital) (Jordan-2013).

³⁸ FACT, ERU, RDRT, HEOps/D-HEOps

- The GRT resources are considered a huge asset for the Movement by the majority of respondents interviewed from NS, unique in its scale and scope across the humanitarian sector. While GRTs are criticized for having developed organically, this has led to the creation of different tools as needs were identified, including for cash, recovery and shelter.
- The motivated and quick response of RC/RC volunteers was a strength highlighted. In responding to disasters, the Movement has managed to act quickly largely owing to the consistently timely actions of NS volunteers, from Typhoon Haiyan (Philippines) to Nepal and Ecuador³⁹. The GRTs have been able to complement and reinforce this initial response. As detailed below, the review team noted weaknesses where a response did not integrate the NS and local first responders.
- The timely and constructive relationship with the ICRC in major disasters was confirmed, as reported in three major recent disasters and observed by the review team in the 2016 Ecuador earthquake response⁴⁰.
- The relevance of the GRTs, particularly to respond to sudden onset disasters, as shown in the above analysis of deployments, was confirmed. The Movement appeared largely able to respond well to disasters of this nature. The changing nature of disasters and the increased ability of many National Societies and their governments to respond to disasters means that this relevance will be constantly challenged in the coming years.
- Some examples of impact of the GRTs. Considering impact as "the positive and negative changes from an intervention"⁴¹, the team saw examples of the GRTs' positive contribution to the situation of affected populations. In Ecuador, an affected coastal community explained to the review team how the Movement had supported it with search and rescue, shelter, food and non-food items. Led by the Ecuadorian Red Cross, the response relied on the support of the GRTs, such as RDRT/RIT, HEOps and a RRU, in addition to bilateral NS support (for instance, for search and rescue). In South Sudan, a water ERU helped to contain an outbreak of cholera, and the NS themselves used the same equipment a year later, illustrating that GRTs could provide capacity building and include elements of sustainability. In Greece, medical ERUs ensure the delivery of basic health care for several thousand migrants. As these examples show, it is usually easy to show "tactical" impact of an individual team or tool, but much harder to give an overall impression of what added value was created (this would require a more in-depth impact study). Also, these examples are not to deny that GRTs can have a neutral or negative impact in some cases. For example, the ERU health deployment in Jordan in 2013 reportedly had a negligible impact largely due to its tardy arrival, and yet resulted in the NS feeling excluded from decision-making.

Weaknesses of GRT

As for strengths, the interim GAR identified weaknesses of the four key GRTs. Phase II confirmed the weaknesses, summarized and built upon as follows:

Weaknesses identified by the interim GAR: the lack of inclusive strategy and vision for the GRTs; under-resourced field operational leadership; absence of global SOPs and unclear decision-making linked to structural issues; organic development of the GRTs; the dominance of the sending NS and the side-lining of affected National Societies; reliance on volunteers for deployments; the short rotation periods of GRT staff; lack of awareness on the GRTs; challenges in adapting the GRTs to all contexts; the absence of a performance framework and accountability for the GRTs; and challenges to keep up with technological and methodological advances in surge.

Phase II confirmed the weaknesses across the GRTs, with additional issues highlighted:

 Failure to integrate the affected NS in the GRTs was the most common weakness raised by National Societies. This weakness mainly concerned the FACT and ERUs. The RDRT/RIT, which in most cases were individuals from other NS or IFRC offices of the same region did not suffer from a lack of integration. On the contrary, those NS who received RDRT/RIT were generally very positive about their integration and work. National Societies who had hosted a HEOps/D-HEOps were also positive in the role they played as it reinforced them in a key competency for which they needed support – operational leadership for a major disaster.

 ³⁹ Review team visit to Ecuador and see Velkoska, V. April 2016, Review of Real Time Evaluation Reports, IFRC Kuala Lumpur.
 ⁴⁰ Typhoon Haiyan (Philippines), Nepal Earthquake, Tropical Cyclone Pam (Vanuatu) as detailed in Velkoska, V. April 2016, Op. Cit.

⁴¹ "Impact examines the positive and negative changes from an intervention, directly or indirectly, intended or unintended...the longer-term and wider-reaching consequences of achieving or not achieving intended objectives." source: IFRC (2011), IFRC Framework for Evaluation. Planning and Evaluation Department.

- Lack of inclusivity has led to a growing sense of division among National Societies; Phase II confirmed this trend. Some NS are reluctant to accept the GRTs, which are so dominated by a handful of sending NS (mainly from the "global north"), and resist deployments. Others have taken steps to develop their own capacities outside the "official" GRT system, which may deploy in an uncoordinated or even unsolicited way.
- The siloing of competencies in tools was a weakness mentioned in the interim GAR, and its significance was reinforced in phase II. The "ring-fencing" of people to specific tools has had a number of consequences, including: difficulties accessing individuals with appropriate qualifications for a deployment due to lack of a common database of available persons; the chance of deployment was linked to whichever GRT a person associated with, rather than their skills for example, anecdotal evidence indicates that a person from the FACT roster was more likely to be deployed than a RDRT/RIT.
- Inconsistencies in the development of the GRTs has resulted in the varied development of tools across the regions (such as RDRT/ RIT) and significant effort put into developing the GRTs only to see them underused owing to lack of awareness, systematic integration in decision-making and no "triggers" for their deployment (including STT and FERST).
- The challenges in deploying GRTs to crises other than sudden onset were reinforced in phase II. The use of the ERUs in Greece illustrated the difficulties of adapting to prolonged crises, as described above, and of the short rotation periods for FACT and other staff for the Nepal earthquake and Cyclone Pam (Vanuatu).
- The organic growth of GRTs has led to ad-hoc deployments that fall outside any of the GRTs but respond to genuine needs in crisis situations. Sometimes labelled "surge delegates" this included the following competencies: finance/administration; partnership/external relations; communications; community engagement; International Disaster Response Law (IDRL); field operations/coordination; movement coordination and human resources. The weakness identified was the failure to systematically integrate these roles into any tool or decision-making process; more so, their deployment relied on the relevant IFRC staff or units at the headquarters or zones advocating such deployments (or alternatively IFRC in-country and/or National Society requesting such support). In some cases, these surge delegates were considered as part of the FACT deployment.
- The absence of cross-cutting issues from the GRTs. Cross-cutting issues such as the environment, gender and diversity (G&D), and community engagement (as well as operational approaches on protection and "do no harm") were either absent or inconsistently applied across the GRTs. There were no common approaches seen to any of these issues across the GRTs. The draft global SOPs do not reference any cross-cutting issues nor do any of the existing SOPs (including ERU, FACT or HEOps). The significant work the IFRC and National Societies have put into developing minimum standards for gender and diversity for emergencies is yet to be integrated into the GRTs and their processes⁴². The review team saw some isolated initiatives, such as the deployment of an RDRT G&D advisor as part of the response to the Nepal earthquake, and a 2009 training course for female RDRT in South Asia.
- Lack of understanding of those deployed as part of the GRTs of the important linkages between affected National Societies and their government and local authorities had adverse effects. It resulted in GRT staff (often ERU members) ignoring local standards, approaches and agreements, thereby jeopardising the National Societies' reputation and relationships; this was cited in connection with the responses in Nepal in 2015, Jordan and Philippines in 2013 and Haiti in 2010.
- Sustainability, transition, handover, exit strategies and related issues, mostly relevant for ERUs; to what extent they have an exit strategy and capacity building approach with the NS. In some cases, for example in Greece, the review team saw no clear exit strategy or explanation on the fate of equipment from previous deployments. Other cases, such as Ecuador and South Sudan, showed evidence of positive handover and involvement of the National Societies. Other GRTs, such as the FACT, struggled to develop the capacities of affected National Societies, often because their approach involved limited integration with the affected NS, as confirmed by the interviews with NS. In general, approaches to recovery and transition were applied poorly and inconsistently across the GRTs as exemplified by the limited use of the recovery tool, FERST (detailed further below).

Strengths and weaknesses of individual GRTs

The following table provides a summary of the strengths and weaknesses of each of the GRTs. A detailed analysis per tool can be found at annex F.

⁴² See *IFRC, (2015). Minimum Standard Commitments to Gender and Diversity in Emergency Programming. Pilot version.* There has been some preparatory discussions and work for integrating the standards in health, WASH and shelter ERUs.

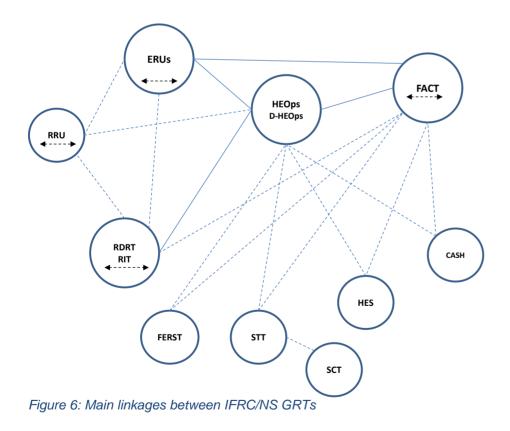
ΤοοΙ	Strengths	Weaknesses
FACT	Dedicated specialist resources to	Lack of clarity of overall role
	manage response	Weak assessment role
	Ability to mobilise and lead	Slowness to deploy
	individual sectors	Limited integration of NS or non-western team
		members
		Composition of FACT teams; who decides which roles
		and sectors to deploy, and who fills the positions
D / HEOps	Dedicated longer-term specialists	Unstable financing for positions
_	for coordination and leadership	Lack of sustainability of D-HEOps approach
	roles	
	Filling key gap in responses, at the	
	strategic level	
RDRT/RIT	Familiarity with contexts, cultures	Inconsistent approach between regions
	and languages	Siloing of profiles within regions
	Capacity building for both sending	Lack of sending NS funding for deployments
	and receiving NS	Limited profiles for some sectors (e.g. cash,
	Provide targeted support and/or	livelihoods)
	additional support for other tools	Risk of external politics preventing deployments within
EDII hackle	Deepending to a key product	a region
ERU-health	Responding to a key need in	Lack of quality assurance
	disasters	Inability to meet all health needs for disasters
	Good for the purpose for which they were created	Inability to involve health professionals in decision making
	High visibility for the Movement	Limited coordination among ERUs
ERU –	Positive integration with RDRTs	Only Logistics, telecommunications and Base Camp
support	and use of multinational teams (e.g.	ERUs available
Support	logistics)	Limited knowledge of IFRC systems among NS
		delegates
		Lack of compatibility between systems of IFRC and NS
		Some ERUs are rarely mobilised (e.g. base camp and
		IT/telecommunications)
ERU – relief	Some positive integration and	Non-standard training and variable quality among
	handover to affected NS	sending NS
	Growing capacity to implement	Inadequate integration with some National Societies'
	large-scale cash programmes	disaster management teams and volunteers (in terms
		of planning and assessment)
EDU	Some positive integration and	Look of flovibility of the CDL lo gueb as between the
ERU – WASH	Some positive integration and	Lack of flexibility of the ERUs, such as between the
WASH	handover to affected NS Good technical capacity for camp or	core functions of water supply, sanitation and community/public health
	rural situations	Incompatibility with the ICRC's engineering capability
		Incompatibility with urban environments
RRU	Proximity for deployment	RRU concept not globally accepted
	Familiarity with contexts, cultures	Limited deployments – only bilateral
	and languages	Limited distinction from ERU concept
	Involvement of some emerging NS	
FERST	Specialized guidance and expertise	Lack of systematic integration and ownership of tool
	on the recovery aspect	Limited deployments
	Diversity of approaches of the tool.	
STT	Specific support for area where NS	Inadequate awareness of tool
	know-how is limited	Limited number of official deployments
SCT	Ability to play a key support role to	SCT not directly supporting RC/RC response,
	the shelter sector	therefore not seen as key by some
	Ability to draw from across National	Funding conditional on the emergency appeal
	Societies, forming multicultural and	Short deployment periods
	inter-disciplinary teams	
HES	Availability of multi-skilled people	Increasing difficulty to get people to commit to being on
	with significant experience and	the roster
	technical know-how in household	Challenges in keeping all roster staff up-to-date with
	economic security	developments in economic security
	Ability of roster staff to respond at	

	any stage of the project cycle	
CASH	Ability to deploy register staff individually, as part of small teams or of a larger team, such as FACT A standardized level of training is required The Cash Register's capacity to support all stages of the project cycle, not just emergencies	Limited availability of requisite Cash training, particularly for those who are on NDRTs and RDRT rosters
ICRC RDM	Rapid decision-making process Internal roster of pre-qualified specialists Use of NS medical and surgical units.	Limited coordination with the affected National Societies.

Linkages: Inter-dependencies and inter-operability

As stated in the interim GAR, the GRTs have developed organically, leading to an ad hoc creation of linkages. This was often based on the identification of gaps (for instance field operational leadership gap and the creation of HEOps) and the consequent re-adjustment of the GRTs to the new tool introduced. Existing SOPs do mention linkages. For example HEOps SOPs detail relations to the FACT and ERUs, while the ERU SOPs do the same for FACT. However, there is no known or available global mapping of the links between the tools. While the draft global SOPs explain and define the links to some extent, these remain in draft.

The following chart maps the main links between the GRTs identified by this review (ICRC RDM not included). The solid line between tools indicates a strong linkage; a dotted line indicates a weak linkage. The arrows within the individual tools indicate linkages within the given tool (for example between ERUs). The roles of the respective sending NS and affected NS appear in the mapping but are both central to the functioning of the tools.



The following points are highlighted from this mapping:

Strong links: The linkages between ERUs, HEOps and FACT are relatively strong and based on defined reporting lines; the ERUs report to the FACT delegates or TL, or the HEOps; the FACT team reports to the HEOps. This is adjusted depending on whether a HEOps is in place or not. The review found that these linkages in general worked

well, although some issues were raised about the reporting lines between HEOps and FACT and with ERUs (notably when there are multiple ERUs dispersed throughout a country), as well as between different ERUs in the same location.

Weak links: The links between the more specialized tools (such as STT, and FERST) were weaker owing to their unsystematic integration into operations and the absence of triggers in place for their deployment. In general, they would report and link to the senior operational person in place (often the FACT TL or HEOps) but this was not systematically applied. The links between these tools and the ERUs were non-existent or blurred. The SCT, as a shelter cluster coordination tool, does not link directly into IFRC technical reporting lines, although it still falls under IFRC financial and human resources systems and links in for security and support services).

The RDRT/RIT often had a clear reporting line with the operations manager or HEOps (when in place) but the strength of the links to the other tools varied from context to context, depending on whether the RDRT/RIT was: working directly with the affected NS; attached to a FACT team; or, attached to an ERU. The RRU, as a relatively new concept that was deployed less often, had weaker links with the other tools.

The links with the **ICRC RDM** were variously described as strong, non-existent and contradictory. Areas of obvious strong links are the medical ERUs, where both the IFRC and the ICRC can use the same capacity. However, being centrally controlled, and mainly reliant on internal ICRC capacity, the RDM is in many ways entirely different as a mechanism. The links were even described in one instance as contradictory, with individual team leaders and managers deployed as part of an ICRC RDM having great difficulty adapting to working directly with the affected National Society, the IFRC and the local authorities.

Within the individual tools: The links between the ERUs, notably across sectors, were often criticised as being weak, even where links should be strong (for instance WASH and health). Some ERUs of the same sector did have common standards or systems, such as logistics. However others did not, such as health ERUs, a weakness that has been recognised but that is yet to be resolved. As noted above, there was no evidence of common approaches for cross-cutting issues. The links between FACT team members varied, with the main criticism being that the members tended to be "siloed" and to focus exclusively on their sectorial expertise and shy away from developing a common vision or approach for the response. The links between RDRT/RIT varied; evidently those working closely together developed strong links but lack of a global concept for RDRT/RIT restricted the forging of links between regions, as was the case for the RRU.

Overall, **inter-operability** was limited between and within the GRTs. Collaboration, at the simple level, worked to varying degrees, such as RDRTs being assigned to support an ERU or integrated within a FACT team. However, the review team saw no evidence of common systems, standards, approaches and training on inter-operability across the GRTs. This was true of training approaches and curricula for people deployed to common roster databases and reporting systems. In some cases, IFRC systems and approaches were used, for example for the FACT. However, problems subsequently arose, with the FACT members having difficulty using these unfamiliar systems (such as finance) that differed from those used in their own NS.

8. The Movement's decision-making environment

As outlined in its Strategy 2020, the IFRC has committed to ensure that surge capacity is available locally, regionally and globally in order that the Movement can respond to the increase in major disasters:

"The secretariat has a constitutional obligation "to organize, coordinate and direct international relief action" as a core service to members of the IFRC. Drawing on the complementary capacities of National Societies, we ensure that effective tools and reliable surge capacities are always available in a seamless arrangement that connects global, regional, national and local capabilities. This gives us the confidence to handle the expected worldwide increase in the number and magnitude of major disasters."⁴³

Wider decision-making environment

Decision-making for the GRTs fits into broader strategic-level IFRC decision-making processes. When these strategic-level mechanisms are themselves in flux or not functioning optimally this adversely affects surge capacity and GRT decision-making systems. Some interviewees are convinced that the absence of effective leadership or decision-making at the highest levels of National Societies and the IFRC damages the reputation of the Movement in disaster response by delaying action, or hindering access to the right capacities. This may be especially true in contexts (Africa and the Middle East were mentioned) where disasters take the form of protracted crises, making donor support for humanitarian action more challenging, or where disasters might be slow onset (such as the Sahel or Southern

⁴³ S2020, Pages 14-15; Our Disaster Management System

African food crises), and low profile. In extreme instances, interviewees mentioned the need for significant improvements, without which the Movement risked losing credibility – and even relevance – in emergency response (compared to other actors such as NGOs, the United Nations or the private sector).

The P&R⁴⁴ set out clearly how requests for assistance (including support from the GRTs) should be put forward and emphasize the importance of coordinated responses. However, according to discussions held with a number of National Society and IFRC representatives during this review, neither requesting nor deploying National Societies consistently followed the P&R. This inconsistency in abiding by formal and agreed approaches is in turn harming the global surge deployment system.

Federation decision-making issues

The interim GAR identified the need to look for ways to optimize strategic management (centralised standards, procedures, training curricula, etc.) as opposed to operational management (decentralised capacities, etc.) and how to ensure that decisions are made at the appropriate level. The interim GAR found that the IFRC structure had decentralised and was still in a state of flux, notably in some of the most vulnerable regions of the world, such as Africa. The proliferation of layers and structures has blurred the lines of authority and responsibility, rendering transparent and consistent decision-making, even in times of urgency, far more challenging.

Decision-making in relation to the GRTs is critical. The tools are central to the Movement's ability to respond rapidly to crises. As such, there is a crucial need for transparency and clarity regarding *when* to deploy certain tools and *why* the particular tools, from operational (*"when"* the tools are deployed) and internal political (*"why"* the tool/resource from a particular NS has been selected) perspectives.

There is a perceived lack of clarity around decision-making processes, as noted above. This is partly due to the current layered and decentralised structure of the IFRC. It means that it is not always clear or consistent whether decisions on surge deployments should be taken at the country, country cluster, regional or Geneva (global) level. The IFRC has endeavoured to formalise decision-making processes, for example by: developing a position paper on disaster categories and levels⁴⁵; drafting an operational response framework⁴⁶; and drawing up global SOPs for disaster response. These important documents would go a long way in helping underpin and ensure more transparent decision-making concerning the tools. However, they remain in draft and are therefore not being applied consistently, if at all.

Lack of clarity on decision-making procedures has fuelled tension and frustration among the different components of the Movement. For some National Societies this is because they feel side-lined from decisions on surge deployments to their countries and as a result (at least partially) some deployments have not succeeded politically or even operationally. For deploying NS, the frustration lies with the ambiguous nature of decision-making concerning deployment selection criteria. This particularly concerns decision-making governing the more expensive tools, such as ERUs, given the significant financial and organisational investment that NS have made into developing such tools (including the human resources that are part of the ERUs). As such, National Societies seek return on this investment. As noted in the interim GAR, sending NS ("owners") appear to be contravening the ERU SOPs by taking decisions on deployment based on their own interests or political pressures. This can lead to the "push" factors outweighing the "pull" from the NS requesting assistance, or an assessment based on needs. The sending National Societies were even said to perceive the decision-making system as discouraging observance of deployment rules and norms, because NS may be obliged to prioritise competing pressures from donors, public, partners, the media and others.

Factors affecting Federation decision-making

A number of factors contribute to the lack of clarity on deployment decision-making processes, the use of different tools and on the effectiveness of the IFRC's coordination role in this regard. The reasons for this include the following:

- There are different request and response procedures, systems and processes, depending on the tool requested or received.
- Procedures, systems and processes vary from region to region.
- Different procedures have been applied arbitrarily for different response types and environments (sudden onset; slow onset; protracted; less-visible; conflict).
- Different factors appear to trigger the deployment of the GRTs, but the triggers are not documented or fully known.

⁴⁴ Principles and rules for Red Cross and Red Crescent Humanitarian Assistance (revised 2013)

⁴⁵ Draft Position Paper – IFRC Disaster Categories and Levels (undated)

⁴⁶ *IFRC Secretariat Operational Response Framework – Roles and Responsibilities (Draft)* (May 2016)

- There are no finalized global SOPs for surge tool deployments. While SOPs exist at the regional level (for some regions), they are not necessarily consistent with the draft global SOPs for disaster response.
- Sending NS are driven to respond to some, but not all disasters. This can result in a surplus of available tools for some responses and resultant bilateral lobbying towards the receiving NS to deploy the tools.
- Sending NS are not inclined to respond to all disasters and are selective about their responses. This is often linked to the ability to have access to institutional funding, but it means that not all emergencies receive requisite support from the global surge tools.
- Receiving NS are not aware of all the GRTs available and therefore do not request them even when needed.

Some NS feel that, given the pressure on decision-making, the IFRC is handling their various wishes commendably. Others however call for increased clarity on decision-making mechanisms. Still, others believe that regardless of the systems in place they alone will make the decision to deploy or not. This latter sentiment is of great concern in terms of "working as a Movement" and abiding by the P&R. This is particularly true given that some of the emerging National Societies, who are newly developing their international response capacity, are among the largest and best resourced.

As mentioned above, the IFRC has recently taken steps to clarify the procedures to follow for requesting a tool. Although these steps have not yet been formalised they aim to specify whether decisions on deploying a surge tool are to be taken at regional or global level.

In most instances, key decisions on deployment of GRTs are made at the regional level or at Geneva level. Requests for GRTs tools that are managed at the Geneva level should come from the Region and not from the country or cluster level. Generally, the procedure for requesting support involves the National Societies and the IFRC in-country contacting the Regional Disaster Management Unit, which will then contact Geneva. Both the Americas and Asia Pacific aim to provide a "regional" response to disasters where possible, for example by mobilising RDRT/RIT, RRU and their own staff. Accordingly, the response to the 2016 earthquake in Ecuador was handled at a regional level with no requests for global support made to Geneva, with the exception of a HEOPs request and SCT deployment. It should be noted that the IFRC Secretariat felt that other GRTs could have been of use in the response, and that this approach runs the risk of hindering access to the GRTs. In addition, if in a region one NS owns a GRT that is also deployed regionally, this could lead to the region's larger National Societies always being approached first even if they are not the most appropriate technically to address identified needs.

Decision-making levels

Decisions on whether to deploy ERUs are taken at a global level although sometimes National Societies bypass the system, sending ERUs directly to the affected country (some National Societies believe that RRUs have been conceived specifically in order to bypass Geneva). Similarly, HEOps deployments are managed through Geneva. Decisions on FACT deployments are also taken at the Geneva level. However, it is unclear what criteria are used to determine the composition for each FACT deployment, in terms of size and competencies. Additionally, FACT tends to retain the initial form it had at the time of deployment despite changes in need over the first 4 weeks. The size of FACTs varies significantly, but not always logically. In 2015 80 FACT staff were deployed to eight different contexts, with numbers per deployment ranging from 3 (Tanzania – October 2015) to 42 (Nepal – April 2015). As things stand, the main GRTs (including FACT, HEOps and ERUs) are deployed at the global level, although ERUs are largely equipped, trained, and maintained by individual sending NS, and levels of decision-making can vary (FACT may be proposed by Geneva, but blocked by a region or a National Society).

Regional Disaster Management Units (or the equivalent) take full responsibility for decision-making on the deployment of RDRTs, RITs and RRUs, with Geneva rarely being informed when they are deployed. It has been difficult for this review to establish an overview of RDRT deployments owing to their decentralised nature. All regions, with the exception of MENA and Europe, currently have working RDRT rosters, which have undergone development in recent years. For example, the 2015 review of the RDRT and NDRT/BDRT System in East Africa and the Indian Ocean Islands found the following: *"Successes of the RDRT system include - establishment and roll out of centralised online database and alert system, strengthening of performance management processes and procedures such as contracts, TORs, performance appraisal and end of mission documentation."*

The current draft of the global SOPs for Disaster Response proposes the following in terms of decision-making for global surge tool deployments, once a specific disaster has been classified as Yellow, Orange or Red⁴⁷:

⁴⁷ White and Blue categorization does not yet formally exist

	Localised emergency, small number of beneficiaries	Emergency affecting wider area, higher number of beneficiaries	Emergency of scale, high number of beneficiaries
	Yellow	Orange	Red
Regional	RDRT/RIT deployment	RDRT/RIT deployment	RDRT/RIT deployment
decision			
Secretariat		FACT	FACT
decision		HEOPs	HEOps
		ERU	ERU

The NS themselves make decisions on deployments of their own resources in-country (that is NDRT or NIT).

The perceived inefficiency of the global deployment system in all instances (including for ERUs) has led to certain regions taking individual steps to reform it. As mentioned above, the Americas region has begun to develop RRUs as an alternative to ERUs (although in reality they are effectively the same thing). Also in the Americas, and sometimes in the Asia Pacific and Africa regions, whenever there is a DREF or an emergency appeal, RDRTs are used as support personnel to assist the affected NS with financial management, reporting and monitoring and evaluation (M&E) functions. While the deployment of RRUs can be beneficial owing to proximity to the context, one of the challenges is that they are not funded and costs for their deployment need to come from an emergency appeal (or to be fully or partially funded by the sending NS, which is the case for the Canadian health RRU). Additionally, as they are not "managed" by Geneva, there are concerns that RRUs will not necessarily comply with ERU quality standards, which could tarnish the Movement's reputation.

A number of NS and some IFRC staff consider as important a move towards greater decision-making power at the regional level. This is because the decision-makers in Geneva lack local-level knowledge (for example, about the local community to be supported) and this is an issue of concern. Some NS also reported that decisions on deployment taken by Geneva were often too slow; having a FACT team arrive a week after a request is made is untimely in an emergency. Other NS however felt that the system acted in a timely manner or attributed the delay to the speed with which the affected National Society made the necessary request.

This review found support for a more layered approach to decision-making (depending on the type and severity of the event), particularly from requesting National Societies and IFRC Regional offices. For some Regions the current setup is overly bureaucratic. Country offices and country-cluster support teams (CCST) are often closer to the NS and more knowledgeable of the context and capacities. Therefore, involving the Region is seen as delaying decisionmaking on whether to deploy the global tools or not, particularly when such decisions then have to go to Geneva. At the same time, there was a parallel request for a common disaster classification system, competencies framework and access across the structures to all surge profiles in a common database, implying a certain level of centralisation, at least as far as setting competencies and standards is concerned, and to improve inclusivity.

NS decision-making issues

National Societies that have international response capacities have their own decision-making processes that inevitably influence the way things are done. For example, when under time pressure, deploying NS are more likely to send their own tools bilaterally rather than wait for weeks for the IFRC to make a decision on what to send or for the NS in need of assistance to respond. When deploying National Societies bypass Geneva and send their people and tools anyway, this is often (but not always) appreciated by receiving National Societies. However, it also begs the question why NS that have the resources to deploy don't instead fund deployments of staff from the affected region, which is likely to be a more time- and cost-effective approach.

Some National Societies are influenced, or even obliged, by their own government to deploy (either as part of the Movement effort or in parallel). Some state that their funding (from the public or government sources) depends on how visible they are, which effectively obligates them to act. The number of NS (even among the "traditional" sending National Societies) that are prepared to comply fully with centralised decision-making for deploying ERUs appears to be decreasing. One advantage NS have mentioned is that deployment of high-profile ERU teams helps with fundraising for the emergency appeal and for longer-term programming, which improves the value-for-money of the deployment.

Standard operating procedures

Lack of clarity around decision-making processes is mainly attributable to the absence of effective and agreed global surge/disaster response SOPs. Standard operating procedures exist for ERUs⁴⁹, HEOPs⁵⁰ and for FACT⁵¹, and while

⁴⁸ This table reflects terminology and relationships as they exist before this study.

global-level disaster response SOPs do exist, they are and have been only in draft form for several years. During this time some Regions have formulated their own regional SOPs⁵² (which, while being supported in the global SOPs, are not necessarily consistent with the draft global-level SOPs). The draft global SOPs propose an important system for defining response types (the red, orange, yellow system), outlining that, for a yellow or orange response, regional surge capacities will primarily be relied upon, but for red level responses, global surge will automatically be called upon, as illustrated in table 5 above.

A push towards more localised responses (both inside the Movement and externally) is likely spur a need for further SOP development. For instance, if cross-border politics obstructs the RDRT concept in some regions but NS show willingness to collaborate in the event of a large-scale disaster (south east Asia and MENA, for example), it is important to establish readiness plans and SOPs. These should be tested during table-top and simulation exercises. The IFRC in the Regions (and at the country and CCST levels) needs also to gain a better understanding of the types of support that certain NS are likely to require and/or accept. For example, some NS are more likely to accept surge support services, such as communications, information management or planning, monitoring, evaluation and reporting, and less likely to request or accept more operational surge support.

The delay in formalising the global Disaster Response SOPs is reportedly linked to the IFRC Secretariat's hierarchy's (Secretary General, Under Secretaries General, Regional Directors) need to agree on decision-making about how requests should be made and who takes decisions. As evidence, the regions find the approach towards the SOPs overly top-down. The latest version of the SOPs (currently in circulation for approval) requires agreement on essential surge response issues, such as: roles and responsibilities in a major response; who to contact regarding deployments; and who is accountable. Trying to navigate who the key decision-makers are and on what basis decisions are made has been a characteristic of many large-scale Movement responses, and this has cost the Movement time and efficiency. There is a crucial need for the Movement to complete and formalise the global SOPs if it is to move forwards with its surge response mechanisms.

Trigger mechanisms

As noted above, the draft IFRC Secretariat Operational Response Framework proposes a system to clarify what type and scale of event will trigger the activation of different Movement surge tools. Trigger mechanisms have also been defined in the different tool SOPs (although these are inadequate, and only internally agreed), as indicated in the table below :

Table 6 Current triggers for deciding on global/regional tools

Tool	Trigger/s / Decision-making process	
FACT	The deployment of FACT shall normally be considered, following a request for international assistance by the National Society of the affected country. In line with the Coordination procedures (2.2) FACT deployment shall be considered by the officer in charge of the operation, in consultation with the National Society of the affected country and Regional or country delegation (if any). The decision on deployment of FACT shall be made by the officer in charge of the operation on the basis of the established needs for such a deployment. Even if the National Society does not envisage appealing for external assistance, the Federation may, in line with article I2.I of the "Principles and Rules for Red Cross and Red Crescent disaster relief", send a representative to support the National Society in gathering the required information.	FACT SOPs
ERU	Following a medium-to-large-scale disaster that may necessitate the deployment of FACT and ERUs, the surge desk in Geneva will be in close communication with the ERU National Society.	ERU SOPs
HEOPs	HEOps can be activated by the region, as per the Global Standard Operating Procedures, in any disaster that is categorized as Orange or Red.	HEOps SOPs
RDRT	There is no specific trigger or process described for RDRT globally – no SOP covering RDRT in every region. However, in regions using RDRT it is usually a decision taken by the IFRC region in coordination with the relevant NS concerned to deploy RDRT.	

Linked to the (currently inadequate) agreed mechanism for triggering the activation of the Movement's GRTs is the lack of guidance and mechanisms for extending and deactivating the tools. There is a growing need to ensure clarity about when to extend and deactivate the different tools, given the variety of contexts into which they are deployed, for

⁴⁹ ERU Standard Operating Procedures (2012)

⁵⁰ SOPs for HEOPs (August 2012)

⁵¹ FACT SOPs (2004)

⁵² For example: *IFRC Secretariat Standard Operating Procedures for Disaster Response and Early Recovery in Asia Pacific* (September 2011); *IFRC Secretariat Standard Operating Procedures for Disaster Response in Africa (May 2013)*

example protracted crises. Additionally, as mentioned above, no triggers are defined or included in the draft Operational Response Framework (global SOPs) for the more specialized tools, such as FERST, SCT, STT or HES, although some of these have their own technical SOPs.

Selection processes for key tools

Even less clear is the process for the selection of the National Society tool/person/team for deployment. The IFRC's coordination role (at whichever level is relevant), which involves deciding *what* should be deployed and *from where*, is essential, not only to the effective functioning of the system but also to ensure effective and timely assistance to those affected by disaster. The Movement has significant standby capacity to respond to disasters, including at scale. However, even in the face of a large-scale disaster, lack of clarity lingers between the Regions and Geneva over deployments and how to select NS (or not) for deployment, much to the frustration of National Societies. With ERUs being one of the more expensive tools to maintain⁵³, decisions around which NS should be asked to deploy are particularly sensitive.

NS remain unclear as to why they are or are not selected for deployment. Perceptions range from "it's the one that raised its hand first" to an attempt by the IFRC to make sure that everyone "gets a turn". Some NS believe that selection for ERU deployment should be based purely on past performance and serve as a reward for "playing by the rules". With an increasing number of NS wanting to develop ERUs and have deployable surge staff, there is greater need for coordination but also openness. The absence of transparent selection criteria is therefore a critical gap in the GRT system.

Although it is not specifically documented, factors that help decide which National Societies will be asked to deploy are said to include:

- who has deployed recently (an informal rotation mechanism)
- deploying NS interest in the context (for instance bilateral programming)
- relevant skills
- language barriers
- ability to deploy immediately without pre-agreed external funding.

Other global tools

This project was asked to review a number of global tools with a primary emphasis on the most used tools – the FACT, ERUs, HEOPs and RDRTs. The review was also asked to consider a number of other Movement tools developed to support humanitarian responses. Decision-making for these tools appears to be less complex than for the larger tools, perhaps because the teams involved are smaller and more tightly technically focused. However, lack of clarity remains a concern in most cases. Examples of decision-making procedures for the deployment of some of the other tools include:

Table 7: Decision-making processes for other tools

Tool	Decision-making process
Cash register	There are 140 people on the IFRC cash register, including 40 who are also ERU/FACT/RDRT trained. Requests come directly to the Cash in Emergencies team which then sends the request out to all those on the register. Register personnel can provide support to ongoing operations, new emergencies or be deployed as part of a GRT.
HES roster (managed by British Red Cross)	Requests for deployment come from NS for support for their regular programming or from the IFRC Geneva surge team. If the person/people on the HES roster for that month match the requirements of the job description then that person/people will be deployed. If the requirements do not match the profile then the request is put out to others on the roster for potential deployment.
Shelter Coordination Team (SCT)	The Geneva Shelter unit coordinates with the global emergency shelter cluster to mobilise an SCT; the SCT draws on staff from different NS; shelter partners can also make requests for SCT deployment. The decision-making process is largely separate from other GRTs as the SCT is not technically or operationally integrated within the response hierarchy but attached directly to the shelter cluster.
Shelter Technical Team (STT)	The request for a STT should come from the IFRC and National Society headquarters at the country level. This request goes to the IFRC regional office and from there to Geneva. In practice, requests are not made because the STT is not known; therefore the Shelter unit have to proactively propose the STT with the regions and headquarters (STT has been deployed officially only twice to date).

⁵³ The limited information available suggests that ERU deployments cost anything from CHF 5,000 to 2,000,000; training and preparation will add another CHF 3-5,000 per person.

FERST	The FERST has no formal trigger or integration within the GRTs. In theory, the relevant IFRC and NS headquarters and field operational staff should identify the needs for FERST and mobilise the necessary resources. In practice, today individuals within the NS and the IFRC activate the FERST resources and tools if they are: aware of the latter's existence; and can mobilise the necessary funding and qualified staff. The result is inconsistent integration of recovery and transition elements into crisis responses. In some cases, a second or third rotation of FACT is asked to look at transition issues, or a non-standard team (e.g. Recovery
	Assessment Team) is configured for this.
ICRC Rapid	The ICRC has a centrally managed pool of some 400 – 500 internal headquarters staff that are
Deployment	managed by its human resources department. When international support is required or
Mechanism	deployed, decisions need to be taken on the amount of time required for a surge response.
	The ICRC has identified a surge push/pull factor. This consists of headquarters "pushing" adequate international resources to the field/delegation immediately post-disaster. This phase should last no more than 30 days, by which time sufficient resources should have been
	deployed to enable the delegation, with its better reading of the situation on the ground, to take 54
	over and "pull" in terms of identifying needs. ⁵⁴

Contextual disparity

The GRTs have been designed primarily to respond to large-scale sudden onset disasters. Their development over time has seen them deployed to small-scale emergencies, particularly with the creation of RDRTs in some regions and other surge tools, such as the IFRC Cash Register; the HES roster; and SCT. As noted in the IFRC's Global Surge Capacity Report for 2015, during that year the Movement's surge capacity proved adequate support for larger sudden onset disasters, with good media attention. However, mobilising FACT and ERUs for slow-onset or less visible crises was a challenge. This was seen particularly in East Africa and in one case it was necessary to change an operational strategy as no basic health care ERU was available to respond to an alert. Often the GRTs cannot respond to slow-onset and/or less visible crises because sending National Societies are unable to access funding for such deployments.

Lack of clarity surrounds decision-making on the type of disasters for which the tools were designed. This is equally true for the broad range of disaster contexts into which the tools have been deployed in recent years. For example, the recent migration/refugee crisis in Europe has seen significant GRT deployment (albeit in spurts). However, the protracted refugee situation in countries neighbouring Syria itself (such as Lebanon and Jordan) as a result of the crisis has not benefitted from the deployment of the GRTs to the same degree (none to Lebanon and very limited, and late, to Jordan). Additionally National Societies have raised questions about the response in Greece following the call for the deployment of ERUs, which were then handed over to the Hellenic Red Cross, and then a further call was made for additional deployments, with little information as to what happened to materials (including from the basic health care ERUs) from the first set of deployments.

Complex emergencies

Another complex decision-making environment is in conflict situations where the ICRC is the Movement lead but the National Society makes a request to the IFRC for a GRT deployment. An example where this could be complicated concerns the potential collapse of the Mosul dam, which could cause the death of several hundred thousand people and the displacement of some 1.5 million. The IFRC would be expected to play a role in supporting the Iraqi Red Crescent and providing GRTs, but this is a conflict environment where ICRC has the lead. Decisions around how to deploy the tools in such contexts is not clear even though there is reference to such situations in the draft global SOPs for disaster relief. This also forms an important aspect of the plan of action for the Strengthening Movement Cooperation and Coordination initiative (SMCC), which will need to be taken into account when planning for the implementation of this study.

Decision-making for managing tools in the field

This review has focused on decision-making systems related to the *selection* and *deployment* of tools – decisions made at the Geneva and Regional levels. It has not looked at decision-making on the ground by people deployed in affected countries, once tools have been deployed. However, it should be noted that those deployed have raised concerns about decision-making processes and the exclusion of affected NS from such processes. This has reportedly caused difficulties at times for the affected NS in terms of their relationship with local and national authorities, as well as tension within the Movement. Amendments to the various tools' SOPs should consider including more detailed guidance on decision-making during deployments (including across teams), based on key contexts and milestones of response.

⁵⁴ Austin. L, O'Neil. G, "The State of Surge Capacity in the Humanitarian Sector, 2015" (START Network)

External surge response decision-making environment

Outside the Movement, humanitarian organisations have in recent years placed a focus on developing crossorganisational policies and procedures to support and clarify surge mechanisms and approaches. As noted in the START Network's recent research into humanitarian surge practices⁵⁵, humanitarian agencies are intensifying efforts to ensure more effective surge responses, putting in place SOPs, policies and procedures to facilitate this. Organisations have different mechanisms for triggering surge capacity, with key factors being the significance of the emergency; the context/environment; existing in-country resources, capacity and skills.

Within the UN system, significant reforms have taken place to increase clarity in decision-making for surge responses. This has included reinforcing the role of humanitarian coordination at the country level, through Humanitarian Coordinators, Resident Coordinators (acting as Humanitarian Coordinators) and Humanitarian Country Teams to coordinate humanitarian responses. For sudden onset disasters, OCHA has further developed its On-Site Operations Coordination Centre (OSOCC) to support local authorities to coordinate international relief resources.

The declaration of a UN system-wide Level 3 emergency aims to strengthen leadership, coordination, and accountability in inter-agency response to major humanitarian emergencies. Although it was originally designed for sudden onset emergencies, a L3 can be activated for slow onset emergencies in exceptional circumstances where the gravity of the situation justifies it. Level 3 activation periods should not exceed three months, the aim being to revert as soon as possible to regular methods of work, under a strong national leadership. Ideally, during the initial period, the system gets the response underway and puts the necessary capacities in place, removing the need to extend activation. However, in practice L3s often extend well beyond three months and the UN struggles with the deactivation process. There is a need to prepare an exit strategy as part of the procedure, outlining the steps to deactivation. Activation of a L3 emergency:

- activates mechanisms and tools that ensure the system as a whole delivers effectively and can monitor its performance;
- creates tools and capacity that enable the humanitarian system to take rapid decisions soundly and coordinate effectively; and
- commits Inter-Agency Standing Committee member organisations to support L3 mobilisation by establishing systems and contributing resources in their mandate areas.

In spite of this welcome increased clarity in relation to activation of a L3 emergency, decision-making for surge for non-L3 emergencies is far less clear; in many ways, the Movement is struggling with very similar issues to those in the UN and NGO worlds.

10. Gap analysis of current RC/RC Global and Regional Response Tools

Introduction

Surge capacity within the Movement was originally designed to work largely within a system centrally controlled from Geneva, and had little obligation (and a lot of reluctance) to work closely with the rest of the humanitarian system. As this has changed, many adaptations have been made, yet there has never been a comprehensive review of the role of the Movement's surge capacity and its place within the wider system.

The gaps described here are based on an analysis of current capacities and practices, compared to future requirements, and, as such, are mainly qualitative in nature. It is not at any stage suggested that the big investments the IFRC and sending National Societies have made in surge capacity are entirely misplaced, or that the high state of readiness they have achieves is unnecessary (if anything, the return on investment is seen as good by both the IFRC and the NS concerned). It is also clear that the costs of surge capacity cannot be entirely offset by greater investment in National Society capacity building, although they can and should be augmented this way.

This section, and the next, will be structured in a similar way for ease of reading, covering strategic, technical and support issues in turn. The issues covered will be wide-ranging and will include analyses of topics that will require further study, or which fall outside the scope of this study (such as strategic management or the organisational development of NS).

During the interviews with both sending and receiving NS, the following points emerged as particularly important to them (these are by no means the only issues considered in the analysis):

⁵⁵Ibid.

Preparedness and recovery: There is clearly a demand, given that the GRTs are already thinking about the pre-disaster and transition phases. At the same time, there is a need for more investment in setting up response systems in advance for many NS that suffer recurrent (seasonal/cyclical) disasters.

Needs assessment and evaluation: There is a strong desire and requirement from donors, to improve evidence-based analysis and programming, in particular multi-sector. It is widely accepted that recent real-time evaluations (RTEs) repeatedly make the same recommendations that are not always acted upon.

Administration/finance/reporting support for ERU/ tools/NS: The lack of support services in the surge system has been emphasized more than once in this process; difficulty in raising funds for them, appears to be a key challenge.

Shelter expertise: Focus on the Cluster coordination role for the emergency shelter cluster has apparently left less capacity available for technical advice to National Societies.

The top five demands from National Society respondents (does not include IFRC or ICRC personnel) were:

- a. the need to merge and adapt tools/flexibility/"modularity" more agile response options
- b. better integration/inclusion of (many more) NS in tools
- c. the need for better coordination / framework, "who does what"
- d. the need for staff members/delegates deployed to have some local understanding
- e. the need for a better assessment/planning phase, and for it to be financed.

Decision-making, leadership, coordination and cross-cutting issues

Successful implementation of the recommendations of this study will partly depend on improvements at the *strategic and leadership* levels. If disaster and crisis response is to be a core business success of the Movement, it is essential to have a degree of uniformity and collaboration, as well as sufficient flexibility to allow all National Societies to play a full role. An obvious gap area in this regard is in the decision-making environment, illustrated by the lack of agreement between IFRC Geneva and the regional levels or a coherent and global set of response SOPs as described above.

Decision-making, for example about what tools to deploy, when and how, will be critical, and must be speedy to be effective. This makes multi-layered decision-making, as well as case-by-case analysis, far too inefficient to be preferable.

Competencies available: Many competencies needed for surge deployment are not integrated into the existing GRTs, which is a significant identified gap. Nevertheless, the GRTs are deployed, as stated above: finance/administration; partnership/external relations; communications; community engagement; IIDRL; field operations/coordination; and human resources support. At the same time, the deployment of these and other technical competencies relies on the key persons in the regions and Geneva knowing who is available because all competencies, these and those attached to GRTs, are "siloed" within individual tools. Therefore, an excellent profile may be available but not known to the particular person picking staff for deployment because rosters and lists are dispersed across the Movement.

Links outside the Movement, including at the senior level, and within host governments (alongside affected NS) will need to improve in a less ad hoc way. The balance of internal and external effort is under question, including claims of potential benefits of greater Movement engagement with the wider humanitarian sector – more visibility, synergy, etc. As organisations are muddled together at field/working level usually, it is a false distinction to remain unconnected at the strategic level. There is also a sense of disconnect between the National Society focus on national level effort (National Disaster Management Authorities (NDMA), auxiliary role, links to military / police, etc.) and the IFRC focus on the international effort. These different priorities were not necessarily inconsistent but needed to be more joined up). Coordination has to build on the positive relations often developed by the IDRL project (NS and the IFRC) with host governments, as was the case during the Nepal earthquake response (for instance, where, according to IFRC staff present during the response, the IDRL removed a customs gridlock for the Movement).

Links to the UN and NGO worlds: There is a potential gap and lack of synergy between the CERF and DREF, on the one hand, and "Red" operations and the Humanitarian Response Plan on the other. The benefits or drawbacks of this need further analysis, in coordination with the UN. This could be conducted as part of a follow-up on the financing mechanisms of the Movement's GRTs and surge capacity. It is a priority to: ensure that the Movement has appropriate profiles to participate in Inter Cluster Coordination Groups; and to link into UN Humanitarian Country Teams and I/NGO fora. (The ICRC RDM has a Multi-lateral Liaison Officer (UN) profile as part of its competency framework). In many contexts, the security forum, often led by NGOs, is an obvious link.

Until recently, **coordinating the sending NS following** a large-scale or mega-disaster was a priority for the IFRC, which believed that coordination should all go through the traditional routes. However, the map of sending National Societies is becoming increasingly complex, so too is the decision whether they coordinate in a multi-, bi- or unilateral way. As such, affected NS will urgently require an immediate and considerable capacity boost (either by internal redirecting of capacity, or bringing in assistance from outside) to deal with these issues.

Urban response will be increasingly common in the future, but at present the humanitarian system is inadequate in dealing with it at any level. Examples of gaps include dealing with urban-related security problems, urban assessment and targeting, maintaining complex networks of interlocutors, and how to deal with very challenging infrastructure and shelter needs.

Situations of **slow onset**, **chronic and protracted crises** bring special challenges, for which the Movement's current surge system (other than perhaps the ICRC's RDM) is very poorly adapted. There is no agreed way to identify triggers for when spikes in humanitarian needs might occur (or might be anticipated, for example after heavy rains or a new outbreak of armed conflict) which require the deployment of surge capacity. Even when there is a decision on the initial deployment of technical competencies (such as medical), there is little thought about how to ensure sustainability when the team has to withdraw, or how to maintain such a capacity for longer periods of time than the ERU "norm". ⁵⁶ (These challenges occurred in both the Ebola operation and in Greece, where much longer deployments were required.)

Community Engagement and Accountability (CEA). This is a new term for an old idea, although one which has only recently been fully adopted by the humanitarian community – that the affected population must have a role in deciding and implementing assistance, especially when the culture and language of the affected population is different from that of the host community (and National Society). Today, many of the GRTs have limited elements of CEA integrated (for example it seems relatively common in the mass sanitation module ERU, but far less so in medical ERUs, and is only recently finding a place on FACT). This may be based on the National Society's level of understanding and capacity for CEA.

Gender and diversity: A gap identified in the GRTs tools and system was the absence of a common approach to gender and diversity reflecting the Movement's minimum standard commitments⁵⁷. Aspects of G&D varied widely in their consideration and implementation within the GRTs (as for CEA, often based on sending National Societies' level of understanding and capacity).

Technical and service delivery issues

Needs assessment. The technical capacity for Emergency Needs Assessments (ENA) in many NS is limited, as much of the time it is volunteers who undertake assessments (focusing on primary data collection) and they have little training⁵⁸. However, there are plenty of tools and resources available to support ENA⁵⁹. Another possible reason why ENA is sub-standard is the multiple and unclear roles of the FACT, whose task in assessment varies according to capacity and context and, as a result, was often reported to be superficial. The early stages of a surge operation require the ability to carry out a rapid assessment within 24 to 72 hours; however, this is rarely achieved owing to a lack of appropriate skills / profiles / capacity.

Market analysis and cash transfer programming (CTP). Despite growing efforts to build surge capacity in these areas over several years (including in the American and British Red Cross Societies), the Movement is still in some senses behind the NGO curve in the use of CTP.⁶⁰ A comprehensive revision of the Movement's surge approach for emergencies will be the ideal opportunity to take multi-sector cash assistance to another level.

Medical ERUs, which will have to comply with the World Health Organisation's (WHO) standards for Emergency Medical Teams (EMT) already meet an urgent need and on the whole provide a good service. However, professional standards are not applied in a uniform way globally, which makes performance management difficult. In addition, these are, reportedly, often among the weakest teams in coordinating either with Movement partners or externally.

Public health. The Movement has traditionally focused medical response on the immediate emergency and primary health care needs of affected populations. This has been a successful and effective model to date. However, current medical ERUs are not structured to address the public health needs that disasters in the next decade will increasingly

⁵⁶ For the ERUs, the SOPs state four months.

⁵⁷ See footnote 42. Note also the DAPS Framework (dignity, access, participation and safety)

⁵⁸ Report on Federation Network Emergency Needs Assessment Practice August 2016

⁵⁹ Questionnaire design for needs assessment in humanitarian emergencies, ACAPS; July 2016.

⁶⁰ Cash in Emergencies Toolkit, also RAM and MAG have been developed. Developments are continuous, particularly in relation to use of technology. However, the capacity to put these into practice lag behind some NGOs ability to scale up quickly.

trigger. The Movement will need to decide whether it could and should embrace public health within its medical response (based on unmet needs in the sector, and capacity within the Movement). If so, the Movement could develop specifically adapted public health support tools (such as for vaccination, gender-based violence or epidemic control).

Protection⁶¹. The false divide between "natural" disasters, where no protection or security risks are perceived to exist, and "conflict", where they do, must be rejected, for example, in the light of issues arising from mass migration, such as the current case in Europe, and situations such as Nepal and Haiti. The Movement has relied on the ICRC for protection expertise, and developed very little training or capability within the GRTs or surge system⁶².

Shelter cluster (coordination and technical); When the IFRC is the convenor or co-convenor of the Emergency Shelter Cluster, this obligation may be perceived to take capacity out of the Movement response itself; in some instances coordination between the cluster and the Movement response may limit the benefits felt in return. The worst case is that there may be reputational risk when there is insufficient capacity to take on the task (such as in Nepal 2015 when the International Organisation for Migration had to be asked to take on some of the SCT roles). The STT is rarely officially deployed, and there is a need to consider why this has been the case.

Support services, financial and accountability issues

DREF. Inextricably linked to surge capacity issues, the DREF is often considered the first "global tool" by many NS, when they are at forefront of small or medium disasters (often seasonal). In interviews, many National Societies made suggestions about expanding the DREF system, including to increase the value of the fund, broaden use of the "pre-DREF" allocation for assessment and planning phases (with the DREF-funded deployment of regional surge capacity if required), before a larger DREF allocation is confirmed. They agreed that speed was essential in getting early (even if small) funding to a NS, and while this is often achieved, there is a perception that the DREF is becoming more bureaucratic.

Emergency Appeal: A commonly agreed idea among interviewees was that multi-country EAs are often indicated. but very challenging and rarely achieved. Another suggestion was to have a more iterative approach to planning; however, the current setup of the EA and the Emergency Plan of Action (EPOA) are not always seen as facilitating this. For example, some interviewees suggested that the EPOA is too complicated a format, especially for DREF. It was also made clear that successful implementation of an EA operation would need capacity to support reporting and financial accounting (unless the National Society has proven capacity).

Information management. A complex issue that needs further analysis is the need for a full plan on how to improve Information management. Key aspects of this include how to gather, analyse, share, present or use information, involving a wide range of audiences. The current Project GO⁶³ is a parallel task; it will be necessary to ensure the outcomes are mutually beneficial.

Support services. It is recognised that where a DREF allocation is granted or an EA has been launched, emergency response, will require capacity in finance, administration, reporting and human resources in support of the affected National Society. Nevertheless, this is rarely part of the first phase surge capacity (in terms of deploying competent finance, human resources and administration staff familiar with IFRC systems), and often too little too late altogether. A key issue is that these capacities have been difficult to justify to back-donors, while the consequences of poor financial management of appeal funds (for example on an National Societies' credibility with donors) can be very serious.

Individual tools – key gaps and issues (see also Section 8 and Annex F)

Table 8: Identified gaps

Tool	Gaps identified	
FACT	Perceived as the least efficient of the current main tools	
	Lacks generalist leadership capacity, tends to be a collection of sector experts	
	Lacks capacity or opportunity for quality ENA	
	Diversity in FACT deployments – not demand driven	
	Finance/administration/human resources support for FACT	
	Works in isolation from the affected NS when no counterparts are available	

⁶¹ For the purposes of this report, the ICRC definition and usage of protection are used

⁶² Training and strengthening capacities is built in the existing ICRC/NS RFL Pool. As part of its reference role in Protection, the

ICRC is currently stepping up its efforts in and resources to strengthening the Movement's capacities in the fields of protection; in building on the concept of the RFL Pool that was elevated to best practice.

ICRC RDM	Too few opportunities for National Societies to get involved
CASH	Requisite training to be involved on the cash register limits, potential inclusion of RDRT and NDRT members
HES	Continued effort to ensure IFRC in all regions is aware of the availability of HES staff Insufficient integration into FACT or other surge mechanisms
SCT	More transparent way to identify levels of need, and to decide on deployment. More stable funding, separate from EA
STT	Visibility of the tool Inadequate deployments so far for reliable analysis
FERST	Not used enough to analyse gaps – needs fundamental rethink of how to build planning for transition phase into surge capacity Reconfirm ownership of tool
RRU ⁶⁴	Validity and development of the new RRU concept System for support and funding SOPs or quality control lacking
ERU – WASH	Ability to adapt teams to wider variety of situations Far more modularity is required
relief	Market analysis skills (including links with logistics) Uniformity of capacity in CTP
support ERU –	Emergency human resources capacity not strong enough to ensure rotations or transition phase Flexibility required
ERU –	Modularity of ERUs is so far insufficient Additional capacities such as finance, administration, volunteer management and welcome services are required
ERU- medical	Need a common quality assurance mechanism Inadequate response to public health issues Lack of NS capacity building and exit strategy (for all ERUs)
RDRT/RIT	Inadequate or inappropriate financing mechanisms No comparable management system for RDRT/RIT Development of RDRT inconsistent– e.g. in Middle East and Europe Systematic integration with other GRTs
HEOps / D-HEOps	Inadequate financing Number of HEOps available Sustainability of D-HEOps approach

11. Required functionality of the RC/RC Surge Response Tools

Introduction

Over the next 10 years, the Movement faces increasing challenges to respond to disasters and crises in a timely and effective way. The trends described here and elsewhere about the increase in humanitarian needs, urban-based disasters, and crises of a protracted, chronic or slow-onset nature are all evidence of the constant demands on the system to do more with less. Whether a disaster is high profile or neglected, or is the result of natural or man-made events, has little to do with the levels of need. The Movement's surge capacity must be available for **all** emergencies if the levels of need overwhelm the capacity of the affected NS(s) and/or the local IFRC. Promoting and maintaining a system which is triggered by unmet needs (rather than funding or media profile) is certainly a challenge and will continue to be. However, unless this is the basis for the plans coming out of this review, and those plans specifically look for ways to ensure that resources are available whenever and wherever they are most needed, the risk of falling quality and increasing irrelevance will remain.

The challenges are also internal to the Movement, and vary from region to region. In Africa, where the next decade will almost certainly see the most severe humanitarian needs, disasters will recur often, may involve many smaller-scale events rather than fewer large ones, and include long-term political and food security crises which cannot be alleviated by response capacity alone. At the same time, there are challenges of capacity, culture, language and politics in the Africa region and among National Societies. It will be important to develop specific ideas on how a modified surge capacity system at regional and global levels can best serve the needs of African National Societies in their response activities.

In the MENA region, the challenges will be every bit as great. Parts of the region are likely to be plagued by conflict or political turmoil for much of the next decade, with large-scale population movements within the region as well as from it. Peer-to-peer and regional action will be vital for reasons of culture, language and secure access of humanitarian workers, and the protracted nature of the emergencies make it hard to deploy surge capacity wisely or cost-effectively.

Relatively speaking, the GRTs have been used more in the Asia Pacific and Africa regions in the past, and RDRT/RITs particularly in the Americas and Africa. These are regions where the Movement is most comfortable with disaster response. Many national governments and NS in these regions will take a strong lead in disaster

⁶⁴ Although the RRU is not an officially recognised global tool, it forms part of this analysis as per the TOR.

management, with help from neighbours more than the international community at large; this will also be reflected in the Movement. The occasional mega-disaster (statistically most likely in Asia) will continue to grab headlines, with all the consequences that this brings.

The aims and objectives of the Movement's surge capacity at all levels remain very much unchanged, in that the primary goals will be to support the affected population and the secondary goals to support the affected NS⁶⁵. It is possible to break these down into several separate objectives that tie in closely with those of emergency response as a whole. The following list covers objectives of surge capacity and its surrounding environment (decision-makers, leaders within the Movement), at strategic and operational levels, to:

- 1. assess and identify the immediate unmet humanitarian needs of affected populations
- 2. ensure the right capacity is available quickly where and when needed
- 3. maximize the effectiveness and efficiency of the response in the early phase
- 4. facilitate coordination within and outside the Movement during the emergency phase
- 5. be accountable and responsive to affected populations during the surge phase
- 6. facilitate the visibility and accountability requirements (or expectations) of donors, media and the public, and
- 7. enhance the capacity and reputation, and fulfil visibility/profile requirements, of the Movement

This section outlines some of the issues that should drive the development of the Movement's surge capacity system over the next 5-10 years, and describes the types of capacity and functionality needed to achieve a system that remains fit for purpose.

The section will include details of classification (white, yellow, orange, red, blue), decision-making levels (national, regional, global) and competency tiers. This table gives a very brief description of what the tiers of competency could entail:

Table 9: Tiers of competency

Tier ⁶⁶	Example standards of competency	Example seniority
Tier 1	 knowledge of RC principles, national DM role local knowledge, including of NS knowledge of national disaster risk profile online IFRC training in key general skills online IFRC training in key technical skills some experience of disaster response 	Mastered skills in a specific field or fields and capable of functioning effectively as part of a RC team; Capable to manage aspects of national surge response as part of a team; Counterpart for larger or more complex response; Technical coordinator or team member
Tier 2	 knowledge of RC DM knowledge of neighbouring NS knowledge of regional risk profiles or international disaster types online training (IFRC or other) in technical, coordination and managerial skills participation in IFRC courses (technical, coordination or specialised) experience in disaster management at national and international/regional levels good performance appraisals 	Same as above, plus the ability to effectively manage an operational RC team as part of a larger operation; Ability to support NS through a DREF or small EA where there is no other surge in country Manage aspects of larger response; Counterpart for multi-component or complex response

⁶⁵ To a large extent, it is difficult to distinguish between the key objectives of surge capacity and those of early response as a whole; this report will touch upon all the issues, but may limit recommendations to those elements which fall largely or solely within the surge capacity sphere.

⁶⁶ These will be tiers of qualification and certification, based on centralised and standardized training and performance assessment

Tier 3	 knowledge of all Movement policies, principles, structures, and surge capacity tools knowledge of global risk profiles, disaster types participation in IFRC training at technical, coordination and leadership levels considerable experience of international disaster responses, in more than one region coordination or specialist roles at international level leadership roles at regional level 	Same as above, plus the ability to manage all aspects of a multi-sectoral, multi-stakeholder response of any magnitude; Management of complex, multi-component, large response; Management of small but complex operation when there is no other surge in country; HEOps or counterpart to HEOPs.
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Decision-making, leadership, coordination and cross-cutting issues

In order to fulfil these objectives, the **functionality** of the surge tools in future will need to focus as much on coordination, management and accountability as on the quality of technical service delivery.

The most universally agreed priority for reform of the disaster management system in general, and surge capacity in particular, between IFRC and NS respondents was the need for an integrated, consistent and accepted hierarchy of **SOPs** at the country cluster, regional and global levels. This must include effective dissemination of information about the surge capacities available, as well as clear guidelines on roles and responsibilities for different levels of impact (white, yellow, orange, red, blue disasters). It also requires response managers to meet the requirements of their training and to stay current on response tools. This will need clear and agreed triggers and SOPs for all GRTs, including an alert system for surge personnel and equipment, and operational norms and standards during deployment, which National Societies (both affected and supporting) must respect in a consistent way.

The Movement will have to advance towards a **competency-based approach** rather than the current siloed-tool approach. This would mean common competencies and profiles across the tools better representing the needs in terms of leadership/coordination, technical and support services more effectively. Ideally, this would result in available, mobile and transparent surge staff and volunteers across the tools, facilitated by a common, compatible and coordinated system of databases. To a certain extent, a sub-committee of the Global Surge Working Group (GSWG) is already working on this. Also working towards the same goal is to develop a single **competency framework** for technical and non-technical roles and skills for surge personnel, at 3 levels (or tiers) of qualification.

Inclusivity is required in several separate but interlinked ways: inclusion within the Movement to ensure that all NS have the ability and opportunity to contribute to a response in appropriate ways; inclusion of the affected population as both sources of information and agents of change; inclusion of all those affected according to their particular vulnerabilities, needs and capacities.

It is inevitable that strategic **planning and leadership** for disaster and crisis response will need to be coordinated and multi-layered in the Movement, as its nature makes it impossible for any one layer or component to be fully in charge. The affected National Society must be at the centre of decision-making and planning, with a clear SOP framework to guide them (as well as other NS and the IFRC) on what is available as surge capacity, and how they should use it. The need for clear roles and responsibilities, decision triggers, deployment procedures, cross-team working, etc. which can be relied upon to function for the entire system in a predictable and consistent way has been demonstrated across the sector as well as in the Movement itself.

It is important not to underestimate the need for **operational leadership** capacity, both in the affected NS and the IFRC⁶⁷ (surge capacity system), commensurate with the needs of any particular disaster situation, as has been the case in the past. Leading a response is a complex and challenging task that requires training and experience.⁶⁸ In addition, the growing risks to aid workers, and risk aversion among many governments and organisations, means that **safety and security management** is an essential component of leadership as well as a technical competency requirement. Minimum standards for **gender and diversity** have to be integrated across the surge response.

The processes for **planning and priority setting** are critical for effective humanitarian response, but pressure for accountability has tended to make the processes heavy and inflexible; there also remains a tendency to favour "push" factors over "pull" (to prioritise what is available over what is needed). While these trends may be inevitable to an extent (and must be recognised), it is also essential that planning remains a living process, focused on the affected population first and foremost.

⁶⁷ Refers to the wider meaning including all NS as well as the IFRC Secretariat.

⁶⁸ The HEOPs / D-HEOPs programme has done a lot to address this; it may need to be expanded or extended.

The **classification** of a crisis (white, yellow, orange, red, blue⁶⁹) must be done very early on (within three hours of a sudden onset event or a DMIS notification, or within 24 hours of a call for operational uplift in a protracted crisis), as this will determine how to support the National Society, and where the decision-making responsibility will lie for the surge capacity. ALL classification decisions would be made by a combination of the NS concerned and Geneva HQ, with the regions in an advisory role only.

The three levels are flexible. For example, for an event classified as a yellow, the National Society is responsible for all decision-making. This does NOT mean it cannot request surge capacity (of any tier), although to request a Tier 3 capacity for a Yellow event would require justification (for instance a particular aspect of the situation which needs very highly skilled advice). In the same way, to request only Tier 1 capacity for a Red event would be very hard to justify.

The majority of large-scale humanitarian emergencies already occur in complex environments (such as a natural event in a fragile State, or an armed conflict resulting in cross-border population movements), where both the ICRC and the Federation (and of course National Societies) have a role, and this trend is likely to increase (as is the need for a **single "Red" response** image in the face of massively increased competition within the sector).

The Movement will need to adopt universal internal and external **coordination mechanisms** (the former based on current initiatives, such as the SMCC and P&R), at least for the immediate surge phase of a new or protracted crisis. These mechanisms will require dedicated resources, integrated with the receiving National Society as well as complementarity, synergy and alignment with the United Nations and other humanitarian agencies in the country.

An obvious requirement is coordination between components of the Movement to ensure maximum support to the population affected and National Society, with minimum duplication or gaps. However, to achieve this while recognising that the needs of the target population are not the only consideration is less intuitive and harder to justify officially. For example, **resource mobilisation** will succeed best when the requirements of both the donors and the recipients are taken into account. Similarly, when the needs of the receiving NS and those of a sending NS are in contradiction, accepted norms will be required to afford a workable compromise that all parties can respect. The receiving NS will nearly always need support in the challenges of receiving external assistance, no matter how strong or capable it is.

The **status and auxiliary role** of NS towards their governments are surprisingly varied, which can be both a strength and a challenge to the Movement as a whole; defining "the art of the possible" in any given context requires, for example, good preparedness and pre-disaster arrangements.

As aspects of the ambition for a single **Red Pillar response** feature in the SMCC Plan of Action, this is not a prominent theme in the present report. However, some obvious wins would be to have common approaches to communications plans, humanitarian diplomacy possibilities, united messages to the UN and host government, for example, while maintaining the primacy of the affected NS, but also allowing visibility to other contributing NS. It is important to optimize use of all available Movement assets. For example, in spite of an unfolding large-scale population movement in South Sudan in 2014, the only IFRC tool that was used was the WASH ERU equipment to deal with a cholera outbreak in Juba and Torit. Similarly, with the arrival of Syrian refugees in Lebanon in 2012 – 2013, despite significant medical needs being identified, no GRT were deployed.

There is a need to provide for the visibility of the Movement within Humanitarian Country Teams and other mechanisms of the humanitarian coordination system. This involves defining the relationship with the UN Humanitarian Coordinator and/or UNDAC team and OSOCC. One of the most common criticisms of the Movement is that it "avoids" the rest of the system. While this has been justified on the grounds of independence for many years, it is now necessary to find ways to improve connectivity. One example of how this is done is the ICRC's Multi-lateral Liaison Officer role – a specific competency within the ICRC RDM.

The NS nearly always has a unique role as auxiliary to **government**, often in terms of a place within the national disaster management plan and structure. It will be a mistake to leave this as a parallel, and often unsupported, strand of activity when the international response (surge) architecture comes into play.

It is also an accepted truth that many **different types of actors** (military, private sector, social media, to name a few) have a growing role in response, but this reality has yet to be properly reflected in the coordination systems of the humanitarian sector, and especially the Movement (with the possible exception of the ICRC). Specific capacity needs to be developed to coordinate with new actors, and to assist the affected National Society to play their role within the private and government sectors to full effectiveness.

⁶⁹ See Table 10

Environmentally neutral (or "green") response is still regarded as a "nice to have" rather than the default way of working; this is unsustainable and rapidly becoming unacceptable to host governments and affected communities alike.

The use of **cash-based approaches** as a modality for emergency response to many humanitarian needs, and therefore an holistic, market-analysis based system of operational planning and delivery, should be the norm within the next few years. Accordingly, the Movement must develop further its capacities to be able to support affected NS to respond appropriately.

Humanitarian diplomacy may be an essential element of a response, especially in complex contexts; the strategy, planning and implementation will always remain a function of the leadership (NS and IFRC or ICRC, or all three) along with the support of communications specialists. Pressure for humanitarian diplomacy is expected to increase in future, so it will be necessary to be able to respond appropriately, without jeopardising the operation as a whole.

While the early phase of humanitarian response will always focus on the immediate situation (the process of getting in and scaling up), the leadership functions must have regard for **transition** to a next phase right from the outset. This is well known, but not yet well executed in all cases.

Other examples of trends that are recognised in principle but poorly executed include the need to be able to operate in an **urban environment** as comfortably as a rural one, and respond without causing unnecessary environmental damage.

Technical and service delivery issues

The long-accepted system of **technical sectors and clusters** (food security, shelter, WASH, health, etc.) has served the humanitarian community well in coordination and operational terms; however, it also has severe constraints which will only become more pronounced as humanitarian aid becomes more responsive (results might include more holistic and multi-purpose cash-based approaches) in future. The Movement's surge system will need to work within or in alignment with the system of clusters when and while it exists, but also look beyond this to be able to design responses which more accurately and directly serve the immediate needs of the affected population in the emergency phase. One example of how humanitarian response will become more multi-sector and responsive is the emergence of CTP.

Accurate, realistic and timely emergency **needs assessments** are essential but can appear to be practically impossible in the immediate wake of a disaster or crisis (even, it seems, when it is protracted or recurring). Finding the appropriate balance between accuracy and detail on the one hand, and speed on the other, will be essential not only for multi-disciplinary planning purposes but for evidence-based accountability⁷⁰.

It will be important to retain the unique added value of some of the Movement's response tools, for example those that provide immediate **life-saving services**. This will include medical teams (from emergency clinics to hospitals with surgical capacity, and including nutrition) as well as emergency water supply. The provision of sanitation and public health services will also remain essential, although the means for doing this needs to be more flexible than at present, for example to be suitable in urban environments or situations of health crisis.

For the delivery of **non-food relief and shelter** services, it will be necessary to have the capacity to use cash-based approaches as the default. This will require rapid capacity to assess market functionality, realistic emergency shelter options, and supply chain analysis. The emphasis will need to be on adaptability to the individual disaster or crisis situation, rather than relying on traditional options. While this does not negate the need for material assistance such as tents and shelter kits, for example, solutions will more often be found in providing cash for affected people to make their own choices (perhaps with technical support and supervision). The evidence from several mega disasters (the Indian Ocean tsunami, Haiti earthquake, Typhoon Haiyan) questions the suitability of the Movement's surge capacity for involvement in large-scale engineering projects.

Protection (including Do No Harm and prevention measures) is often one of the foremost needs that an affected population will identify in the immediate aftermath of disaster or crisis (or after large-scale population movement). Prevalent risks include low-level inter- or intra-communal armed violence and sexual and gender-based violence (this has always been the case, and it is recently becoming better recognised and reported, although still not well addressed⁷¹). The affected NS and surge capacity personnel will need to be highly skilled at incorporating these elements into response planning and activities. There has never been effective capacity within the Movement's surge system (other than at the ICRC) to deal with these issues. Recently, FACT might have included a single person with a

⁷⁰ Report on Federation Network Emergency Needs Assessment Practice, August 2016

⁷¹ Addressing sexual violence in humanitarian emergencies: Marsh, Pudin & Navani. IRC 2007; and Unseen, Unheard: Genderbased violence in disasters IFRC 2015.

gender and diversity focus, or have someone from the ICRC take on the Restoring Family Links (RFL) role, but in general these are ad hoc rather than mainstreamed. Rather than duplicate effort, it will be necessary for the ICRC and the IFRC to work together to support National Societies in all disaster and crisis situations to provide meaningful services to affected people to help safeguard their physical integrity and dignity and, more generally, to respond to their protection needs. The ICRC will disseminate within the Movement the *Professional Standards for Protection Work*, an important protection tool originally produced in collaboration with various international and non-governmental organisations, and currently under revision (third edition)⁷².

Support service, financial and accountability issues

Effective management of human resources is central to any surge capacity system, and equally important when planning for the follow-up phase to a response. The challenges involved in having suitably skilled and experienced personnel available for response surge has exercised many of the best minds in the humanitarian sector for years, and no universally ideal solution has yet been devised.

To support the competency framework, **training** programmes and curricula will need to be adapted. This does not necessarily mean more training, but rather a smarter approach (a key observation of respondents was that many individuals might be trained, but without the experience of deployment the training quickly became obsolete and therefore inefficient). A single system of training standards, with qualifications at levels commensurate with a comprehensive competency framework was a popular suggestion, with as much as possible being conducted online and across the GRTs (especially for Tier 1 – technician - qualification). This will allow suitably qualified individuals to be deployed for any response (classification yellow, orange, red or blue).

To ensure **availability** of human resources where and when needed, a combination of full-time surge staff, on-call rosters (immediately available) and general skills registers is generally agreed to be best. Any or all of these might be contracted and paid for by either a single NS, a consortium of NS or the IFRC itself, so long as every part of the system is visible in a single system (database) and available (via the SOPs) to the appropriate disaster situations.

To ensure **accessibility** of all NS (including staff and volunteers) to the surge system (for their own capacity building as well as response), a system of linking up National Societies is suggested: this could include joint trainings for Tiers 2 and 3, sponsorships and partnerships between richer and poorer NS, and "lead agency" National Societies for certain sectors, skills or capabilities. This is already occurring, for instance. for ERUs.

The role of National Society **volunteers** in gathering and analysing relevant data is yet to be optimised in many cases; while there are advantages of proximity, community knowledge and language, the complexity of assessment methodology and reporting requirements is outstripping capacity in many cases.

Administrative support to both the NS and the Movement's surge capacity, including welcome services for incoming personnel, is another vital area that has been reported on consistently for years. However, action on the issue has been slow; this may be due to lack of donor support, the need for individuals with IFRC systems' knowledge, or lack of clear responsibility levels in the IFRC or National Societies.

The current **financial mechanisms** (DREF, EA) were not part of the terms of reference this review; however, DREF in particular is viewed by many NS as an integral and essential part of the surge capacity system, and the one most often called upon after small-scale disasters. No surge system will work well without the means to resource it, and the requirements of the Movement to have immediately available, and flexible, funding is absolutely fundamental.⁷³

Financial management and reporting is another essential, yet complicated, element of response within the Movement. The need for surge personnel (and so available on day 1, not week 3) trained in the IFRC's financial systems has long been identified, and many smaller responses now have a surge delegate who is responsible for supporting the NS to ensure good financial management. Illogically, this is not sufficiently guaranteed for the larger responses.

Logistical support must be well integrated and for the benefit of the entire operation (including the affected and other National Societies as well as the IFRC system). In general, the Logistics ERU works well as logistics support to the surge capacity, but needs to expand this. Separate capacity will be required for market analysis and supply chain management, which, while it overlaps with logistics, is more comprehensive and usually less well served within the system. Supply-chain management goes beyond being a support service, and will need to be fully integrated into the operational planning and coordination functions.

⁷² <u>https://www.icrc.org/en/publication/0999-professional-standards-protection-work-carried-out-humanitarian-and-human-rights</u>

⁷³ It is recommended that, once this study has been accepted and a plan of action made, further study on the means of financing surge capacity is undertaken.

Communications support is also vital, in particular support to IT/telecommunication/digital, and also media communications (both traditional and social media).

The demand for **real-time information** about the affected population, their situation and needs, and the activities of the humanitarian community, will always outstrip the capacity of the sector to provide it. It is however perceived as a priority to improve **information management** in the surge response, and it is not unreasonable to build this capacity into surge systems; however, it is often difficult to identify the ownership of information in the humanitarian sector, and as funding becomes more driven by results, the competitive element (in contradiction to the obvious advantages of streamlined use of information) will increase. The need for compatible systems across the Movement can only become more urgent, and there will also need to be a greater degree of compatibility and interaction between the means, media and platforms used by different components of the Movement to manage information on emergency response. None of this is technically difficult; however, as with all of the issues above, real progress will require a decisive and cooperative political approach. This study welcomes the launch of **Project GO** by the ICRC and IFRC (as part of the SMCC initiative).

Digital platforms are underutilised by the Movement, although some good initiatives exist (such as DMIS and SIMS). There is a need to make information more publicly available.

The Movement will need to make greater and effective use of common **specialist services** (even from outside the Movement), such as in GIS/IM (such as MapAction), needs assessments (ACAPS) or logistics (World Food Programme) which provide essential efficiencies. Medical teams are required to meet WHO EMT standards, and coordinate activities centrally to avoid duplication, as indicated above.

The **EPOA** format is used for both DREF and EA operations; while it is helpful in principle to have a single format for planning, in practice it has become unwieldy and onerous for many NS – or surge capacity teams such as FACT – to complete quickly and clearly.

An important component of planning will be a **monitoring and evaluation strategy**, which must be incorporated into the surge planning phase rather than left until later, to also avoid the chronically late RTEs.

Accountability to affected populations involves being genuinely responsive to feedback as well as the transfer of information in both directions.

Donor accountability will have to be increasingly evidence-based, something with which the Movement has not been traditionally comfortable (from the ICRC point of view, it has clashed with confidentiality, and from the National Societies' perspective, the attitude has been one of conflating proximity with evidential accuracy).

12. Conclusions and recommendations⁷⁴

In the last 20 years, the Movement has developed an impressive surge response system in an effort to ensure a continued ability to respond to the needs of those affected by disaster and crisis. The system, comprising skilled staff and equipment, has allowed the Movement rapidly to assist disaster-affected populations across the globe in a variety of ways. Technical service delivery tools cover the entire range of life-saving requirements and should be maintained. While some service delivery tools have their own support service components, this review has identified gaps in support services in the system more generally. Receiving NS greatly value the development of operational leadership positions for surge responses and it is therefore important to increase the limited number of staff able to fill senior positions (such as HEOps and D-HEOps). The increasing deployment of FACT, ERU and HEOps in the last 15 years indicates their continued relevance and reliability.

In spite of the success of the GRTs (individually and as a system) over the last decade and more, this review has identified a number of gaps and areas for improvement to enable the Movement to maintain a central position and play an effective role in the surge responses of the future. It is important to stress that this study largely reflects the perceptions of respondents and key informants, in addition to analyses of the tools and their coordination. Nevertheless, there is reason to believe that the range of interviewees and sources, as well as the richness of information obtained from field trips to Ecuador, Greece, Jordan and South Sudan (as well as to IFRC regions in Nairobi, Kuala Lumpur, Budapest and Panama), lends these findings a strong basis of objective credibility. One area which the review team not been able to include in the recommendations is the need for more flexible, predictable and

⁷⁴ This summary does not attempt to repeat all the detail and analysis included in the report as a whole, and should not be read in isolation.

competitive funding mechanisms; as has been stated, the team proposes further assessment of the DREF and EA tools as a good complement to this review.

In total, ten sets of recommendations are made on the themes indicated below. It is proposed that the allocation of responsibility for the implementation of each recommendation (such as between the GSMT of the IFRC, sending or receiving NS, the IFRC secretariat at different levels, the ICRC) be developed as part of the POA. Draft input for the POA based on working sessions from the November 2016 meeting of the DMWG, with contribution from the October 2016 meeting of the GSWG, has been developed; the full plan of action will be developed over the coming months (2017Q1).

12.1. Clarification of the surge decision-making processes

This was consistently mentioned as the most pressing issue; a clear majority of interviewed NS – as well as IFRC respondents – mentioned that global SOPs were needed to improve and speed up decision-making. The (real or perceived) lack of clear, consistent and accepted decision-making around selection and use of the GRTs is further fragmenting the Movement as a number of NS pull away from the system and/or develop and deploy their own surge capacities (similar or not to the classic GRTs) outside the Geneva-centric system. It is the transparency of the decision-making process that is key to National Societies' faith in IFRC systems and increased likelihood to "play by the rules". The unexpected nature of sudden onset disasters makes the need for clear and transparent decision-making procedures essential. Similarly, with an increase in protracted crises (in terms of scale and timing) there is a growing need for a clear system and decision-making as to how the Movement's surge tools can best respond.

Recommendations:

- a) Finalize and agree a full set of detailed and effective global and regional SOPs for disaster response with clear stipulation of authority and accountability.
- b) Apply consistent and recognised triggers that lead to a rapid classification of crises.
- c) Develop rationale and criteria for the deployment of surge teams and tools.
- d) Agree compliance tests against the P&Rs for National Societies involved in surge deployments.

Explanation:

SOPs and triggers

SOPs: It is strongly recommended to finalize and ratify a full set of detailed and effective SOPs for disaster response which can be applied at the regional and global levels, as well as informing national level response, and which include clear procedures about how and what surge capacity is deployed. There was an unusually high level of agreement on this point among respondents and interviewees. The global SOPs, which have remained in draft for several years, must be concluded, agreed by key stakeholders such as the GSWG and the DMWGs (including regional) and then signed off by senior management in Geneva. If necessary, both the DMWG and the ICG can be asked to lobby the GSMT on the issue; however, it is consistent with the SMCC plan of action and should receive support at the necessary levels.

Triggers and classification: It is also necessary to apply consistent and recognised triggers, which would ensure rapid classification of disasters and crisis events or phases into Yellow, Orange, Red classes (also Blue for protracted crises where needs are acute but long term, and a White category for a purely national response of a very small scale) (see table below). This classification would lead – consistently and without undue negotiation – to the allocation of decision-making authority about the deployment of surge capacity. In most instances, decision-making on surge deployments would fall to the IFRC Region (along with the affected NS of course); they would have to justify and be accountable for all decisions to deploy surge tools or not, as well as for the overall quality of the response. They would also lead on negotiations with NS that decide to deploy bilaterally.

In terms of the classification of disasters, a check-and-balance system would be required, where Geneva would be authorised to challenge the Region, if it is felt that a disaster had been under-classified (this is perceived as a risk). In most instances, classification of crises would take place in consultation between the affected National Society and the Region, with Geneva ratifying decisions where necessary. This keeps decision-making close to the situation, while also providing oversight from those with a more strategic view. It would be essential to impose strict time limits for classification to occur (such as 12 hours for sudden onset; 24-48 hours for spike or change in situation for protracted crisis; based on Integrated Food Security Phase Classification (such as IPC) criteria for a slow-onset food crisis), while at the same time allowing flexibility for revision of the classification or decision-making level at pre-determined intervals, and based on agreed indicators (including extension of flooded area, increase in affected population) or accountable milestone (for instance an approved EPOA and EA document within 14 days).

The table below illustrates that, in most instances, the IFRC Region (along with the affected NS) will decide the classification of any disaster or crisis and what surge should be deployed. However, they will be answerable to

Geneva – and to NS wishing to send GRTs – to justify these decisions if controversial. As a general rule, any DREF or EA would result in surge deployment; a DREF allocation might only mean one surge person (an operations Manager, or finance delegate, or other as needed). If no ERUs (service delivery) are required, most surge will consist of bespoke teams composed of the suitable leadership, support, management and coordination roles, at the appropriate tiers (or grades, according to the competency framework).

Ideally, most of the functions in coordination and support services (see table 11 below) should exist at all three tiers (see table 9 above), in all of the IFRC Regions, especially among stronger National Societies. If needed (or in specific functions such as finance and human resources), the IFRC may have to be asked to supplement the surge. A complete "map" of what competencies should be maintained at what tier (if not already done) should form part of the POA to be developed after this review.

If ERUs are required for service delivery (or large teams for support functions such as base camp, logistics, etc.), it is proposed that NS within the region are given first refusal to deploy, if they have the recognised and qualified capability at all tiers (such as TLs at Tier 3 if needed). National Societies from other regions should then augment and support as required (say, by providing kit or human resources or deploying full teams if needed). If there is no suitable capability in the region, or if the situation warrants more surge capacity, then Geneva will coordinate the deployment of other teams from around the world.

What is important to note in this proposed system is that surge capacities are NOT seen as regional or global – there is no such "two-tier" system of the tools. Individuals are qualified in tiers, but can come from anywhere, and should not normally be deployed based on where they come from, but rather on their level of competency and suitability for the role.

Level	Description (to reflect in SOPs) ⁷⁶	Classification process	Decisions on surge	Types of surge	Criteria for surge deployment	
White Very small	Single incident, limited NS only affected		none	None	none	
Yellow Small	Single country, small area Max. 10,000 affected May require DREF	NS + advice from CCST Region can challenge	Region based on NS request	Single manager with DREF Technical as required – single advisors	 existence of unmet needs ability to have 	
Orange Medium	Single country Max. 100,000 directly or 500,000 indirectly affected May require DREF or EA	NS + Region Geneva can challenge	Region based on NS request or Region analysis	Single manager or small team with DREF or EA Technical as required – advisors or small teams/units	required effect - proximity (efficiency) - preference	
Red Large or mega	Single or multiple countries > 100,000 directly or 500,000 indirectly affected Will require EA or EAs	National Societies + Region Geneva to ratify	Region based on NS request, Region or Geneva analysis	Management and coordination team for EA Technical advisors, coordinators, teams and units as required	of NS - cultural compatibility - SCT can be deployed separately	
Blue Protracted	Triggers for key events or spikes pre-identified	National Societies + Geneva	Region or Geneva	Fully flexible according to need	by the cluster / HCT	

Table 10: Summary of the proposed classification, surge deployments and capacity decisions system⁷⁵

Types: protracted and neglected (slow onset or chronic)

Triggers for considering the deployment of surge capacity during slow onset or chronic emergencies as they emerge, are very difficult to determine, especially as these situations are often under-funded, with little incentive for sending NS. However, it is recommended (and seen as vital for the credibility of the Movement) that this issue be given serious consideration in terms of the POA for this review.

⁷⁵ This representation is designed as a guide only – to be confirmed in the global SOPs

⁷⁶ In all cases, if few or no other actors are present, the Level may be increased even when the numbers affected are smaller (i.e. based on analysis on unmet needs)

Triggers might relate to IPC statistics (x% of a population at IPC 4), or climate change data (forecast of *El Niño*), or even simple numerical data (people displacing from a particular area) or alerts from established early warning mechanisms; what is important is that once agreed, the triggers are activated and result in genuine consideration and decision-making. It is possible to consider triggers such as media attention, although in reality this is always too late.

Rationale for deployments

Decisions over which ERUs would be mobilised in any particular context would adhere to principles to be agreed in the SOPs. ERUs will be mobilised by the Regions (although the centralised alert system is well known and should be maintained); these would not be RRUs, but ERUs deployed by a Region. The decisions about which ERUs to send should adhere to strict and well-known criteria, such as follows⁷⁷:

- existence of unmet needs
- ability of the ERU to have required effect
- proximity (efficiency)
- preference of the affected NS
- cultural compatibility.
- NB: SCT can be deployed separately by the cluster.

Also, various assumptions (operating modalities) should be applied:

- Regions will be responsible and accountable (at Director level) for all surge deployments.
- Regions will call upon appropriate surge resources, wherever and whatever they are, to achieve the required operational effect.
- Regions and Geneva will collaborate to support the affected National Societies.
- Sending National Societies will ensure personnel, teams and units are sufficiently qualified and equipped.
- Geneva will apply, and enforce, standards of competency and accountability, and run the alerts system.

The P&Rs must be respected during emergency response, and this includes for surge capacity deployments. It should go without saying in this report that humanitarian impact and the presence of unmet needs should be the principal reason for deploying surge capacity.

There are times when NS deploy bilaterally (in direct support of the affected NS, bypassing the IFRC decisionmaking), or even unilaterally. This can be for a number of reasons, such as a need to maintain profile for the domestic audience (for fund-raising purposes), pressure from donors who fund the capacities, or an arrangement with their own government (under the auxiliary role). Such deployments, if justifiable on the grounds of need, accountable and in support of the affected NS, should be brought into the coordinated Movement response; ideally, the propensity for certain NS to deploy in their own region will become known, and therefore can be predicted and planned for.

However, deployments of NS surge tools should not be tolerated on a unilateral basis (without the consent of the affected NS). It will be incumbent upon the receiving NS to ensure that they do not refuse deployments at the expense of the affected populations; the P&Rs are very clear on the consequences of unsolicited deployments and donations and these need to be applied.

12.2. Development of a competency-based surge framework

For the purposes of this study, the following definitions are used:

Competency

The ability of an individual in skills, knowledge or attitudes related to their role or function. Examples of skills are technical, managerial and administrative; examples of knowledge are humanitarian systems, contextual knowledge; examples of attitudes are conduct, principles and inclusivity..

Tier or grade

The level to which an individual is qualified in their various competencies; it will impact the seniority of the role they can perform within a team or operation. There will be 3 tiers (or grades – to be decided) of competency, simply called 1, 2 & 3.

Function

The affect which an individual, unit or team has on an operation. Examples range widely and include technical, managerial, support and administrative: financial management (of the operation) and medical services (to an entire community) are both functions (see also Table 11). **Role**

The specific job (as described in a job description) of an individual in a team, unit or operation. Examples include "accountant", "nurse", "warehouse logistician", "team leader" and "Movement coordinator".

⁷⁷ this list is examples of criteria which may be developed more fully in the SOPs

The current system of "unitary" surge tools⁷⁸ is based on a rather small number of NS "owning" the official ERUs and participating in the FACT training/roster. The RDRT/RIT system (although recognised as a "global" tool) is largely separate from this, and not even well streamlined between different regions. This no longer works well enough, as it results in surge capacity functioning below potential.

Additional capabilities (functions, tools or teams), which do not fall into the basic ERU system, are being developed in an unplanned and organic way (examples range from smaller tools such as the HES, to "new" areas such as gender and diversity, protection⁷⁹ and community engagement). While capacity exists in many NS (anything from a skilled and experienced individual, to the ability to field large units, such as medical facilities), too much of this potential is insufficiently recognised and used by the Movement.

Recommendations:

- a) Build and enforce the competency framework (tiered at technical, managerial and leadership levels), for the training and qualification of all surge personnel.
- b) Confirm a comprehensive system of functions and capabilities (units, teams or individual), which can be held accountable against agreed performance management criteria.

Explanation:

It is recommended to move towards a unified, multi-tiered competency based approach across a wide range of skills and specialities. The functions would be grouped into three pillars (see table below 11). GRTs would be re-configured to reflect more flexible set-ups, including the profiles needed to match better what is needed in any given situation.

This would mean a thorough re-configuration and re-branding of the FACT⁸⁰ and RDRT/RIT (management functions) concepts, which would probably mean (eventually) finding a new term for a combined version of these functions, unrelated to where the individuals come from or how they are deployed. This review has concluded that the benefits of a "new face" on Movement surge capacity – for example in terms of regaining National Societies' trust in the IFRC decision-making and accountability – outweigh the loss of brand-awareness outside the Movement.

Leadership, coordination (internal and external), needs assessment, and support service capacities would be reinforced commensurate with the needs of different types of emergency (such as sudden onset, or protracted crisis spike). The concept of ERUs would remain as a Tier 3 competency, but could be deployed for an "orange" response, meaning, where the IFRC region is fully in charge. This format makes sense for service delivery functions, such as medical or WASH services, and if necessary relief distributions, but not for support, coordination, etc.

Support services could be configured into ERUs for the purposes of standards and training, but deployment would need to be in an amalgamated form, ensuring not only sufficient capacity but also coherent support for HR, financial, logistics and other functions. This may also entail de-coupling the process for deploying human resources from the kit and funding to allow the most suitable HR to be deployed independently from the NS which funds and equips the deployment.

Leadership, coordination and cross-cutting	I Support services, P&A	Technical assessment and service delivery functions
Civil Military Coordination	Administration	Economic security/markets ⁸¹
Community engagement	Base camp ⁸²	Emergency clinic ⁸³
Field coordination	Emergency human resources	Emergency hospital
Green response ⁸⁴	ENA methodology	Emergency shelter
Humanitarian coordination	Finance	Forensics
Humanitarian diplomacy	Information management	Multi-sector cash / CTP
Inclusivity, gender & diversity	IT Telecom	Protection

Table 11: Functions framework for surge tools (including services)

⁷⁸ A unit might be an ERU, or a technical unit, which train together and to some extent in isolation from others.

⁷⁹ Recognising that the existing RFL Pool (joint ICRC/NS resources), available for surge in that field of protection, is not new.

⁸⁰ It is recommended that the term FACT might be changed, to signal such a significant change

⁸¹ Covers registration, relief distribution (food, shelter & NFI), supply chain and CTP

⁸² Needs to be adapted from the "all or nothing" current model to be more flexible (IHP)

⁸³ new names as per the WHO EMT system

⁸⁴ Some of these competencies will often be integrated into service delivery units (e.g. PSS, protection, G&D with medical or PH teams; multi-sector cash expertise with relief, shelter or PH teams, etc...)

International disaster response law	Logistics	Psychosocial support (PSS)
Movement coordination	Media & public communications	Public health & hygiene
NS support / auxiliary role	Monitoring & evaluation	Relief distribution
Operational leadership	Reporting & RM	RFL
Security & crisis management	Volunteer management	Sanitation
Shelter cluster coordination ⁸⁵	Welcome service	Surgical unit
Transition/recovery		Water supply ⁸⁶
Urban response		

12.3. Tool development/requirements

Since their development, GRTs such as FACT, ERU and HEOps have been consistently and increasingly deployed in the wake of disaster. While this review recommends the creation of a new approach, based primarily on competencies, this does not mean that the existing tools should be abolished. They should instead be integrated within the new competency framework, so that the necessary resources can be deployed as previously (as an entire tool or team) or in a more modular fashion, or as individual profiles. There is a need to improve the current tools and make them are fully effective, without destroying their recognised strengths. A key requirement for the tools will be that they become more adapted to an environment where cash and vouchers are the "norm" in aid delivery.

Some general improvements to the larger tools (mainly ERUs for service delivery) might be to:

- ensure joint training or pre-deployment collaboration between ERUs with complementary functions (such as health and WASH, MSM and water supply, or relief and health),
- attach NS counterparts to all ERU TLs where possible, or other key roles;
- ensure, in large responses with many ERUs, the appointment of an ERU coordination role or otherwise ensure inter-ERU contacts;
- be more systematic about coordination between ERUs deployed bilaterally and those centrally mobilised (with a more inclusive approach, and regional control, these differences should eventually disappear);
- adapt the logistics ERU to include additional profiles, such as market/supply chain analysis as standard; and
- make base camp ERU available as a small module.

In addition, some suggestions about the small tools or modules are to:

- develop SOPs for key small modules (already in place for some), such as community/public health, protection, PSS, HES, CTP/markets and CEA;
- ensure that all key small modules are adopted by sufficient NS to guarantee the availability of capacity; at least three NS or ideally at least one in each region should be encouraged to "own" each module;
- develop the "small module" concept to include more of the support services ENA, monitoring and evaluation, information management, emergency human resources, finance (mainly IFRC people), media and public communications;
- reconfigure the ITT ERU as a small module; and
- develop a coordination module, to include Movement, external, civil-military coordination and National Society support (individuals could come from different NS, as with all the small modules).

A common complaint among interviewees was that many NS lack awareness of the system of GRTs, including what is available to them in case of emergency. While active dissemination is always useful, the existing information on FedNet and DMIS is usually sufficient once it is found. The findings and subsequent POA from this review may provide an opportunity to push reminders to all NS about where to find out more.

Recommendations:

- a) Revise the functions, composition and performance management norms for non-technical and coordination surge team members (as separate from the development of ERUs).
- b) Describe and develop the complete range of "emergency response services" as a standard model for specialist and bolt-on components (for example CTP, CEA, PSS and many others).
- c) Ensure all technical functions and services are sufficiently qualified and resourced, from a range of National Societies .
- d) Replace FACT, RDRT, ERU and TL qualifications with Tiers 1, 2 and 3, as appropriate.
- e) Standardize funding and deployment mechanisms for all surge personnel.

Explanation:

⁸⁵ As called upon by global cluster

⁸⁶ e.g. Modules for 10,000 people, which can be multiplied

As stated above, it is recommended to revise fundamentally the roles and composition of FACT, as a highly flexible tool to bring the required competencies to bear in a timely fashion. In a new version of "FACT", there is a need to separate the leadership, coordination and assessment functions, in terms of training/certification, role within the team, and performance appraisal, and to sequence deployments as needed. It would also be advantageous to include support services systematically (usually IFRC rather than NS personnel, so financial support from the DREF or EA will be needed), and to ensure that resources for coordination and cross-cutting issues are considered from the outset.

The range of service delivery tools should be maintained, but with more flexible membership, and tighter quality control (such as WHO EMT definition). This would entrust the IFRC secretariat with holding and maintaining standards of the ERUs (based on the SOPs, the competency framework, etc), but that any National Society would be eligible to hold such tools. For example, the health response tools are classified according to WHO emergency medical team standards, and National Societies with these response tools have to adhere to the standards; by the same token, all NS which do so comply should be equally eligible to participate in the system.

The individual ERUs may need to be re-defined and categorized according to the various function requirements. Individual members of ERU teams must be qualified appropriately according to the pillars of competency, and to the required level. This might mean that a medic who is highly skilled technically, would only need to be Tier 1 qualified as surge staff, as they would have an internal role without management responsibilities. The head nurse, or team leader, would need to have a Tier 2 or Tier 3 qualification.

It should be possible to break down all of the large service delivery ERUs into smaller building blocks when required, and still deploy them on a very large scale for "Red" contexts; some ERUs already have these capabilities, but do not seem to be well known among National Societies. In this way, a WASH ERU might be just the water supply component, or a combined unit with water supply, community heath, sanitation and HP components. Similarly, an emergency clinic ERU might be a small mobile clinic or a full polyclinic.

There may be a need to further develop a new system of "tools" (not necessary separate ERUs but rather groups of functions and capabilities to be inserted into response mechanisms). Work is advanced to do this for CTP (including market analysis and supply-chain management), but will need to be developed⁸⁷ fully to reflect the Movement's ambition to be able to scale up quickly and in a majority of response environments.

Service delivery tools will need to consider:

- the ability to "bolt together" several components to form larger units e.g. across the WASH and shelter spectrum
- how to adapt to working in urban and non-camp settings (including CEA requirements, engineering, multiplestakeholder negotiations)
- the ability to plan and implement from multi-sector assessments, including market and supply chain analysis
- public health capacities which can fit with medical, WASH or CEA functions, among others
- managing the operational / technical interface, including between the sending and receiving NS.

12.4. "Do no harm" and protection

It is clear from the growing body of evidence from ALL types of disaster and crises that involve mass population displacement, that the safety and security of the affected populations (especially but not only vulnerable groups, such as children, women and disabled people) is a key – and growing – concern. The incidences of violence (including SGBV) and intimidation against individuals and groups in these communities (whether or not linked to armed conflict) may or may not have increased recently. What is clear is that reporting of such cases has increased, and with this awareness comes the demand for the humanitarian community to do all it can to prevent such violence, and to support those who are affected. There is a growing risk of child protection issues, and sexual or other forms of violence against vulnerable groups, whose needs the Movement is responding to or whose protection it is responsible for. However, without sufficient safeguards in place, even Movement staff and volunteers could be perpetrators of such violence.

Recommendations:

- a) Enforce the Code of Conduct (including behaviour towards affected population) for all surge personnel.
- b) Align the Movement in competencies, training and programme design for "protection-related activities" and prevention activities.
- c) Deploy appropriate expertise with the initial surge team (for instance expand the concept of the ICRC/NS RFL pool).

⁸⁷ It may need additional momentum and support from IFRC and large NS

Explanation:

Staff and volunteer conduct

Effective internal measures such as policies, training, codes of conduct and disciplinary systems (including for Prevention of Sexual Exploitation and Abuse safeguarding and basic "Do No Harm" concepts) should be pre-requisites for any NS wanting to take part in responses outside their own country, and so form part of syllabus development of all tiers of competency.

Programming

It is recommended that the entire Movement (according to needs, abilities, security, access and mandate) prioritise protection⁸⁸, to ensure that the appropriate capacities and skills are available during response involving surge capacity. The ICRC can be called upon for support, given their expertise in this area.

The Movement's surge capacity should prioritise several aspects of protection services (this is a non-exhaustive list):

- **RFL**. The ICRC supports National Societies on a regular basis, and has provided surge resources in emergencies (including when NS or IFRC are leading).
- **Camp design and management**. Wherever involved in running camps or sites for displaced people, ensure that access, facilities, shelter, lighting, security and staffing are suitable to the culture and conditions.
- Facilities. Ensure that safe and secure access is possible for everyone to any sites, facilities and programme offices.
- **Conflict sensitivity**. Potential dividers and connecters should be considered for any proposed activity, including in assessments.
- **Case management and sign-posting**. As part of the CEA function, systems of "sign-posting" must be researched and where possible made available so that confidential health or psychosocial support can be accessed with ease. If nothing is available, consider the need to set something up.
- **Status**. There is a need for access to referral to any local system that helps people confirm their status (including retrieving or replacing identity documents, title deeds and asylum seeking process).
- **SGBV**. Allocation of PSS and Health professionals may be appropriate, as well as the identification of appropriate centres/institutions for referrals and signposting (health centre, specialized agencies/organisations).

12.5. Coordination (Internal and external)

Movement coordination has long been considered an important element of any response⁸⁹; however, investment in the availability and professionalism of this competency has not kept pace with the requirement, as more National Societies get involved (multi-laterally through the IFRC, bilaterally in direct support of NS, or in some circumstances unilaterally as part of their own national government's initiative). There is still (despite progress through the SMCC) insufficient pooling of coordination resources between the ICRC and the IFRC.

Coordinating with other organisations involved in surge responses outside the Movement (humanitarian actors; the government; the military; the private sector; the public via social media) is increasingly important, as different actors take part in surge responses. This is a key competency but one which appears to be lacking in practice within the IFRC's surge response system.

Recommendations:

- a) Apply adequate dedicated resources to both Movement and external coordination functions / competencies, at all tiers.
- b) Develop coaching, mentoring and shadowing opportunities for coordination career path development.
- c) Deploy appropriate dedicated expertise with the initial surge team.

Explanation:

It is recommended to draw up specific competency and training/experience materials for Movement and external coordination above and beyond what already exists. As there is already a lot of capacity within the Movement, this would not need to start from scratch, but rather bring the existing capacities and systems into a single coherent whole, using highly skilled individuals from National Societies, the IFRC and the ICRC.

External coordination is more difficult and complex, involving different stakeholder groups – civil/military; UN liaison; private sector, etc. All of these would need to be included in training, but also in coaching, mentoring and shadowing

 $^{^{\}rm 88}$ E.g. within the SMCC plan of action

⁸⁹ The SMCC plan of action (output 4.2) envisages additional coordination roles

programmes to bring individuals up to par in practical application of how to coordinate Movement actors, and to represent the "Red" response to the wider community.⁹⁰

Ideas to augment the external coordination capacity might include:

- exchange programmes between Movement surge and UNDAC trainers and trainees
- participation on UN courses, such as UN CMCoord
- participation in global cluster fora (or increased participation, if this already happens beyond emergency shelter)
- systematic contribution to 4W mapping (it may be necessary to minimize duplication of reporting by assimilating formats)
- work with the ICRC to expand the "external coordination" competency of their RDM to all parts of the Movement
- split up the roles of Movement and external coordination, assigning separate resource to each during the early
 phase of a response.

12.6. Needs assessment

Basing responses on evidence (ideally baseline as well as impact) is not only a key requirement from the humanitarian perspective; it is becoming a compulsory basis for successful dealing with donors, especially governments. However, despite the Movement (National Societies) often enjoying unique local knowledge and proximity to affected populations, the ability of the NS and the Movement as a whole to gather and analyse accurate needs assessment data has – according to available evidence and perceptions – been falling behind in recent years. One accepted aspect of this is that it is impossible for current FACT team members to focus on both assessment and coordination, which require different skill sets and different approaches. What is also required is additional support at a local level in order to enhance the quality of data gathered and analysed, and optimize the advantage of local presence and networks.

The changing humanitarian environment adds to the challenges of high quality ENA. For example, as more emergencies include large urban populations, particular methodologies will be needed to ensure that assessments take this into account. Because ENA needs to be multi-sectoral, it is more challenging to have multiple technical experts doing separate assessments that are difficult to bring together.

Recommendations:

- a) Apply latest ENA methodologies (from ENA WG) by surge personnel.
- b) Deploy appropriate ENA competency with the initial surge team.
- c) Train first responders in basic ENA methodology, including disaggregation of risks, contexts and vulnerable groups.

Explanation:

It is recommended to reassess how surge capacity resources undertake needs assessment. Some examples of how this might take shape include;

- employing information management capacity for better risk mapping in vulnerable regions
- dedicated resources in the first wave of surge (FACT)
- support to disaster-prone NS to improve the gathering of baseline data, and more intensive training at branch level to allow NS volunteers to advance in assessment during the very early hours and days after an event
- use of specialist external resources or information (e.g. ACAPS)
- incorporating market analysis, especially when in an urban setting
- collaboration (of SIMS) with other organisations, such as NGOs, to produce unified assessment maps
- use of specialized information management organisations and technology to support primary data gathering
- improvements to the phased system of assessment to allow for very early decision-making based on rough initial data, which are then periodically refined
- Increased participation in coordinated assessments to minimize evaluation fatigue and benefit from other assessment capacity in place (such as MIRA, inter-cluster, cluster, REACH assessments), and
- link assessment with monitoring and evaluation plans and procedures.

12.7. Preparedness⁹¹ and training

Some of the standards of training for the GRTs and surge capacity are excellent (both the curricula and the way in which the training is conducted), and serve as models throughout the humanitarian sector. This should be celebrated.

At the same time, the standards of preparation and training of surge capacity can be very varied, whether between different tools, sectors, regions, National Societies or disaster types. This may be due in part to the lack of a dedicated central training structure or capacity within the IFRC secretariat (for emergency and surge capacity). Training is developed by consultants, and overseen by a wide variety of people in different roles, who are not necessarily professionals in training.

The key issue of inclusion (all NS being able to maximize their potential involvement in response – including surge capacity within and outside their own country) – must be addressed as a matter of urgency.

Organisational preparedness (related to surge capacity, rather than as a general issue) will always focus around predisaster agreements, partnerships and capacity building initiatives between National Societies. While it is difficult to standardize this (contexts, partnerships are all different), a revamp of the GRT system to be more inclusive, adaptive and responsive will help promote a mentality that ensures better preparedness for seasonal or high-risk threats.

Recommendation

- a) Create a surge training unit within the IFRC (Geneva and/or regions).
- b) Develop a core training curriculum (online and courses) for each function and competency.
- c) Reinforce and standardize a performance-management system, based on appraisals post-training, post-mission and after promotion to the next tier.
- d) Introduce a system of partnering and sponsoring to bring more National Societies into the surge responses.
- e) Develop methodology to incorporate response lessons into preparedness planning for cyclical and season disaster risks.

Explanation:

It is recommended that the system must preserve the high levels of preparation and good quality training which is currently done for many ERUs, and to some extent FACT and RDRT, while making the training more flexible, consistent and efficient. Far more online training materials should be made available, in all core topics for Tier 1 training, and in theoretical aspects of all tiers.⁹²

One recommendation is a training capability (perhaps a small unit split between Geneva and the Regions) as part of the IFRC surge desk – and linked to technical teams as required – to ensure commonality and quality control. While this needs to be an IFRC facility, it must get the support of National Societies (including any sending NS who have a stake in Tier 2 or Tier 3 capacity building). A standard annual training calendar would also be very useful.

To complement the training, there is a need for a system of comprehensive and genuine performance management (including end-of-mission appraisals). This will enhance performance standards and operational accountability, as well as strict compliance and professional human resources systems to ensure that the training achieves the desired effect.

Today only about 20 National Societies own or regularly contribute to "official" ERUs. More are involved with sending FACT and RDRT/RIT delegates. To enhance inclusion of all NS in the Movement's surge capacity system, deliberate efforts must be made to bring many NS into it. Additionally efforts must be made to enable good NS staff members and volunteers to take part in the training programmes and deployments. A system of partnering and sponsoring between NS will work, if it is quality controlled from a central financial fund, and not left as an ad hoc system. Examples of how this might work include:

For Tier 1 competency – all are responsible for their own people, based on common curricula

For Tier 2 competency – IFRC regional disaster management teams identify people, assist with training, etc

For Tier 3 competency – centralised plan should be maintained by the Secretariat, executed by a combination of the IFRC and (in whole or in part) by member National Societies. The IFRC at the regional and Geneva level identifies people for "sponsoring" by NS with funding capacities, including training, deployment costs etc.

⁹¹ Refers to organisational preparedness, rather than community

⁹² How to prioritise the development of e-learning resources will form part of the Plan of Action

All National Societies with existing programmes / partners should be willing to undertake some or all of the following, albeit in a planned and centrally controlled way:

- sponsor good candidates from partner NS for Tier 2 and 3 training
- maintain some Tier 3 capability, and make it available when needed
- contribute to DREF and/or EAs in their areas/regions of interest.

All National Societies with existing large-scale ERU capacity should be willing to undertake some or all of the following:

- Take on the technical lead role, at the regional or global level, for a core competency.
- Maintain equipment and/or stocks for a core competency.
- Lead on training, and bring in potential Tier 2 and Tier 3 candidates from other National Societies.
- Have a role in performance management for all qualified personnel deployed.

Another important issue that comes up is that of continuity: if multiple rotations are required, how to ensure capacity is available (from a single National Society, or group, or different NS providing separate rotation teams – there are several options). In the case of regional decision-making (for instance concerning an orange level event), it may be necessary to put Tier 3 competencies on stand-by to ensure sufficient rotations.

More attention should be paid to lesson learning in contexts of cyclical or seasonal disasters, as well as more investment in preparedness. It may be possible to learn from the UNDAC practice of preparedness visits, or build on work done in the Americas to prepare for the hurricane season, or in the Asia Pacific region for the typhoon season. These are not new ideas; however decentralization of the IFRC has made sharing of experience between the regions more problematic – a united surge capacity system of GRTs is an ideal way to bridge these gaps.

12.8. Support services (including information management)

The need for surge capacity support to affected NS and the IFRC system in emergency human resources, finance, administration, reporting (and volunteer management) to match the excellent logistics capacity that already exists has become very clear in both DREF and EA operations in recent years. Recent initiatives (for example: the stipulation in the Americas region that all DREF operations must be overseen by a manager with IFRC finance skills; or the Canadian Red Cross support for Operations Managers in the Africa region) are going some way to fill this gap for smaller operations; ironically, the largest operations risk having little support service capacity in the very early days.

Recommendations:

- a) Deploy adequate finance, administration, human resources and other support service profiles in the initial surge teams.
- b) Review the DREF and EA/EPOA mechanisms in alignment with the outcome of this review.
- c) Develop modular options for key support services, including ITT, logistics, human resources, base camp, communications, information management, monitoring and evaluation, etc., as required.

Explanation:

It is recommended that the support services pillar of the competency framework should receive as much attention in revising the GRT system as the services of other pillars. Whenever alerts go out for "FACT/RDRT"-type capacity, the IFRC at the appropriate level will need to make available a "rapid deployment" resource in finance, RM and human resources as a minimum (these usually cannot be NS personnel, as knowledge of the IFRC systems is required). This will require funding support, but each region may be required to ensure that they have sufficient capacity within their team to deploy rapid response people.

While it is not optimal to develop ERUs in these competencies, there is a need make available individual team members, right from the beginning of response operations, and ensure reporting and financial management throughout the response (so as to develop strategies for phasing out surge capacity without compromising standards). Existing logistics ERU capacities will need to streamline into the overall support service surge capacity (possibly add on finance, administration and reporting). The support service competencies will also exist at all tiers, with NS providing their own people at Tier 1, and the IFRC ensuring people are skilled up to Tiers 2 and 3. It is important to set up rotas of availability for large operations (similar to the ICRC's internal rotas for the RDM).

To manage surge capacity and then transition capacity in human resources, it will be vital for the IFRC to devise SOPs to allow regional human resources teams to ensure continuity in key competencies without major gaps. Some examples of functions of the emergency human resources team would be to:

- work with sending NS to ensure surge teams and delegates are well managed
- ensure the consistency of standards, and coherence of T&Cs
- work with management to develop longer-term team setup within the first week, and get vacancy notices out within two to three weeks at most (tight indicators will be essential here)

- work to ensure leadership roles have continuity for at least two months (whether a HEOps, or a team leader or manager from a NS) in the first instance
- work to expand the overall surge network, by synergizing the IFRC and NS capacity banks
- work to ensure that transition-phase human resources are in place
- work to raise the profile of emergency HR as a function in surge capacity as people are the key resource, it is not optional to have proper systems in place to recruit and deploy them.
- expand the network of human resources professionals within the NS who are familiar with IFRC HR systems
- work towards a sustainable funding mechanism for IFRC surge personnel in disaster operations (DREF, NS or core funded).

As noted elsewhere, the mechanisms of DREF and EA must also be further reviewed to ensure compatibility with the entire surge system.⁹³

Information management

This vast area, which comprises many aspects, has grown and developed organically over the last decade within the Movement, including in disaster management and emergency operations. It is no exaggeration to say that the quality of information management can determine success or failure in a response, or that investment in it at the Movement (despite the good quality of SIMS and the long-standing DMIS) has recently fallen behind.

Information management (from mapping and data crunching to donor reporting, to strategic analysis and advice⁹⁴) is an under-appreciated but vital part of the humanitarian landscape, and there is new investment in this through the Project GO initiative. "The field of disaster response is experiencing massive disruptive change from advancing technology, increasing computing power, and ubiquitous internet connectivity... The proliferation of social media platforms and the profusion of public and proprietary data information and imagery combine to create a rapidly shifting data landscape that offers many opportunities..."

Among donors, affected communities and the public alike, there is growing demand for real-time information on situations and response; social media allow (unedited) images and opinions to reach the world very quickly.

Recommendations:

- a) Incorporate Project GO into the thinking on information management in surge capacity.
- b) Make available information management analytical support to decision making as part of the initial surge team.

Explanation:

It is recommended that the ongoing Project GO should be incorporated into the thinking on information management in surge capacity – including by adapting the existing DMIS and SIMS systems, and by expanding the available trained personnel.⁹⁶ The Project GO platform (formerly the Emergency Operations Centre project) is aimed at sending and receiving NS, IFRC in-country teams and delegates, surge teams from NS, as well as strategic leaders around the Movement. It aims to provide a single and simple platform for disaster-response information.

As well as the high-tech resources which already exist (SIMS, ACAPS), it will be necessary to have more information managers to act as advisors to operational leadership – in a similar way as the ICRC profile of information manager attached to the Security and Crisis Management Unit.

12.9. Transition planning (for recovery) and protracted or neglected crises

The need to consider transition beyond the response phase goes almost without saying in the humanitarian sector; how to make this a genuine reality when such a preponderance of funding and resources are only available for the immediate, high-profile, phase, is another matter. Struggles to define, let alone implement, community resilience, disaster resilience, recovery and reconstruction have plagued the sector.⁹⁷

Especially difficult is how to use surge capacity appropriately in a chronic, protracted or slow onset situation, where the "phases" of preparedness, response, recovery and resilience all co-exist simultaneously, and spikes in need and activity can happen for various reasons, and with or without media attention. With a projected increase in

⁹³ No attempt is made here to explain or go into full details of this part of the recommendation; however, it should form part of the POA discussion

⁹⁴ also includes PMER and PMEAL

⁹⁵ Project GO Final Report: Rivanna Strategy, June 2016

⁹⁶ Further recommendations and plan of action on this will need to await the outcomes of the Project GO process. See the *Project GO Deliverable Final Report*: Rivanna Strategy, June 2016

⁹⁷ These terms are used variously by different organisations

humanitarian needs stemming from the impact of climate change (meteorological disasters, food security crises) adding to the environmental revolution now affecting the sector, resource planning in surge capacity for the next decade must consider the need for capacity above and beyond the traditional sudden onset, high profile, disasters.

Recent contexts that have stretched the capacity of the Movement's surge system are the migration crisis (including in Europe) and the Southern Africa food crisis. The former has resulted in long-term camp situations, where the Movement has to work closely with government and NGOs to provide a wide range of services in a chronic, uncertain and volatile situation. FACT and ERUs have been periodically in and out, responding to spikes in media attention or changes in the political environment, but no necessarily dealing appropriately with the changing humanitarian needs. In the latter context, the entire humanitarian sector has been caught out with inadequate resources and commitment, so that (as often the way in food crises) it has been a case of far too little, too late.

Recommendations:

- a) Define the role of, and ensure resources for, surge capacity in transition planning and early recovery.
- b) Apply consistent criteria for the incorporation of transition and early recovery planning in surge capacity terms of reference.
- c) Develop human resources systems that can bridge the gap between surge deployment and "normal" recruitment, to facilitate transition phase human resources.
- d) Apply recent learning from protracted crises and climate-related disasters to surge capacity system.
- e) Allocate in advance funds specifically for response to neglected and protracted crises (e.g. similar to DREF).
- f) Identify triggers for deployment (and stand down) of surge capacity to spikes in protracted crises.
- g) Identify criteria, mechanisms and funding modalities for extended deployments of surge capacity in case of protracted needs.

Explanation:

Transition (to recovery): It will be necessary to define the role for surge capacity in transition planning carefully – to use the profile of the emergency phase to ensure (for example) transition-phase – and if possible recovery-phase – human resources are made available, while at the same time, making sure not to divert the attention of donors and public away from the acute humanitarian needs of the emergency phase.

It is suggested to allocate funds in advance (e.g. as part of the DREF pot) for response to transition-phase planning, as well as for "silent" emergencies and protracted crisis. ⁹⁸ There has been discussion in the past about how to make high-profile easy fundraising opportunities work in favour of resource mobilisation for neglected emergencies. Although this may not be possible directly, mega-disaster situations are ideal for capacity building and ensuring that surge rosters are replenished.

It will be necessary to revisit documentation on FERST and RAT deployments, including roles, competencies and SOPs; also to ensure that surge personnel with these skills are deployed early enough.

Protracted crisis or slow onset disasters: It is recommended to apply recent lessons from protracted crises and climate-related disasters⁹⁹ to build into the surge capacity system mechanisms to deploy surge capacity outside of the "normal" sudden onset contexts. Some adaptations to current training curricula would be sufficient to deal with the content required. Especially important will be to agree on decision-making, analysis, and triggers for both scale up and scale down.

Examples of how these lessons may be incorporated into the forward planning for surge capacity could include:

- ensuring that small teams (or individual delegates) are available for low-key assessment as soon as early warnings have been triggered after poor rains or harvests;
- investing in pre-disaster discussions with the various NS in vulnerable regions, and sharing the costs of food security and market analysis advisors, who should be available on a rolling basis;
- deploying key competencies (nutrition, public health, water supply) in low-cost packages;
- negotiating with key donors for multi-year funding for key protracted crisis surge capacity including medical or water and sanitation units or "protection" capacity, as well as coordination and information management experts;
- ensuring sufficient HEOps and D-HEOps positions for a rolling presence of leadership capacity;
- collaborating with the ICRC in security management (including coherence of systems) and soft skills in conflict-affected contexts;
- pre-arranging the availability of Tier 3 qualified individuals, and/or large teams (including technical ERUs) for deployment into protracted crises in case of sudden deterioration (e.g. each medical ERU "owner" might be on

⁹⁸ Details of how to achieve this will form part of the POA – input from the clients will be essential

⁹⁹ *Provention,* 2013: Slow-onset disasters: drought and food and livelihoods insecurity Learning from previous relief and recovery responses; FAO, 2010: Towards ensuring food security in protracted crises: recommended actions

call for a few months, at a time) ready to deploy with the support of all the others to supply additional human resources; and

• deployments to protracted crisis contexts should also form part of the D-HEOps and Tier 3 L and D pathways.

12.10. Cross-cutting issues

Community engagement and accountability

Now that the majority of affected communities have access to social media and the internet, it must be taken for granted that they have access to information, complaints mechanisms and choice concerning the assistance that is offered to them in times of crisis. So far, it is largely through community engagement that the humanitarian sector has recognised the importance of holistic planning (rather than sectoral), and of the "invisible" needs of safety and security.¹⁰⁰

Since the early days of "beneficiary communications", the Movement has made huge strides in ensuring that affected populations are not only informed about the response but also have a real role in ensuring the implementation of appropriate, effective and responsive plans. This progress needs to be incorporated fully into response mechanisms, and especially into the (international) surge capacity which so often is perceived as "taking over" a response from the local level.

While CEA is vital in all instances, it is even more so when it is necessary to bring community volunteers into the response, as can happen when the affected populations are refugees or migrants who do not share language or culture with the responding National Society.

The WHS adopted the phrase "participation revolution" to sum up the profound changes that are happening and must happen in the relationship between affected people and those who attempt to assist them in crisis. It will be essential to build a new approach into response planning and this is not done through training or policies alone.

The Movement, and particularly National Societies at the local level, are ideally placed to go beyond lip service to participation in emergency response, but it is by no means straightforward and will require in-depth discussion and planning as part of the plan of action. In some ways, this recommendation – that surge teams in the Movement should be leaders of change in community engagement, so that aid is genuinely driven by needs – if fully implemented, will be among the most profound changes advocated by this study.

Recommendations:

- a) Introduce training on basic CEA techniques within surge training courses.
- b) Include CEA skills in the terms of reference and job descriptions for surge teams.
- c) Introduce a common CEA approach in all surge response planning and implementation, based on the IFRC/ICRC CEA guidelines.

Explanation:

It is recommended that training in basic CEA techniques is included in e-learning and training courses for ERUs, Tier 2 and Tier 3 competencies, etc. and that the CEA competency is included (as a separate expert, or within the terms of reference of a key management position, or both). In this way it will be mainstreamed across surge capacity tools, while also ensuring technical excellence through specialist capacity, which is consistent with international standards. It will be effective over time to invest in Tier 1 capacity in CEA (including branch volunteers), where local knowledge is paramount. The new joint IFRC/ICRC CEA guidelines – developed for all programming, not just disaster response – should be adapted and included in the expected skills of managers, team leaders and coordinators in surge teams (as reflected in their terms of reference and job descriptions), in addition to being the basis for introducing a common CEA approach in all surge response planning and implementation.

Gender and diversity

One of the most critical cross-cutting issues, this has been under-emphasised by some National Societies in their response activities. Surge capacity must ensure that operations are planned according to the real needs of different groups, as well as adhering to accepted minimum standards of the Movement, donors and the humanitarian industry.

It is becoming normal practice, and is expected by donors, that assessment and intervention data are disaggregated for sex, disability and age whenever possible, and this is being adopted by most National Societies involved in disaster response. At the same time, surge capacity personnel (including leadership functions) should be prepared to ensure gender and diversity issues are mainstreamed into response planning and implementation. It is especially important that gender and diversity are not treated as an isolated "activity", or left as business as usual. In a similar

¹⁰⁰ see above under Protection

way to community engagement, the mainstreaming of gender and diversity requires a new approach which looks to consult the relevant groups much earlier in the planning process, rather than relying on secondary data, or being "self-referential" within the humanitarian community (taking a lead from experts rather than the population).

Recommendations:

- a) Introduce gender and diversity, SGBV prevention and mitigation policies and practices into all training for surge staff.
- b) Integrate disaggregated data for sex, disability and age into assessment and intervention data.
- c) Mainstream gender and diversity, SGBV prevention and mitigation policies and practice across all surge response planning and implementation (for example, integrate MSCs).

Explanation:

It is recommended that all personnel being trained and prepared for involvement in the GRTs or surge capacity in any role should be expected to have similar levels of awareness and commitment to gender and diversity policies and practices to other Movement staff, delegates and volunteers. The IFRC's Minimum Standard Commitments to Gender and Diversity in Emergency Programming provide a good basis for this.

It is recommended that more emphasis is placed on these new approaches – notably disaggregated data for gender and age are mainstreaming into response planning and implementation – in training, performance management and coaching of GRT and surge personnel (e.g. HEOps to take a lead) for all the cross-cutting issues mentioned here.

Environment, climate change

The importance of environmental impact assessment, emissions reduction strategies, etc. in emergency response, is slowly gaining recognition. While this study does not attempt to bring anything new to the debate, it is important to acknowledge that humanitarian surge capacity operations continue to be high impact in environmental terms.

Recommendations:

- a) A Green Response approach should be incorporated within the plan of action to accompany this review.
- b) Develop Green Response checklists for the standard operating procedures / terms of reference of surge tools and teams.

Explanation:

The work on Green Response should be continued and incorporated into the plan of action for this review. The principle of building a surge capacity system that allows for reducing to a minimum the numbers/quantities of people, goods and equipment which have to be moved, as well as the distance (while still ensuring the highest possible quality and effectiveness) is one small example of how this can be put into practice.

Annex A List of individuals and National Societies interviewed

ICRC

Anthony Dalziel Aziz Syed Shah Abdul David Horobin Hexham Manhood Juerg Eglin Laurent Saugy Raul Bittel Sophie Orr Susanne Amsler

IFRC

Alberto Cabrera Alberto Monauzzi Alka Kapoor Sharma et. al. Amanda McLelland Catherine and Cecile **Christine South Claire Durham Daniel Bolanos** Danielle Wyss Diana Ongiti Dorothy Francis Emma Sturrock Erwan Cheneval Farid Aiywar Finn Jarle Rude Inigo Barrena Isabelle Sechaud Jan Gelfand Jassen Slavinsky Jay Matta John Dyer Jonathan Chua JP Taschereau Juan Felipe del Cid Leanne Marshall, Leif Jonsson Lucia Lasso Maki Igarashi Marta Pena Mauricio Bustamente Miki Takahara Mununuri and Malika Nancy Kourdoli Nazira Lacayo Necephor Mghendi, Mathieu Okhee Kim **Omar Robinson Ombretta Baggio Oyungerel Amgaa** Pablo Medina Paco Maldonado Peter Ophoff et. al. Pieter de Rijke Reuben/Alma/Anna/Lucia Ruben Romero Sheu Jeen Lee Steve McAndrew Sune Bulow Tiffanv Loh Umadevi Selvarajah

Head of Security and Crisis Management, Geneva Cooperation Coordinator, Jordan Head of Security and Crisis Management, Geneva Deputy Head of Delegation, Jordan Head of Delegation, South Sudan Deputy Head of the Central Tracing Agency and Protection Division Head of Office, Ecuador Head of Unit for Movement Operations Security and Crisis Management Centre, Geneva

Surge Delegate, IFRC Panama HEOPs, Ecuador (Former Head of DMU, Europe region) Asia Pacific Region Logistics Unit Health, IFRC Geneva EAIOI CC PMER DM, IFRC Geneva Logistics, IFRC Geneva Surge Desk, IFRC Geneva Field Coordinator, IFRC Lesbos Asia Pacific Region RM former Senior Surge Officer, DCM, Geneva Asia Pacific Region RDRT specialist (CRC staff on loan) Africa Region DMU Africa Region Head of DMU EAIOI Head of CC Head of DMU, Americas region Logistics, IFRC Geneva Americas Region Deputy Director Relief Coordinator, IFRC Greece WASH Coordinator, IFRC AP Security Unit, IFRC Geneva Asia Pacific Region IT former Head of Emergency Operations, IFRC Geneva DM Coordinator South America, IFRC Shelter Cluster Coordinator, Ecuador DM Coordinator, Asia Pacific region Acting Head of DMU, Africa region **MENA** Region Health Shelter Team, IFRC Geneva Americas Region Logistics Health Delegate, IFRC Jordan EAIOI CC DM Field Coordinator, IFRC Thessaloniki Americas Region PMER Asia Pacific Region Operations Asia Pacific Region DM Americas Region Operations Senior Officer, Community engagement and accountability; IFRC Geneva Asia Pacific Region Health Shelter Team, IFRC Geneva Senior Surge Officer, DCM, Geneva Asia Pacific Region PMER former Senior Surge Officer, DCM, Geneva Europe Region DM Europe Region DM Asia Pacific Region CEA Head of Emergency Operations Head of Surge Team, IFRC Geneva DREF team. IFRC Geneva Asia Pacific Region Finance

Vinay Sadavarte Walter Cotte Wend Neoh William Carter Winnie Maganda et. al. EAIOI CC Programmes Americas Region Director AP Region WASH WASH, IFRC Geneva Asia Pacific Region HR

Participants from the FACT, ERU and RDRT Team Leader training, Madrid, October 2015 Five RITs in Ecuador South Sudan Ministry of Home Affairs Catholic Relief Services, South Sudan World Food Programme, South Sudan UK DFID, South Sudan MSF, South Sudan NGO Forum, South Sudan

National Societies ¹⁰¹

Afghanistan Red Crescent American Red Cross Australian Red Cross Brazilian Red Cross British Red Cross **Burundian Red Cross** Cambodian Red Cross **Canadian Red Cross Colombian Red Cross** Danish Red Cross (Juba) **DR Congo Red Cross Dominican Republic Red Cross** Ecuador Red Cross Egyptian Red Crescent **Ethiopian Red Cross** French Red Cross German Red Cross **Guatemala Red Cross Guinean Red Cross** Hellenic Red Cross Indonesian Red Cross (PMI) Iranian Red Crescent Jamaican Red Cross Japanese Red Cross Jordanian Red Crescent Kenya Red Cross Kyrgyz Red Crescent Lebanese Red Cross Madagascar Red Cross Magen David Adom

Malawi Red Cross Mexican Red Cross Mongolian Red Cross Mozambique Red Cross Myanmar Red Cross Nepalese Red Cross Netherlands Red Cross New Zealand Red Cross Nigerian Red Cross Norwegian Red Cross Pakistan Red Crescent Palestine Red Crescent Panama Red Cross Peruvian Red Cross Philippines Red Cross Qatar Red Crescent RCSC/Hong Kong autonomous branch **Rwandan Red Cross** Senegal Red Cross Serbian Red Cross Sierra Leone Red Cross South Sudan Red Cross Spanish Red Cross Swedish Red Cross Tanzanian Red Cross Turkish Red Crescent Viet Nam Red Cross Yemeni Red Crescent Zimbabwean Red Cross

¹⁰¹ NS were represented by the Secretary General, the Head of International, Head of DM, or similar in most cases; it was agreed that names would be left out and no attribution given to particular remarks

Annex B List of key references

Addressing sexual violence in humanitarian emergencies: Marsh, Pudin & Navani. IRC 2007 ALNAP State of the Humanitarian System 2015 Betts, A. & Bloom, L. (November 2014), Humanitarian Innovation: The State of the Art. OCHA Policy and Studies Series, 009 CHS Alliance - Humanitarian Accountability Report 2015 Design Recommendations of the IFRC Go Platform Task Force: 30 June 2016 DFID CHASE: External reference for partners - Value for Money in Humanitarian Programming Draft Position Paper - IFRC Disaster Categories and Levels (undated) ERU Standard Operating Procedures (2012) FACT SOPs (2004) Global Surge Working Group report, Nairobi 2015 Global Surge Working Group RTE meta-analysis Higgins, N. (August 2015). Review of RDRT and NDRT/BDRT system in East Africa and Indian Ocean Islands, IFRC. ICRC RDM: Generic RDM presentation, 2016 IFRC – summaries of FACT, HEOps and ERU deployments, 1996 – 2015 IFRC Briefing Note: Building Disaster Risk Management capacity 2015 IFRC Concept Note: A plan to strengthen community resilience to drought in Southern Africa. May 2016 IFRC DREF Evaluation Report 2015 IFRC Global Surge Capacity overview, 2015 IFRC Operational Response Framework, Roles and Responsibilities (draft), May 2016 IFRC Real Time Evaluation, Ebola crisis 2015 (summary) IFRC Real Time Evaluation, Nepal EQ 2015 (draft) IFRC Real Time Evaluation, Syria crisis 2014 IFRC Real Time Evaluation, Typhoon Haiyan 2013 IFRC Report on Federation Network Emergency Needs Assessment Practice, August 2016 IFRC Review of RDRT & NDRT in East Africa and Indian Ocean Islands – Nuran Higgins, August 2015 IFRC Secretariat Operational Response Framework - Roles and Responsibilities (Draft) (May 2016) IFRC Secretariat Standard Operating Procedures for Disaster Response and Early Recovery in Asia Pacific (September 2011); IFRC Secretariat Standard Operating Procedures for Disaster Response in Africa (May 2013) IFRC World Disaster Report 2015 - Local Actors IFRC. (2015). Minimum Standard Commitments to Gender and Diversity in Emergency Programming MSF - Where is Everybody? - Sean Healy & Sandrine Tiller Oxfam - Turning the Humanitarian System on its Head Project GO Deliverables Final Report – Rivanna Strategy, June 2016 Project GO Final Report: Rivanna Strategy, June 2016 Questionnaire design for needs assessment in humanitarian emergencies, ACAPS; July 2016. Regime Change for Humanitarian Aid - Michael Barnett & Peter Walker Report on Federation Network Emergency Needs Assessment Practice, August 2016 Researching the Urban Dilemma: Urbanization, Poverty and Violence - Robert Muggah Review of Real Time Evaluation Reports - Violeta Velkoska, April 2016 SMCC Plan of Action 2016-17 SMCC Progress Reports, March & June 2016 SMCC Resolution for General Assembly 2015 (draft) SOPs for HEOPs (August 2012) START Network Transforming Surge Capacity - Lois Austin & Glenn O'Neil

Selected Web Links

IFRC: http://www.ifrc.org/en/publications-and-reports/world-disasters-report/world-disasters-report/ International Disaster Database: http://www.emdat.be/ ALNAP: http://www.alnap.org/ , http://www.alnap.org/what-we-do/effectiveness/sohs CHS: http://chsalliance.org/ INFORM (risk mapping): http://www.inform-index.org/ ODI:http://www.odi .org/publications/7344-disaster-risk-management-post-2015-development-goals-potential-targetsindicators, ODI: http://www.odi.org/publications/7344-disaster-risk-management-post-2015-development-goals-potential-targetsindicators , http://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/281.pdf GTR: https://globaltoolsreview.com/ UN OCHA: http://www.unocha.org/what-we-do/coordination-tools/undac/methodology-training

Annex C Excerpts from the terms of reference for the Review

Objectives of the review

- 1. A scoping of the humanitarian environment looking forward at least ten years (i.e. 2025), identifying changes to the environment and resulting disaster trends within which the global tools will operate and the needs they will seek to address.
- 2. A retrospective review of the global tools to date, identifying not only their strengths and weaknesses from both the individual technical / sectoral perspective but also that of their inter-dependencies and inter-operabilities and the decision-making framework within which they are deployed (or not), to give a current overview
- 3. Determination of the **required** functionality of the global tools to meet the identified future needs
- 4. Testing the **required** functionality of the global tools: (*below refers to within the Red Cross and Red Crescent Movement*)
 - a. Internally to ensure that inter-dependencies and inter-operabilities are addressed
 - b. Internally to ensure the required degrees of sustainability, particularly in terms of human resources and funding
 - c. Internally to ensure compatibility with, or flexibility for changes to the IFRC organisational structure, functions and the prevailing policies (such as *Principles & Rules, Global DM SOPs and the Seville Agreement*)
 - d. Internally to ensure efficient use of resources at the national, regional/zonal and global levels according to capacities and needs
 - e. Externally to ensure a fit with the predicted future needs and emerging response approaches (such as the increasing use of cash / voucher programme approach)
 - f. Externally to ensure compatibility with other actors involved in the humanitarian environment, including other humanitarian agencies, civil, military and commercial entities
 - g. Externally to ensure linkages with external co-ordination bodies
- 5. A report of the analysis of the gap between **current** functionality and the functionality **required** to meet identified future needs.

Production of the gap analysis report (GAR) will be used as the basis for the next stage. The interim GAR will include top-line recommendations to take the global tools from their current functionality to the future desired functionality. It will also include top-line recommendations (if any) for support to the tools and the environment within which they are deployed and operate. Note: these recommendations will reflect the discussions with the various stakeholders consulted during the review but will not be reported as agreed by any of the stakeholders. The GAR will be the basis for reporting back on the progress of the GTR to the 20th General Assembly in December 2015.

The gap analysis report top-line recommendations will serve as a starting point for the next stage of the review (beyond the terms of reference), where the recommendations are considered, modified, adapted or rejected until they are accepted by all the stakeholders as agreed and their implementation plan (with timescales, milestones and budget) developed. This subsequent review, accepted recommendations, implementation plan and budget will form the basis of the final GTR report to be produced in late 2016

Phases of the review

Phase 0 - Draw inferences from (inter alia) the Philippines Haiyan real-time evaluation (RTE) and Nepal 2015 earthquake RTE (and also include selected information from the previous consultants' report) with a focus on the global tools deployed:

- the deployment process and environment within which they operated evidence-based impact evaluation (as distinct from perceived impact)
- reflection on lessons identified to model the theoretical ideal operational environment, decision-making and global tool composition.

Phase I - Desk-based literature review of the future humanitarian environment. The final component will be an *interim GAR* outlining how the initial findings from Phase 0 match the findings of Phase I, and an initial gap analysis between the global tools' current and required functionality.

Phase II - focus on nominal 'service delivery global tools, specifically FACT and ERUs

Phase III - focus on 'other' global tools, specifically RDRT, RIT, HEOps, HES, FERST, STT, SCT and other shelter cluster resources, RRUs and RDU

Phase IV - focus on the Federation environment and decision-making framework within which the global tools (all types) are deployed

Phase V - Development of consultative and agreed gap analysis (iv) and review report, which will inform the next phase of the process, agreeing recommendations and developing their implementation plan, timescale and budget.

Annex D Updated comments on interim gap analysis table¹⁰²

No	Gap area	Current state/situation	Interim gap analysis	Updated comments for final gap analysis
1	Inclusivity	An increasing number of NS are capable of not only leading responses in their own countries but have the desire and capability to contribute to wider Movement responses with tools and resources of their own. However, the current system makes this extremely difficult as contributing to the GRTs is perceived as a "closed club" open only to those NS that have sufficient financial resources to participate (while all NS might have the technical skills). NS may have skills to offer but not the financing nor the ability to, for example, establish an entire ERU. NS that are currently not part of the GRT system but have significant skills and resources to offer are finding it hard to enter the system (except by putting forward people for RDRT/RIT rosters) which is reducing the potential availability of additional resources to support Movement surge responses.	Methods for ensuring increased involvement of all NS that have capacity but are not currently part of the global tools system need further attention. In particular, there is a need to explore in some detail a way to overcome the obstacle of the financial implications. National Societies which have resources, but do not choose to be part of the GRT system will need to be addressed to find a way to make the system acceptable, or more generally to match the available resources with the needs. It may also be necessary to do a comprehensive review of the financing arrangements for the GRTs – which are inextricably linked to the DREF and EA mechanisms. This will require further analysis. There is a paradox between the desire to be more inclusive and how to share the cost of developing, training, maintaining and deploying the tools. This will require more analysis.	 One of the biggest issues. Separation of "global" and "regional" is unhelpfully divisive. NS likely to cooperate with a fairer, more inclusive system. A single competency framework is needed, centrally assured but managed at regional and national levels as well (i.e. 3 Tiers). For teams/units, also have 3-tier accreditation system, effectively regulating the "RRUs", but with clear SOPs and financing mechanisms. Medical units must conform to WHO EMT system. The global SOPs, with agreed triggers for yellow, orange, red (or 1,2,3) MUST be finalized!! Link to the deployment systems for the Tier 1,2, or 3 capacities The costs of training and deploying will be shared – a detailed plan will be needed to ensure this. The DREF and EA need further reform.
2	Timeliness	One of the identified weaknesses of the GRTs is the time it can take to deploy them. While the ambition is to deploy within 48 hours, this does not always happen owing to issues such as lack of availability of staff with the desired profile, funding constraints and negotiations to deploy staff within the response mechanism. It also depends on the given tool.	Based on an analysis of past experience, there is a need to assess and clarify realistic timeframes within which National Societies can expect individual and groups of GRTs to arrive in-country.	DREF can be speeded up – this is the single biggest assistance to many NS. 3-tier system of surge capacities will make system quicker, so long as SOPs and P&Rs are respected. Phased deployments help to ensure surge capacity arrives as soon as feasible but not unnecessarily.
3	SOP development	While there are a number of existing SOPs for individual GRTs, the Global SOPs remain unadopted and in draft form.	There is a clear need to finalize the Global SOPs for disaster response, and to ensure the various regional SOPs are linked in. The SOPs for the FACT, ERU and RDRT/RIT, as well as the overall concept of operations for slow onset disasters as well as sudden onset, will also need to be adapted in due course.	This is a really vital issue – without an environment between GVA and the regions that allows for global SOPs, there will always be problems!

¹⁰² This is updated from the Interim Gap Analysis Report (November 2015) with some comments from respondents. This table alone does not form the basis for the recommendations.

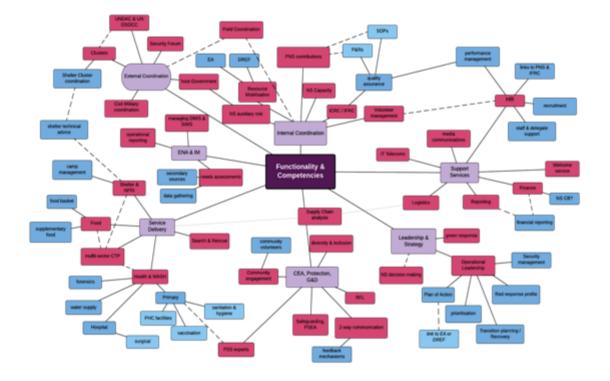
4	Awareness	A number of National Societies are not aware of the GRTs that they can access and what to expect from individual tools or a range of tools if deployed.	There is a need for increased awareness of which tools are available and what they are capable of (including how they work together and what flexible options might be appropriate for different situations).	Dissemination must form part of the implementation plan, and response managers held to account for their responsibility to remain current
5	Flexibility and modularity	The current GRTs allow for a selection of an entire tool (or tools) such as an ERU or a FACT. The possibility exists to request different elements of the tools but it is not widely known.	Increased flexibility in allowing NS to decide which elements of the GRTs are most appropriate for a given context may ensure the implementation of more effective and cost-efficient responses that are clearly linked to needs. Such flexibility should include the option to send just people and not hardware, or to send, or example, selected items from an ERU with one person as opposed to a team of four. While this may be more complex to manage for a deploying National Society, it will link better with the needs of NS. Another emerging trend that will need to be expanded is for multinational teams – some NS contribute personnel to other National Societies' ERU	The competency framework approach should move this forward, also more phased deployment. Medical and water supply – will need to be agreed modules/functions Other service delivery – KPIs based on the 3-tiered framework, links between target population and number/size of elements deployed Three tiers are cumulative i.e. there will be Tier 2 people in a Tier 3 team (local knowledge, CB, field level work), so common
6	Preparedness	A number of NS have their own NDRTs and NITs and contribute staff to global tools such as RDRTs and FACT. With increasing emphasis being put on localized responses it is important that all NS are in a position to contribute to effective responses, particularly when global tools are deployed.	deployments. National Societies will continue to play an important role responding to disasters in their own countries, and regional support mechanisms between NS will grow. There needs to be greater investment in NDRT capacity to ensure that NS are fully prepared to play an active and central role in future disaster response, and also because this is the basis for regional and global capacity.	training approaches needed. Tier 1 – all training online, so invest in materials for this. In many ways this is not a surge capacity issue, but clearly NS believe that it is – pre-disaster, peer-to-peer and partner support is clearly a gap.
7	Language	With the GRT documentation (and training material) currently only being available in English this limits the ability of a number of NS to be more involved.	Bearing in mind the increase in local responses, the tools need to be adapted to more languages (at least in French, Spanish and Arabic, and possibly Russian), in order to optimise the involvement of NS more globally.	Refer this issue to GSWG – what is the situation with translation?
8	Competencies	It is not always possible to deploy staff with the right competencies, and this, primarily in relation to soft skills (which are important for establishing relationships between the GRT staff and the NS or other GRT staff) and non- technical skills, such as the ability to rapidly draft plans of action or contributions to emergency appeals. These skills (analysis, planning, writing, assessment) are frequently areas in which NS request assistance at the onset of a response.	There is a need to analyse key competencies that are:(a) required and (b) available within the GRT framework in order to identify skills and competency gaps across the tools to ensure that these gaps are addressed for future deployments. Issues of compliance and accountability for respecting such frameworks need also to be considered.	GSWG already working on a full competencies framework, so need to link to this. Framework needs to include both individual and team/unit descriptions? Full analysis confirms that non- technical skills are the biggest gap
9	Roles and responsibilities	There is lack of clarity regarding links between NS requesting assistance and deployed GRTs. This lack of clarity is heightened when multiple tools are deployed simultaneously, putting pressure on NS to understand with which GRT staff to coordinate. At times NS have felt bypassed by team leaders, leading to negative perceptions of the tools and their utility.	Improved clarity on roles and how GRT teams should behave in relation to NS and other national bodies is required.	<i>"self-sufficiency" has got out of control, now means isolation! TLs must be outward-facing first. Link to SOPs and coordination issues.</i> <i>Early deployment of Movement coordination function</i>

10	HEOps	When deployed, there has been positive feedback about HEOps. However, there are limited numbers of HEOps available – this may be linked to competencies. This role is considered beneficial in terms of supporting and advising NS during an emergency response and developing links with other GRTs – links that are often challenging for a NS to develop when they frequently have to implement a direct response, thereby limiting their capacity to connect with deployed GRTs.	There will be a need for more (and more predictable) deployments of the HEOps, D-HEOps or similar capacity. There is an urgent need to focus on identifying more individuals to undertake the highly-valued HEOps role, or senior operations management standby capacity. As it is not financially viable to have many HEOps on standby, NS should be asked to make more middle and senior managers available for occasional surge missions. Another possible model is the British Red Cross initiative to have full-time "Global Surge Delegates" including individuals with strong leadership profiles.	HEOps is a Tier 3 role as it stands, so is D-HEOps L2, or does it depend on the individual and the context? Is HEOps only deployed in Red responses? As leadership in general is one of the most urgent gaps, suggest a specific plan for developing a larger pool to fill this role is discussed.
11	Decentralization and localization	The current primarily centralized management of the GRTs is not in line with the increased effort by the rest of the humanitarian system to facilitate and support localized and regional responses. The RDRT and other more locally- centred tools, such as the NITs, NDRTs, and RITs, provide positive examples of a de- centralized approach to the GRTs and these tools are much appreciated and valued by NS requesting assistance as well as those sending it.	With greater emphasis on the need for more local responses, the GRTs should adapt and move away from a uniquely centralized approach. While retaining the advantages of centralized SOPs, training standards, decision-making and good coordination, the GRTs must become effective at regional levels (including sub-regional peer-to-peer support mechanisms). If the GRTs become more inclusive and local, deployments will be fewer and will need to be smarter.	Problems with the IFRC decision- making environment (regions versus Geneva) are not improved, but without both predictability and consistency, any good multi-tier surge system will be hard to realize
12	Coordination	The current disconnect between the tools is believed to be hindering more effective responses.	It is important to strengthen links between the different GRTs for example between ERUs and RDRTs or ERUs and FACT in their current format. Links between the different tools or teams need to be clarified to National Societies, including those requesting assistance, and to tool staff members.	 Main elements are: Coordination between the teams/tools/NS Coordination between host NS and all external teams Coordination between NS, IFRC, ICRC, sending NS External coordination
13	Innovation	The GRTs need to take on board the growth of new approaches in humanitarian response. Some steps have already been made in this direction (the recent development of a cash programming register and inclusion of cash in the relief ERU for example). However, there needs to be a greater emphasis and understanding of innovative developments, which are likely to result in increased donor funding in the future.	The focus needs to be on employing and equipping staff with the relevant skills as well as creating and adapting tools to ensure that they are in line with the latest technology.	Movement will always be limited compared to e.g. small NGOs in how agile we can be. Great opportunity to be ahead of the curve for multi-sector CTP, design new tools around this. Read up on what is done in the field of community surveillance
14	Assimilation with existing internal and external systems	At national level (and also at regional level in some cases), there are humanitarian response systems and processes in place. These are sometimes government-led/managed and sometimes specific to NS. Experience shows that the GRTs do not always take these existing systems and processes into account during deployment, which leads to tension, duplication and gap creation in responses.	The GRTs will need to be better informed of humanitarian response systems and processes that are already in existence at the national level in order to avoid uncoordinated, duplicative or conflicting approaches to assessment and response. This includes the need for awareness and understanding of government-led mechanisms as well as systems that have been put in place by the NS.	WPNS review? Can this include a way for NS to log their national role, mandate, constraints, preferences, etc. Those big NS that work on behalf of governments. (e.g. Kizilay, Iranian RC, RCSC, etc) can be accommodated

45		The SIMS is surrently only linked	In order to oppure continuity and	Probably requires a more detailed		
15	Information Management	The SIMS is currently only linked to FACT deployments and not to any of the other GRTs and this leaves a gap when FACT teams leave.	In order to ensure continuity and continued support in the critical area of information management, it is necessary to rethink the availability of SIMS – and the development and use of other information management tools and methods.	Probably requires a more detailed study on this aspect alone, or along with financial tools – to complement this study		
16	Accountability	There are currently limited mechanisms in place to measure and report on the effectiveness and impact of the global tools (whether as individual tools or the GRT system as a whole (i.e. the IFRC zone, the NS, etc.). With an increasing emphasis on the need for accountability, this is a gap that must be addressed.	In an increasingly competitive surge environment, it is likely that the IFRC will be required to provide more evidence of the impact and effectiveness of the GRTs. Systems to allow for this monitoring, measurement and reporting will need to be developed. It is important to recognize the absence of an internal accountability system – for example the terms of reference request 5 persons and the NS sends 10. It may also be required or advantageous to participate in one or more of the "pre- qualification" and registration processes – for example for Foreign Medical Teams (FMT) – which are currently under development or consideration.	A fundamental issue pertaining to the Movement's shrinking role and relevance Are NS going to be able to provide information of sufficient quality?		
17	External coordination	A large number of new and emerging actors are involved in surge responses. To date, the Movement has not articulated how the GRTs will best work with and alongside these new actors. This includes working to assist in cluster coordination.	Far more emphasis will need to be placed on the "soft" skills aspects of response capacity – including coordination both internal to the Movement and external. It must be a core function of all responses.	Outreach to other similar systems which support UN and NGOs		
18	Goods clearance & pre-disaster agreements	An integral part of many existing ERUs is that they deploy with commodities e.g. relief, medical and water/sanitation items. There have been customs-related difficulties in ensuring the rapid entry of ERU commodities into receiving countries, resulting in deployment delays.	There is a need for a pre- understanding, on a country-by-country basis, of the legal requirements for bringing such items into countries affected by disaster. There are clear links here with the IFRC's work on International Disaster Response Law (IDRL).	Link to the preparedness issue		
19	New technology	Recent years have seen the development of new technology in terms of mapping and undertaking assessments, as well as in registering and assisting beneficiaries. While the GRTs have taken on board some new approaches (for example, systems to be used by those on the cash- programming register), there remains room for further development in this area.	The GRTs need to be further developed or re-designed in order to take on board relevant innovation in new technology if it is to remain competitive within the growing surge environment.	See above section on Innovation		
20	Contextual adaptability	The current GRTs have been designed primarily for use in large-scale sudden onset disasters. How to deploy GRTs most effectively into slow onset and protracted crises remains unclear.	With the increase in protracted and regional crises that has been seen in recent years, the GRTs need to adapt so that they can function effectively in a broad range of contexts and not just large-scale sudden onset disasters.	Issue of SOPs For protracted or slow onset, individual competencies, or whole integrated teams, can be requested		

21	Sector responses	The existing GRTs have been able to play a key role in "traditional" sector responses. A number of other sectors are becoming increasingly mainstreamed, including protection, gender and diversity, and communicating with disaster- affected populations. The current GRTs are not well placed to include such activities.	There will be a need for the GRTs to ensure that they can make a contribution in all sectors within which the Movement has an interest or role. This will require adaptation to existing GRT approaches or development of new tools.	A competencies based approach will help, but the challenge of how to integrate teams that have not trained together might emerge Core teams, at L2 and L3, for medical, water, PH, economic security, and possibly protection/RFL, can provide basis for other specialists to join
22	Comprehensive approach	Also known as the 3D approach, or as OCHA calls it: 'interoperability'. The Movement, like all humanitarian actors, will have to face the fact that many others are loosening the interpretation of humanitarian principles, in addition to government agencies wanting more presence on the ground (ECHO volunteers, military or civil protection actors, etc.).	The Movement will need to defend the humanitarian principles, and ensure that the GRTs work in such a way as to support this, while also being flexible enough to take into account the changing ways in which others work.	Host government / civil military competencies to be incorporated into leadership roles. Every NS should be able to articulate how they protect the FPs in their own relationship with government – this is required by P&Rs
23	Security	International humanitarian actors are less present in very challenging security environments. National Societies are always present, but there may be less support when needed if NS cannot justify – or are unable to – send personnel into high-risk locations.	The GRTs already work with the ICRC in armed conflict situations, and this will need to be improved / increased in future, while synergies are strengthened with their Safer Access and Health Care in Danger initiatives. The Movement needs to retain proximity to affected populations.	SAF to be incorporated into L1 training for all competencies. Joint IFRC/ICRC crisis management forum in GVA (or IFRC joins ICRC/NS group?)

Annex E Functionality map



Annex F Individual tools analysis sheets

Table of ERU types, and National Societies currently owning them:

			NS	maintaining f	ull ERUs				
ERU Emergency Response Unit	IT & Telecom	Water & sanitation (module 15)	Water & Sanitation (module 40)	Mass Sanitation (module 20)	Emergency Hospital (RCEH)	Emergency Clinic (RCEC)	Logistics	Relief	Base Camp
Austria		х	x	x					
BeNeLux								x	
Canada					x	x			
Denmark	x						x	x	x
Finland	x				x	x	x	x	
France		x	x			x		x	
Germany		X	x	х	x	x			
Italy									x
Japan						x			
NZ RC	х								
Norway					x	x			
Spain	х	x		x		x	x	x	
Sweden			x	x					
Switzerland							х		
UK				x			x		
USA	x							x	
Total:	5	4	4	5	4	7	5	6	3

Several NS, notably Australia and Hong Kong regularly offer ERU trained HR for joint deployments.

Name: Head of Emergency Operations /Developing Head of Emergency Operations

Short description: In place since 2012, HEOps are currently three experienced IFRC staff who are deployed to provide operational leadership in major disasters for an initial period 90 days. In-between deployments, the HEOps support the IFRC in training and support roles. The HEOps role has been seen to fill a key gap in the Movement response in major disasters. In major crises, such as the migration situation in Greece and the Nepal and Ecuador earthquakes, the HEOps role has proved to be necessary at the capital level as well as in the field where the operations are active. In these cases, a seconded National Society delegate and a RDRT performed the HEOps field function respectively. Currently HEOps mainly relies on funding from emergency appeals. The D-HEOps approach has faced challenges in that staff trained are often key operational or managerial staff in their National Societies or IFRC, which sometimes makes deployment difficult.

The D-HEOps was created to provide an additional pool of National Society and IFRC staff for such a role, four of whom were deployed in 2014 – 2015 (plus two as FACT TL). The D-HEOps undergo a rigorous selection process, followed by a two-year programme of training, deployments and mentoring by one of the HEOps.

Decision-making process and coordination: According to the HEOps SOPs, a region (zone) can request HEOps in the event of a disaster ("orange" or "red") in a given country of the zone. The IFRC Geneva, which manages the D/HEOps then checks on the availability of D/HEOps and mobilise the D/HEOps. In practice, it is not uncommon for the IFRC Geneva to suggest D/HEOps missions to regions and countries. Once deployed, D/HEOps take a key role in decision-making and coordination on the ground, as they lead the RC/RC response in most cases.

Strengths:

- Dedicated longer-term specialists for coordination and leadership roles (usually up to three months)
- Filling key gaps in senior roles in responses
- Assisting with planning and presentation of appeals better pick-up rate

Weaknesses:

- Unstable financing for positions
- Sustainability of D-HEOps approach

- Increase the number of HEOps carrying out this role full-time
- Expand the practice of multiple HEOps roles in large responses (such as the capital and the field)
- Re-consider the D-HEOps approach, so that it is less reliant on National Societies making personnel and funds available without cost to the IFRC
- Ensure stability of financing.

Name: Field Assessment and Coordination Team

Short description: The FACT is an assessment and coordination team (normally of some 3-10 persons) made up of National Society and IFRC staff to be activated in sudden onset disasters usually for a period of one month. The different FACT teams can vary in their compositions but are mostly dominated by sectorial expertise (WASH, relief, health) together with support services (such as logistics and reporting) and to a lesser extent, coordination/leadership (team leader, humanitarian coordination, communications...). The FACT mainly comprises staff or volunteers from sending National Societies. A criticism of the FACT deployed is that they can lack field operational and National Society experience and are only deployed for relatively short periods (a post may be renewed with different people–up to three times as was the case in Nepal, but this was viewed by most as inefficient). In reality, the FACT's tasks mainly involved coordination rather than assessment, which was seen as weak in general. Some National Societies perceive FACT as an imposed and western tool, out of synch with their own priorities in the initial phases of a disaster.

Decision-making process and coordination: According to the FACT SOPs, the deployment of FACT results from a request made by the National Society concerned, usually in consultation with the region. Even if the National Society does not foresee a need for international assistance, the rules allow the IFRC to deploy a FACT to support the NS in managing the response. In practice, the IFRC Geneva can also proactively suggest the services of a FACT team, in the same way that sending the National Societies can advise the IFRC and the NS concerned that they have available FACT-qualified staff to deploy. A criticism of the FACT teams is that they often arrive too late into the operation, one to two weeks after the given disaster. There is some uncertainty around decision-making concerning the composition of the FACT team. Once deployed, the FACT normally falls under the supervision of a team leader who (in the absence of a HEOps or other senior qualified NS or IFRC staff) assumes the role of head of the Movement response. Individual team members normally take a sectoral or support responsibility. Coordination between them and within their respective sectors varies depending on context, the affected NS, other NS and/or GRTs present.

Strengths:

- Dedicated specialist resources to manage response
- Ability to mobilise and lead individual sectors

Weaknesses:

- Lack of clarity of role
- Weak assessment of role
- Slowness to deploy, and availability of personnel for low-profile emergencies
- Limited integration of affected National Society or non-western team members
- Composition of FACT teams in terms of criteria used to determine "what/who" in a team

- Review the FACT concept and re-orientate towards a competencies approach
- Consider further how non-westerners and other National Societies can be better integrated within FACTs
- Combine FACT and RDRT into a newly named multi-function team.

Name: Regional Disaster Response Teams (RDRT) / Regional Intervention Teams (RIT)

Short description: The RDRT (RIT in the Americas region) consists of staff and volunteers from National Societies and IFRC offices in their respective regions, and include members of National Response Disaster Teams. The RDRT/RIT are selected and trained for deployment within their region (or occasionally beyond, to a region that shares their language, (for instance, West/Central Africans to Haiti) usually for a month. The regions and/or clusters (sub-regions) manage the RDRT/RIT. The RDRT/RIT have mainly technical skills, such as WASH, logistics, relief and health, although some have more general skills, such as disaster management and reporting. No centralised statistics are kept on RDRT/RIT rosters and deployments but thousands of people are estimated to have been trained and hundreds to have been deployed in the past five years. The RDRT/RIT are active mainly in Asia Pacific, Africa and the Americas, but under-developed in MENA and Europe regions.

Decision-making process and coordination: Regional Disaster Response Teams / Regional Intervention Teams are deployed at the request of National Societies in coordination with the region. In the Americas (and more recently Africa and Asia Pacific), each DREF is accompanied by the deployment of a RDRT/RIT. Although labelled as a "team", RDRT/RIT are often deployed as individuals and are either: working directly with the affected National Society; attached to a FACT team or; attached to an ERU. Therefore, how they coordinate and link to other GRTs depending on the context and setup.

Strengths:

- Familiarity with contexts, cultures and languages
- Capacity building for both sending and receiving National Societies
- Provide targeted support and/or additional support for other tools.

Weaknesses:

- Inconsistent approach between regions
- Siloing of profiles within regions
- Lack of financing for deployments
- Limited profiles for some sectors (for instance cash and livelihoods)
- External politics can prevent deployments within a region

- More solid funding mechanism
- Greater coherence between regions on management, training and deployments
- Greater integration and ability to deploy within FACT and ERUs
- Combine FACT and RDRT into a newly named multi-function team.

Name: Medical ERUs

Short description: There are currently 11 medical ERUs managed by eight National Societies: a rapid response hospital (Canada); field hospitals (Finland, Germany, Norway); and Basic Health Units (Canada, Finland, France, Germany, Japan, Norway, Spain).

NS Emergency Clinic ERUs are, in a narrow sense, still fit for the purpose for which they were created. The primary health care needs of a displaced population are broadly addressed by providing emergency clinics that can be tailormade or 'off-the-shelf', depending on the specific situation requirements. The changing nature of humanitarian disasters however, is demonstrating an increasing need for a greater public health response. Public Health needs in disasters pose a significant challenge to RC emergency clinics and current models are unsuited and unable to address them. Responding to public health needs following a disaster or in a chronic emergency requires a very different set of skills and services from those required for responding to primary health care needs.

Decision-making and coordination: Medical ERUs provide a fit-for-purpose response when deployed against an identified medical need and when the call for a deployment follows the correct procedure. The correct procedure is that any decision to call for a medical ERU: must be field-driven, and; is considered on the advice of field and regional health professionals. At Geneva level, health professionals are not involved in the decision making so evidence of need from the field medical professional is crucial. When due process is not adhered to, medical ERUs may be called for unnecessarily or the field operation may feel pressure to accept an ERU when they do not perceive the need and have not called for one.

The role of emergency health staff at Geneva level is ill-defined. Once the decision is made to deploy a NS medical ERU, it is unclear whether Geneva emergency health staff have an advisory role or where or how they fit into the management chain.

Strengths:

- Meets demands for health needs in emergencies (disasters usually generate an immediate increased demand for emergency medical services; and often demand on-going primary health service where structures may have been destroyed or a population may have been displaced)
- Very positive media coverage for National Societies
- Health ERUs work well with both IFRC and as resources for the ICRC RDM

Weaknesses:

- Lack of consistent quality assurance of ERU medical teams
- Current models are not adapted to address public health needs of current emergencies
- Health professionals are not always involved in decision making (in Geneva or the field)
- TLs not always prepared for a strategic role in response implementation

- IFRC emergency health staff to play a greater role in technical quality assurance and coordination
- Increased modularity, agility and flexibility (for urban, protracted and food crises, etc.)
- Expand multi-national teams, to include all National Societies with medical capacity
- Services offered by ERUs need to be reviewed in light of public health needs (and needs of different vulnerable groups), especially in protracted emergencies.

Name: Emergency Response Units (ERUs) - non-medical

Short description: ERUs were created over 20 years ago to provide immediate support to National Societies in large-scale disasters. Each ERU is managed by a National Society (see the table at the beginning of this Annex) and comprises trained specialists, often with standardized equipment ready for deployment. Non-medical ERUs include WASH (three types/modules), relief and support services (IT and telecommunications, logistics and base camp). The ERUs are designed to be self-sufficient for a month and can operate to four months. The ERUs are seen as key to the Movement's response and provide the bulk of its "on-the-ground" response in many cases. Issues have been found with ERUs in terms of: their flexibility and modularity, preparedness of staff (often volunteers or staff from sending NS unfamiliar with disaster contexts or National Societies), and: interoperability with other GRTs, within their given sector (other ERUs, RDRTs, NS programmes) and among themselves (for instance WASH and health). Additionally, ERUs have proven to be inconsistent in terms of National Society capacity-building and handover/exit strategies.

Decision-making process and coordination: According to the ERU SOPs, following a medium- to large-scale disaster that may necessitate the deployment of FACT and ERUs, the ERU desk in Geneva will be in close communication with the ERU NS to determine if a deployment is required. In practice, when a major disaster occurs, there is some jockeying between National Societies to deploy their ERUs and pressure may be placed on the IFRC Geneva or directly on field staff (such as FACT). The criteria used by the IFRC to decide which ERU to deploy are not specifically documented, which has resulted in some dissatisfaction from the side of the sending National Societies.

Strengths:

- Positive integration with RDRTs and use of multinational teams (such as logistics)
- Some positive integration and handover to affected National Societies (including relief, WASH)
- Growing capacity to implement large-scale cash programmes (relief)
- Good technical capacity for camp or rural situations (WASH)

Weaknesses:

- For support ERUs, only logistics, telecommunications and base camp ERUs are available
- Knowledge of IFRC systems among National Societies delegates is weak
- Compatibility between systems of the IFRC and National Societies
- Some ERUs rarely mobilised (for example base camp and IT/telecommunications)
- Non-standard training and variable quality among sending National Societies
- Not enough integration with some National Society disaster management teams and volunteers (in terms of planning and assessment)
- Lack of flexibility of the ERUs, such as between the core functions of water supply, sanitation and community/public health
- Incompatibility with the ICRC's Wathab engineering capability
- Incompatibility with urban environments (WASH)

- Greater interoperability and adaptability between ERUs, sectors and other GRTs, such as HES or Shelter
- Further integration of non-western staff and National Societies (as has already occurred)
- Greater coherence in training, standards and cross-cutting issues across all ERUs
- Greater flexibility and modularity of the ERUs
- Less dependence on the ERU model (for example single National Society ownership).

Name: Regional Response Units (RRU)

Short description: The concept of RRUs is similar to the ERUs but on a smaller scale; RRUs are designed to assist medium-scale disasters in their region of origin. The RRU is not an official tool and has not been accredited as part of the global system; it is rather a regional adaptation, designed to intervene quickly for smaller events. To date, RRUs have only been operational in the Americas with the concept currently under consideration in Asia Pacific. Reportedly eight National Societies¹⁰³ host RRUs although only two are known to have deployed: the Dominican Republic – WASH and Canada – health. Issues have been raised about the sustainability of the RRUs as they largely depend on financing from the IFRC mechanisms (DREF or Emergency Appeals) or have to be self-funded. As such, the RRUs have faced challenges in terms of maintenance and sustainability.

Decision-making process and coordination: The RRUs are deployed at the request of National Societies in coordination with the region – currently only the Americas region. There is some concern that RRUs have been developed without the necessary technical and quality integration with the GRTs (for example the WASH RRU was developed without consultation with WASH Geneva). Additionally, in some cases the RRU is simply an ERU under another name, and deployed outside the normal system (this was the case of the Canadian health RRU deployed following the 2016 Ecuador earthquake).

Strengths:

- Proximity for deployment
- Familiarity with contexts, cultures and languages
- Involvement of some emerging National Societies

Weaknesses:

- RRU concept not globally recognised, and does not fit with other tools so far
- No quality control or financial sustainability
- Limited distinction from ERU concept

- Clarify, and probably merge, the concept of the RRU with that of the ERUs
- Explore the sustainability model of RRUs
- Under the tiered competency system, minimize the need for a separate RRU system.

¹⁰³ Including Canada, Mexico, Dominican Republic and USA (other NS not identified).

Name: Shelter Cluster Coordination Team (SCT)

Short description: The Shelter unit of the IFRC manages the SCT, whose main role is to lead or co-lead the shelter cluster or any other existing shelter sector coordination mechanism in times of crisis. This often involves sending individuals for one – three months to act as shelter coordinator and in supporting roles, such as technical services, information management. When deployed, the SCT staff are hosted by the IFRC as part of the overall Movement's humanitarian response, but not part of the RC/RC operational response.

Decision-making process: The Shelter unit coordinates with the global shelter cluster to mobilise an SCT; the SCT draws on staff from different National Societies; shelter partners can also make requests for SCT.

NOTE: While there is no "trigger" within the current GRT system to activate the SCT, the SCT responds to a cluster activation or request from the affected government or the UN HCT to the IFRC for support in shelter sector coordination. The decision-making process is separate from other GRTs as the SCT is not integrated within the response hierarchy, but operates independently from IFRC/National Society response operations (firewall policy to prevent a conflict of interest between the cluster lead role and the implementation/operational role).

Coordination: The SCT plays a key role in facilitating coordination among shelter cluster partners. However, the SCT stands apart from the other global tools in that it does not provide direct support to the Movement's operational emergency response. The IFRC is the lead agency of the shelter cluster and, accordingly, it must represent and advocate the shelter sector in humanitarian coordination mechanisms, such as the HCT. As it is, SCT staff are deployed and hosted by the IFRC/National Societies and supported by their logistics and administration, however, they are not always perceived to be coordinating and informing their IFRC/NS colleagues, other than through the technical shelter reporting line.

Strengths:

- Providing a key support role to the shelter sector that strengthens the overall response
- The SCT is able to draw from across National Societies and other shelter cluster partners, forming multicultural and inter-disciplinary teams
- Raises the profile of the IFRC as a leading humanitarian agency

Weaknesses:

- Given that not all National Societies know about the IFRC's role as a shelter cluster lead, there is a risk of
 misunderstanding the deployment of SCT
- The funding of the SCT is largely conditional on an emergency appeal
- Lack of a recognised automated tool or system to manage people on the SCT roster

- A more systematic way to inform National Societies and coordinate with the Movement on needs and the deployment of the SCT
- A more stable funding system
- Flexibility to deploy SCT staff members for longer if required.

Name: Shelter Technical Team (STT)

Short description: The STT supports the design and implementation of shelter programmes, usually in large-scale crises. The STT has a range of professionals in the shelter field available for deployment (from builders to architects, all those related to the built environment) and has a roster managed by the Shelter unit in the IFRC Geneva. The STT has only been deployed officially twice – in Haiti and Philippines – although technical shelter surge has been deployed unofficially on more occasions, as a general shelter surge.

Decision-making process and coordination: The request for an STT has to come from a National Society and the IFRC regional office to the IFRC Geneva. In reality, requests are not made because the STT is not known (three out of five Regions do not have a shelter coordinator); therefore the Shelter unit has to proactively propose the STT with the regions and headquarters.

Strengths:

- Specific support for areas where National Society know-how is limited
- Availability of a broad range of shelter specialists

Weaknesses:

- The STT is not known as a separate tool within the IFRC and among National Societies so it is not requested or mobilised
- Sheltering needs are often under-recognised in disasters and the STT is not deployed (even as individual FACT)
- Lack of a clear automated tool to manage people on the STT roster
- The STT has had no formal links to FACT or RDRT, although usually reports to FACT shelter if present in the country; RDRT shelter people can also be attached to the STT

- Further promotion of the STT among National Society and IFRC staff
- Better integration with RDRT/RIT shelter delegates and GRTs in general
- A more efficient way to manage the STT roster: more reliable deployments, based on a realistic assessment of the unmet needs and likely shelter component in a EPOA, which would then attract the right professionals.

Name: Household Economic Security (HES) roster

Short description: The British Red Cross Household Economic Security (HES) roster aims to help improve the Movement partners' disaster response by providing a qualified pool of experts whose task is to assess needs and appropriate responses in economic security at various stages of the disaster-response cycle. This consistent approach to assessment, analysis and programme design is based on an economic security perspective that links household-level economic security needs with responses involving food, non-food items, productive asset replacement, income-generation projects, and cash transfer mechanisms. The purpose of the HES roster is to provide deployable, technically competent and experienced economic security delegates to the disaster-response (relief and recovery) operations of the IFRC, partner National Societies, and BRC bilateral programmes. In this way, it seeks to improve the quality of and strengthen the link between RC/RC relief and recovery responses by providing delegates who are equipped to conduct quality needs assessments. Additionally, it aims to develop and initially implement appropriate and timely responses that support household economic security, from the early stages of the emergency response, in line with the needs and priorities of beneficiaries.

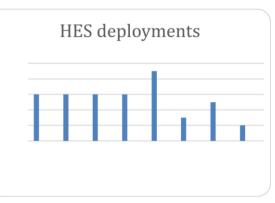
The HES roster is made up of two delegate profiles, the HES Analyst specialized in assessments and designing responses that strengthen economic security, and the HES Delegate specialized in the design and implementation of interventions that strengthen economic security.

The HES roster works on a monthly-roster approach with a HES Analyst and HES Delegate on call each month. Those on call must be ready to deploy within 48 hours of a deployment order.

There are currently 41 individuals on the HES roster. The chart below shows the number of HES deployments between 2009 and 2016.

Decision-making and coordination: Requests for HES delegates come to the British Red Cross from the IFRC, ICRC or a NS. The critical question is whether the 'ask' is a HES deployment or not. If not, the HES register may still be used, but it may be necessary to consider a wider pool of delegates, or different terms and conditions of deployment if the request is more of a consultancy task.

The British Red Cross has a commitment to maintain the HES roster until the end of 2016 but is committed to having HES resources available (whether through a roster system or in other ways) on a longer-term basis.



Strengths:

- The roster consists of multi-skilled people with
- significant experience and technical skills (particularly assessment and analysis) in household economic security.
- Roster staff are able to respond at any stage of the project cycle.

Weaknesses:

- Increasing difficulty to get people to commit to being on the roster (the commitment is for two months in order to be available for a one-month deployment)
- Challenges in keeping all roster staff up-to-date with developments in the field of economic security.

Improvements suggested:

• Find ways to better integrate / develop local and regional capacity.

Name: Cash register

Short description: Following an increase in demands to the IFRC for cash-trained and experienced personnel for emergencies, training and ongoing programming, the Cash Register was established in 2014. Developing the Cash Register was part of a larger IFRC initiative, the Cash in Emergencies Toolkit. The toolkit provides standards and tools for cash transfer programming (CTP). Out of the 140 people on the register, 40 are ERU, FACT, HES, RIT or RDRT trained and are therefore already part of the IFRC's global response system.

Along with the IFRC itself there are up to 20 National Societies involved in the Cash Register. In 2015 there were 29 deployments (of which 23 to Nepal).

The register has its own competency framework with three tiers – entry level, generalist or specialist and those on the register are classified on the basis of these profiles. Those on the register have to have undertaken IFRC's specific cash training course.

Decision-making and coordination: Requests for support from the Cash Register come from various places and can be from the surge team or directly from an IFRC operation or a National Society (such as through the Cash Peer Working Group). When a request comes in, the Cash in Emergencies Officer sends it on to the entire register asking them to respond directly to the requestor. If the request comes from an IFRC operation where there is no need for an ERU or FACT, the person from the register is hired through the appeal for that operation.

Strengths:

- Register staff can be deployed individually, as part of small teams or of a larger team, such as FACT, which is beneficial given the different types of disaster that are being responded to.
- A standardized level of training is required to be part of the Cash Register.
- The Cash Register can support all stages of the project cycle, not just emergencies.

Weaknesses:

• Requisite cash training is not always easily available, particularly for those who are on NDRTs and RDRTs.

- Integrate into the competency framework
- Ensure that some senior positions (HEOps, Field Coordinators) have some knowledge of CTP
- Deploy jointly with supply chain analysis experts.

Name: Federation Early Recovery Surge Team

Short description: FERST is not a team but more a collection of resources, tools and trained individuals that can be mobilised to provide a recovery aspect of a response, including: Recovery Assessment Teams (such as for post-Ebola); Transitional Planning Assistance Team assessments following the Pakistan floods in 2010 or varieties of these, such as recovery frameworks (including the 2015 Nepal earthquake); an extended early-recovery role within FACT, such as the deputy Team Leader; individual deployments (including the Assessment Team Leader in Kyrgyzstan and the Food Security Deputy Team Leader in Ethiopia in 2011). To date three groups of National Society and IFRC staff and volunteers have been trained to be part of FERST deployments.

Decision-making process and coordination: The FERST has no formal trigger or integration within the GRTs. In theory, the relevant IFRC and National Society headquarters and field operational staff should identify the needs for FERST and mobilise the necessary resources. The FERST has no clear ownership in the IFRC headquarters, and currently has two specialists at the British Red Cross in operational roles linked, but not central, to recovery. This is a challenge. Therefore, in practice, the responsibility for activating FERST resources and tools lies with individuals within the National Society and the IFRC who are aware of their existence. The individuals can find funding as well as mobilise the necessary qualified staff. As a result, the integration of aspects of recovery and transition into the crisis response is inconsistent.

Strengths:

- Specialized guidance and expertise on recovery aspect
- The tool's diversity of approaches

Weaknesses:

- Lack of systematic integration and ownership of the tool
- Limited deployments

- A reinforced integration of FERST and recovery concepts within the GRTs
- Clarity regarding ownership and "focal point" for FERST within the IFRC Geneva and consequent revitalisation of the tool
- A clear "trigger" for the deployment of FERST resources in a crisis.

Name: ICRC Rapid Deployment Mechanism (RDM)

Short description: The RDM was created in 2001 as a way to bring additional capacity for rapid response to emergencies, beyond the delegation's operational capacity. It is designed to compensate for a general loss of emergency response capacity in the humanitarian sector, and to ensure that scale-up can be quick and professional. There are 24 competencies (see text box), which are filled firstly by ICRC staff members on a rota basis (an internal register of 400 – 500 individuals), then can be increased by various National Society capacities in personnel, teams and equipment. The medical ERUs (hospital and surgical) are the most frequently used National Society capacities.

Decision-making process and coordination: ICRC headquarters will usually decide when the RDM is to be activated and what resources are required (push factor), although it will be in consultation with the affected delegation (which should normally request the required resources). Personnel are usually deployed for an initial 30 days, but this can be extended. If needed, National Society capacities will be called upon (when the NS has a Framework Agreement with the ICRC). The IFRC will be informed, and the National Society deployed on the strength of a deployment agreement.

Strengths:

- Reliable and available immediately
- Clear and simple process for deployment, clear roles and responsibilities
- Good use of NS capacities in high profile situations (medical ERUs)

Weaknesses:

- Poor integration with the IFRC GRT system
- NS capacities (other than medical) used only as a last resort

Improvements suggested:

- Alignment of competencies between IFRC and ICRC
- Joint teams for assessment, coordination whenever suitable
- Joint (or complementary) SOPs with IFRC system.

RD Capacities

Information Management Communication Information Communication Technologies **Movement Cooperation** Relations with Arms Carriers Legal Advice Operations Multilateral Liaison Finance and Administration Logistics Water and Habitat **Forensic Services** Health **Economic Security** Weapon Contamination Management Support Security and Crisis Management Support Protection **Restoring Family Links** Reporting and Donor Relations Staff Health Medical Advice Stress and Resilience Advice Human Resources