



# Contingency Planning Guidelines



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## **INTRODUCTION**

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This guide to CARE Contingency Planning (CP) is a part of the CARE Emergency Preparedness Planning Guidelines (EPP) Guidelines (click to open: [..\1.EPP Guidelines\1.EPP Guidelines.doc](#)). The guide is accompanied by Contingency Planning Workbook (click to open: [4.Contingency Planning Workbook.doc](#)) and is designed to provide standardized templates for development of Country Office Contingency Plans.

Contingency Plan should be developed at the onset of a specific emergency, and should be based on the existing Country Office Emergency Preparedness Plan.

Terminology used in the guidelines adopted from the “Living with Risk - A global review of disaster reduction initiatives”, 2004 version. Inter-Agency Secretariat of the International Strategy for Disaster Reduction (UN/ISDR). Click the link to open: [..\3.Reference Materials\Various materials\Terminology.pdf](#)

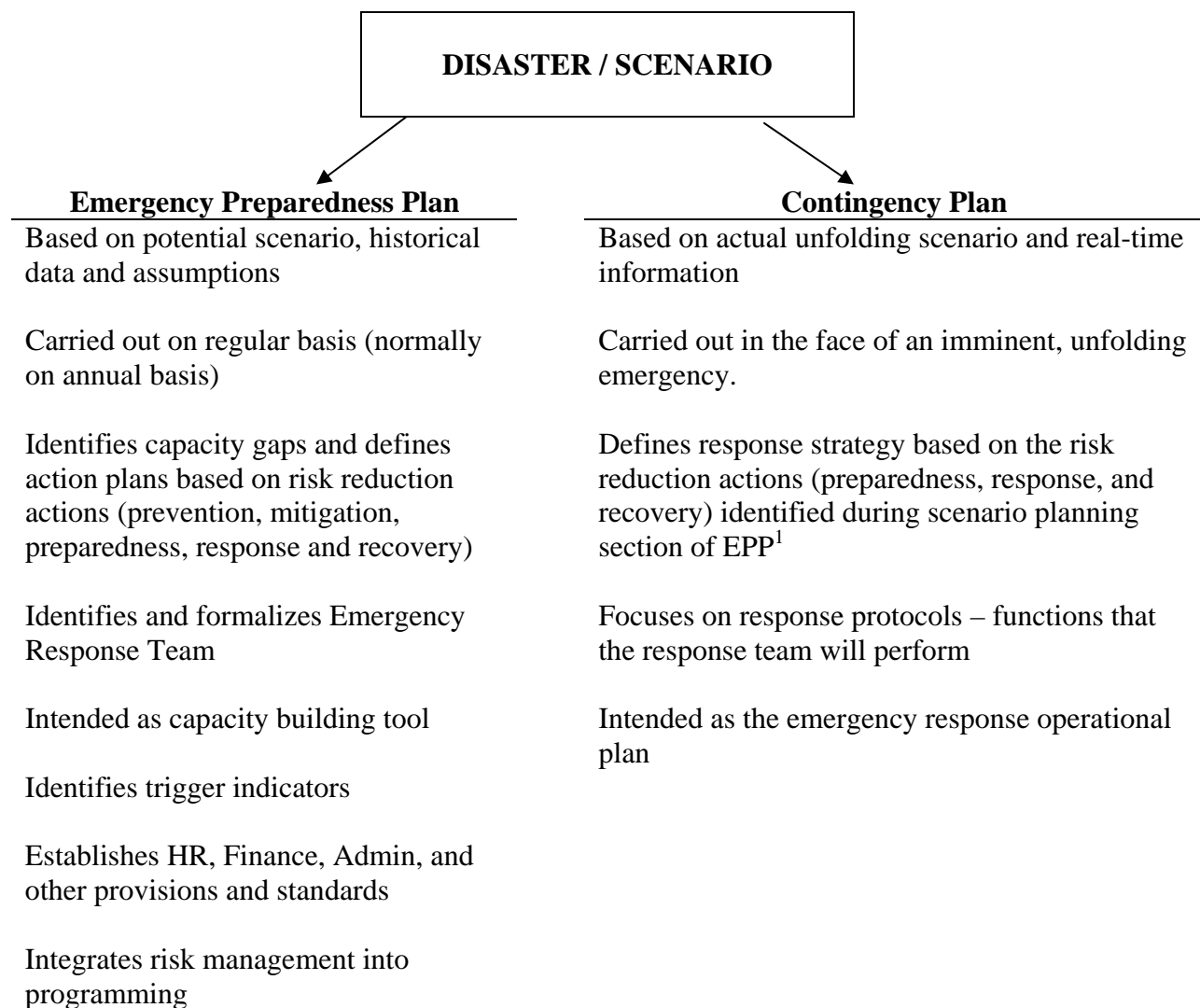
CARE Emergency Preparedness Planning and Contingency Planning Guidelines and Workbooks are available both in hard copy and electronic format. Reference Materials are only available in electronic format on the accompanying Compact Disc.

For easy navigation through the EPP and CP Guidelines and Workbooks in electronic format, have the Document Map option activated in Microsoft Word. To activate this option, click VIEW and then DOCUMENT MAP. Also, note that the Table of Content and text in these documents are hyperlinked, and can be followed by Ctrl + clicking the blue underlined links.

## EMERGENCY PREPAREDNESS AND CONTINGENCY PLANNING

Both Emergency Preparedness Planning (EPP) and Contingency Planning (CP) are scenario based planning tools used to ensure that adequate arrangements are made in anticipation of crisis. These are processes of developing strategies, arrangements and procedures to address the humanitarian needs of those adversely affected by the crisis. In other words, EPP and CP are simply making plans to respond to a crisis or emergency. However, while EPP is a tool to plan for **potential** emergencies, the CP is a tool to develop a detailed plan to respond to a **specific** crisis. While EPP normally is a regular (annual) planning exercise, CP takes place at the onset of a particular emergency. Ideally, the CP is based on the country office Emergency Preparedness Plan, and moves the EPP to the next level of detail to help CARE operationalise its response.

The following are the major characteristics of EPP and CP:



<sup>1</sup> If this particular scenario was not considered in the EPP then it has to be developed during the Contingency Planning process

Contingency Planning refers to planning for a specific emergency. When a specific emergency is faced, Contingency Planning is to be initiated so as to put in place all essential measures to ensure timely and effective emergency response.

### **CONTINGENCY PLANNING STEPS**

Contingency Planning follows the same planning format as the Emergency Preparedness Planning, and includes the following steps:

1. Formation of Emergency Response Team
2. EPP Review and Information Collection
3. Scenario Description
4. Impact Analysis
5. Identification of Preparedness, Response, and Rehabilitation measures
6. CARE Response Interventions
  - 6.1. Criteria for Engagement
  - 6.2. Service Gap Analysis
  - 6.3. Geographical Focus
  - 6.4. Objectives of the Intervention
  - 6.5. Key Response Actions
  - 6.6. Entry and Exit/Transition Strategy
7. Local Considerations
8. Programming Considerations
9. Management Considerations and Gap Analysis
10. Action Planning

The following sections below contain instructions on how to prepare the written Contingency Plan using the attached CP Workbook. The workbooks can be opened by clicking here:

[4.Contingency Planning Workbook.doc](#)

## **1. FORMATION OF EMERGENCY RESPONSE TEAM**

Ideally the Country Office Emergency Response Team (ERT) should be established during the emergency preparedness planning, i.e. well in advance of the unfolding emergency situation. However, if ERT has not been established, follow the instructions below to form the ERT.

The purpose of ERT during the emergency is to carry out the Country Office response actions. ERT should be organized based on specific minimum functions that should be activated during an emergency. These functions include:

1. Emergency Response Coordination
2. Field Coordination
3. Logistics/Procurement
4. Information Management
5. Security

In addition to these minimum functions the ERT should include members with the following emergency functions:

6. Administration
7. Human Resources
8. Finance
9. IT and Telecommunication
10. Media
11. Fundraising (Program design/proposal writing)
12. Government Liaison
13. Representatives from the Field Offices

Overall, the ERT should consist of 5-15 members, with the Emergency Response Coordinator (ERC) to lead and coordinate activities of the team. Each member of the ERT should have clear roles and responsibilities both for the preparedness and response phases. Job Descriptions of each ERT member should reflect those additional or “shadow” roles and responsibilities. (Refer to attachment for generic CARE International TORs for various emergency functions ..\3.Reference Materials\Human Resources\CERT TORs).

The ERC in an emergency situation should be solely devoted to coordinate emergency activities and shall not be involved in other day-to-day programming matters of the CO which should be delegated to other members. An ERC who continues to manage his/her portfolio as a Project Manager or a Sector Coordinator during an emergency will not be able to function effectively in such situations.

The ERT structure should be articulated as part of the overall Country Office organisation chart so that everyone understands the reporting lines and how the ERT structure fits as part of the regular structure.

## **2. EPP REVIEW AND INFORMATION COLLECTION**

During this step the ERT members should review the Country Office Emergency Response Plan, particularly if the unfolding scenario has been considered in the EPP document. In addition, the CO should identify what additional and current information is necessary for developing the Contingency Plan. This information may include:

- Type of unfolding emergency.
- Impact of the emergency, including geographical areas affected, number of people affected in each area.
- Measures undertaken by the Government, UN, International and Local NGOs in response to the current emergency.

## **3. SCENARIO DESCRIPTION**

The scenario description should be as detailed as possible, and should provide sufficient information on what is happening, where, how communities are being affected, who is being affected, what is the capacity of affected population to cope and what are their coping strategies, what are the most immediate needs of the affected population,

## **4. IMPACT ANALYSIS**

At this stage the ERT should discuss, analyze, and identify social, economic, physical and environmental impacts of the unfolding disaster. These can be large or small scale, long or short term impact of the event. At this stage it is important to brainstorm and discuss all potential impacts, and not to focus only on those that CARE can address. Use the following key questions to help identify the impact:

- What are the impacts on the environment including land, water, and other natural resources?
- What is the impact on physical infrastructure, such as roads, buildings, power lines, water supply systems, sewage systems, communication systems, etc?
- What is the impact on health care and education systems?
- Is the disaster affecting the health status of the population? Is there a potential for disease outbreak?
- What is the impact on national, regional and local economy?
- What is the impact on household economy? What is the major income of the local household? How would it be affected?
- Is the event going to cause migration of population?
- How is the safety and security of the communities going to be affected?
- Are the local and governmental services being disrupted?
- Are local businesses being affected? How?

## **5. PREPAREDNESS, RESPONSE, AND RECOVERY MEASURES**

At this stage ERT should identify ALL preparedness, response, and rehabilitation measures (not only those that CARE should/can focus on) to reduce impact of the disaster.

**Preparedness** activities are specific measures taken before disasters strike, usually to forecast or warn against them, take precautions when they threaten and arrange for the appropriate response (such as organising evacuation and stockpiling food supplies). In many ways, preparedness is part of mitigation—measures that can be done in advance in anticipation of probable events. What is different is that preparedness measures are taken in the more immediate phase before a hazard event strikes. They are conducted when it is obvious that a risk will occur, irrespective of how much CARE has mitigated against the risk. Examples of preparedness measures could include early warning to communities, organizing an evacuation or pre-positioning of essential commodities and response stocks, or recruitment and training of additional staff. Conducting a ‘good enough’ conflict analysis is another example of a preparedness action for conflict related scenarios.

**Response** actions are taken to provide immediate assistance to fill gaps in community capacities. Although the impact of disasters can be reduced, often it is impossible to prevent the event from happening. Therefore, it is still critical that CARE remains continually in a state of readiness to respond. It is important to remember that communities are the FIRST responders. Identifying and enhancing their abilities and technical expertise and establishing local mechanisms are crucial to appropriate response. **Recovery/rehabilitation** actions are longer term activities to assist communities in rebuilding/restoring the damages caused by the disaster. Some examples of the rehabilitation activities include rehabilitation/reconstruction of roads, bridges, buildings, dams, water supply and irrigation systems, etc.

For more information on Risk Reduction Measures refer to CARE Emergency Preparedness Guidelines ( [..\1.EPP Guidelines\1.EPP Guidelines.doc](#) )

## 6. CARE RESPONSE STRATEGY

If the decision to engage in a response has been made, the CO needs to define objectives of the intervention, geographic focus, trigger indicators, key interventions, and entry and exit strategies.

### 6.1. CRITERIA FOR ENGAGEMENT

Before CARE response actions can be planned, Country Office needs to review the Criteria for Engagement (developed during the Emergency Preparedness Planning) and decide whether or not CARE should respond to the unfolding emergency.

If criteria for engagement have not been not developed during the EPP it should be developed during the Contingency Planning. Determine how many criteria should be present before a response is triggered. Some examples of engagement criteria provided in the Contingency Planning Workbook [4.Contingency Planning Workbook.doc](#)

Note that the CARE International Emergency Strategy (click to open: [..\3.Reference Materials\CI Emergency Strategy\CARE Emergency Strategy Summary.doc](#) ) suggest that in the countries where CARE is present, “we should respond to all emergencies in country office operational areas within countries; and all major emergencies in the country”. “Where CARE is not present, or has limited presence, we should consider responding to all major emergencies and should at least conduct an assessment, consider both direct & value-added

partnership options, decide on response based on the above factors, and we should make a statement explaining the decision.”

## **6.2. SERVICE GAP ANALYSIS**

Service gap analysis is a critical step in the process of disaster response between assessment and response planning. This step looks at the expected gaps in the overall response to the unfolding scenario and requires detailed information about other key players’ capacities and plans. CARE response strategy needs to consider being complementary to the efforts of the other players.

Service gap analysis includes mapping of other key actors capacities and plans (which might have been done partly by other players like UN or national government). These capacities are to be projected on the needs by sector and geographical region. The resulting identified service gap is a prime indicator for where CARE could bring in its resources. Other factors might be for example the COs ongoing geographic presence and sectoral capacities and existing government plans for response.

ERT should identify if the cluster approach has been developed and practiced by NGOs, UN and International organisations. The cluster leadership approach has been practiced in many countries as a mechanism that can help to address identified gaps in response and enhance the quality of humanitarian action by strengthening partnerships between NGOs, international organizations, the Red Cross and Red Crescent Movement and UN agencies. The cluster leadership approach can be used in both conflict-related humanitarian emergencies and in natural disaster situations. For more information on Cluster Leadership Approach click to open: [..\3.Reference Materials\Various materials\Preliminary Guidance Clusters - FINAL.DOC](#)

## **6.3. GEOGRAPHICAL FOCUS**

Depending on the type and scale of the disaster the ERT may need to identify those geographical areas where CARE will be best positioned to respond. This will depend on a number of factors, such as the current geographic focus of CARE programs in the country, impact of disaster in various geographic areas, as well as the capacity of government and other organisations to respond.

## **6.4. OBJECTIVES OF CARE INTERVENTIONS**

As with any project design process, good objectives are essential to a successful plan. The objectives should be specific and clearly linked to the scenario. ERT should discuss and define what are the short term and long term goals of the CARE intervention. Is CARE going to provide only a short term immediate relief? Does CARE intend to engage in the longer term rehabilitation and development activities in the area?

## **6.5. CARE RESPONSE INTERVENTIONS**

Based on the response measures identified earlier, the ERT should identify those activities that will be carried out by CARE in response to the emergency, including the type of

intervention, target beneficiaries, number of beneficiaries, geographical area, mode of implementation (direct, partnership, mixed), and main partners.

## **6.6. ENTRY AND EXIT/TRANSITION STRATEGY**

Based on the objectives and activities of CARE interventions, ERT should define the strategy to start the response operations, as well as exit from the emergency response or transition from short term relief activities into longer term rehabilitation and development programs.

The following questions help to define entry and exit/transition strategies:

- What are the short term and long term goals of the CARE response actions? How these will be achieved?
- Does CARE have a presence in the affected geographical area? If yes, what type of programming is currently being implemented?
- How will CARE switch from the current programming to the emergency response activities. What type of actions would it require?
- If CARE does not currently have presence in the area, what actions would be required to start the response operations?
- Is CARE going to carry out the activities directly or with partners?
- What potential harm can be done through these activities? See CARE Benefit-Harms Tools for more information on this – click to open: [..\3.Reference Materials\CARE Benefits-Harms Tools 01](#)
- How will CARE ensure internationally recognised minimum standards are met? Refer to Sphere Handbook for more information on these standards: [..\3.Reference Materials\SPHERE\Sphere Handbook.pdf](#)
- How CARE is planning to phase out from the response actions at the end of the emergency?
- If the CARE objective is to provide long term assistance to the affected population, what type of programs will CARE be implementing upon the completion of the immediate relief operation?

## **7. LOCAL CONSIDERATIONS**

During this step the ERT should identify critical issues that may affect Country Office ability to adequately prepare and respond to the emergency. ERT should examine specific country-level issues and identify information that needs to be considered during the emergency operations, such as language, culture, economy, infrastructure, security, political or ethnic tensions, local organisations, and local government. These considerations may influence some of the ways CARE prepares or responds to emergencies as well as advise CEG/HQ of critical contextual factors for their support considerations.

## **8. PROGRAMMING CONSIDERATIONS**

At this stage ERT should review programming considerations to ensure that the identified actions are in line with CARE mission and adhere to CARE and internationally recognized standards. This piece of the plan should quickly brief program managers who will face important decisions around design and approach at the onset of an emergency. During this step the ERT should consider the CI Emergency Strategy and Programming Principles, Rights Based

Approaches, gender and marginalised groups related issues, protection issues and psychosocial support, conflict assessment and issues related to civil military relationships. Refer to CARE Emergency Preparedness Planning Guidelines ( [..\1.EPP Guidelines\1.EPP Guidelines.doc](#) ) for more information these.

## **9. MANAGEMENT CONSIDERATIONS AND GAP ANALYSIS**

At this stage ERT should review operations and management considerations, including program management (assessment, M&E, fundraising, media, information management, staffing) and strategic support functions/units (administration, procurement, logistics, human resource, finance, IT, security). Country Offices should first define the purpose of each sector/unit during the emergency, then identify ideal level of preparedness, analyse the current level of preparedness, and identify actions required to improve the level of preparedness (including system development, and training/capacity building actions).

### **9.1. PERSONNEL REQUIREMENTS**

During this step the ERT should define the detailed staffing structure for the emergency operations, including the program and program support in the central office and field offices.

#### **Goal and objectives during emergency:**

- Ensure effective and timely implementation of the Emergency Operations.

#### **Required capacity and level of preparedness:**

- Organisational chart for Emergency Programs defined
- Clear lines of authority and communication defined
- Roles and responsibilities defined
- Personnel for the key positions identified

#### **References:**

Sample emergency programs organisation charts: [..\3.Reference Materials\Human Resources\Emergency Staffing Structure-Niger.xls](#) and [..\3.Reference Materials\Human Resources\Emergency Staffing Structure-Sri Lanka.xls](#).<sup>2</sup>

### **9.2. ASSESSMENT AND ANALYSIS**

#### **Goal and objectives during emergency:**

- Assessments provide an understanding of the disaster situation and a clear analysis of threats to life, dignity, health and livelihoods to determine in consultation with the relevant authorities, whether an external response is required, and if so, the nature of the response
- Provides immediate assessment of a rapid on-set emergency as well as continual review and updating for slow on-set
- Ensures capacity in reviewing scenarios and on-set of emergencies.

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<sup>2</sup> It should be noted, that the given examples are illustrative to support Country Offices with identification of categories of personnel that may be required during the emergency. Each Office should consider their specific needs and country context.

**Required capacity and level of preparedness:**

- Assessment format is available in the Country Office, including:
  - ✓ Clear Objectives
  - ✓ Appropriate Team Composition
  - ✓ Logistical support
  - ✓ Information Requirements
  - ✓ Guidelines and tools
  - ✓ Data Collection Methods
  - ✓ Informants
  - ✓ Analysis Frameworks
  - ✓ Recommendations
  - ✓ Reporting
- Assessment team/staff have been identified and assessment training conducted to:
  - ✓ Team Leader
  - ✓ Program
  - ✓ Logistics
  - ✓ Security
  - ✓ Technical sectors- health, watsan, food, shelter
  - ✓ Media

**Key questions for consideration:**

- Who in the country (UN, Government, Red Cross, NGOs) is normally responsible for assessment?
- Are assessments usually inter –agency, multi-functional, multi-sectoral teams?
- What information is gathered for each stage of the emergency (early warning, deployment, immediate response, consolidation)
- Who, how and where is training conducted for these assessment teams?
- What standards or criteria are used?
- Do assessments take into consideration rights, gender, local capacities?
- Who will do the assessment?
- What formats will they use?
- Does the Country Office have staff trained in assessment?
- With which partners the assessments will be conducted?
- How the data will be analysed?
- How the information will be communicated?

**References:**

- “Sphere handbook 2004, Common standard 2: initial assessment”, page 29:  
[www.sphereproject.org](http://www.sphereproject.org) or [..\3.Reference Materials\SPHERE\Sphere Handbook.pdf](#)
- Field Operations Guide For Disaster Assessment and Response, USAID, Chapter 2 – Assessments: [..\3.Reference Materials\Various materials\USAID Field Operations Guide Ver 4 0.pdf](#)
- Quick guide on Assessment in Emergencies: [..\3.Reference Materials\Assessment\Assessments.ppt](#)

### 9.3. DESIGN, MONITORING AND EVALUATION

#### Goal and objectives during emergency:

- Provides the strategy and direction for developing programming for mitigation, preparedness and response activities including the ability for CARE to analyze and assess the impact these programs have in reducing risk.
- Maintain quality of implementation of emergency response according to CARE guidelines
- Provision of high quality information for CARE management to make decisions
- Ensure CARE's accountability throughout emergency response

#### Required capacity and level of preparedness:

- Focal person dedicated full time to DM&E identified.
- Monitoring system and formats developed using and addressing Sphere Standards, Participation, Gender, Vulnerable groups.
- DM&E standards linked with existing projects, integrating emergency and development into single DM&E procedure.
- Early Warning Systems, both formal and informal, are included in DM&E.
- The CO is aware and capable of conducting the six weeks Post Event Evaluation required by CEG.
- Information flow is continual between CARE and communities/partners, enhancing community ownership and response to data collected and its analysis.

#### Key questions for consideration:

- How can CO current DM&E tools and processes be adapted for use in an emergency?
- Does the Country Office have systems in place to ensure regular collection of information in each of the technical sectors and to identify whether the indicators for each standard are being met?
- Are women, men and children from all affected groups are regularly consulted and are involved in monitoring activities.
- Are the programmes evaluated with reference to stated objectives and agreed minimum standards to measure its overall appropriateness, efficiency, coverage, coherence and impact on the affected population?
- Does the monitoring and evaluations take into account the views and opinions of the affected population, as well as the host community?

#### References:

“Sphere handbook 2004”, page 35: [www.sphereproject.org](http://www.sphereproject.org) or [..\3.Reference Materials\SPHERE\Sphere Handbook.pdf](C:\3.Reference Materials\SPHERE\Sphere Handbook.pdf)

### 9.4. HUMAN RESOURCE UNIT

#### Goal and objectives during emergency:

Ensure appropriate policy, procedures and systems are in place to support an emergency response, including any necessary adjustments to existing policy and procedures. Identify and deploy experienced staff through internal deployment, external recruitment, and standby arrangements with partners. Ensure that CARE ongoing programs continued with minimum

disruption during emergency. Recruitment shall be undertaken in a manner of fairness and respecting CARE Core Values, without any discrimination. HR plays a role in the organization structure planning and other strategic decision making for emergency planning and responses (safe staff arrivals, orientation and staff support).

**Required capacity and level of preparedness:**

- Emergency Response Team Identified
- Emergency Program Organization Chart in place
- Job Descriptions of ERT members updated to include additional roles in emergencies
- Succession Plan in place – to ensure Business Continuity, by anticipating the impact of emergency programming on CAREs operations and staff.
- Emergency Hiring Procedures updated (how to expedite hiring, how to call upon CERT and CI for additional staff)
- Databases of existing, former, and potential staff updated.
- Stress Management Plan in place – to ensure provision of ongoing or emergency stress management support.
- Staff Emergency Record updated.
- Antiterrorism requirements (OFAC) followed. This prohibits CARE from dealing with terrorists, including persons on various antiterrorism lists created by the State Department, FBI, Treasury, etc., and persons we reasonably suspect support terrorist activity even if they are not on lists.
- Orientation for all new staff provided, and Orientation Package (preferably both in hard copy and electronic format) updated to include the recent information (see reference below)
- Ensure appropriate conditions, benefits and support are provided to all staff, including, R&R provisions, Insurance, Health and psychosocial support, Living conditions and provisions
- Have up to date personnel contracts and files and ensure contract closure occurs for short term staff.

In addition, the HR Unit needs to ensure CARE staff Safety, Security and Welfare. Although all humanitarian workers are exposed to risks to their physical and psychological safety, emergencies pose a particular hazard because of the difficult operating environments, the urgency of response and long hours in the field, and exposure to dead bodies and/or engagement with survivors of natural disasters and armed conflict. Key questions to on the staff safety, security and welfare:

- ✓ Are CARE staff adequately trained in emergency safety and security protocols?
- ✓ Is there a comprehensive stress management plan in place?
- ✓ Have staff been briefed on the possible psychosocial consequences of an emergency assignment and have they assessed their self-care strategies?
- ✓ Do senior managers and team leaders have people-management skills appropriate to emergencies?
- ✓ How will all staff responding to the emergency be assured access to individual or group consultations to review and assess their experience?
- ✓ Have additional staff welfare resources been identified and are there ways to rapidly access these resources if needed?

**References:**

- CARE Orientation Package template: [..\3.Reference Materials\Human Resources\CARE Orientation package.doc](#)
- CARE Safety and Security Handbook: [..\3.Reference Materials\CARE Safety and Security Handbook](#)

**9.5. FINANCE****Goal and Objectives:**

- Ensure the establishment of an efficient financial management structure for effective implementation of the program.
- Coordinate cash, cash flows and donor reporting for all projects and program support.
- Design and Effective Management of Budgets
- Effective cash flow and management in field
- Adequate capacity to cope with increase in funds and transactions
- Appropriate systems for many different and new donor funds in small amount of time
- Rapid and appropriate procedures including levels of authority and signatures which allow rapid procurement but appropriate level of accountability.

**Required capacity and level of preparedness:**

- Finance Manual is updated and includes emergency situations
- Authorization levels of approval of expenditure for emergency situation
- Increased level of signatory authorities for the key field staff
- Revise the existing cash flow procedures to reduce time required to approve and process payments, without compromising on accountability, transparency and integrity.
- Effective cash management procedures established– making sure that sufficient cash is always available in the bank account
- Expedited preparation and submission of financial reports
- Potential staff to work in emergency finance management identified
- Emergency field office cash flow controls and cash handling for insecure situation are in place
- Ensure proper coordination with the program and emergency units
- Provide daily cash management updates and cash positions, updates on budgets and expenditures, and funding matrix/portfolio
- CO has understanding of donor requirements for emergency contexts

**References:**

Financial Management for Emergencies (FME): [..\3.Reference Materials\Finance\Finance in Emergencies\default.htm](#) or download latest version from: [www.fme-online.org](http://www.fme-online.org)

**9.6. ADMINISTRATION****Goal and Objectives:**

- Ensure establishment of an efficient administrative management structure that provides timely support for effective implementation of the program.

- Effective administrative procedures used at national and field levels
- All assets and inventory requirements are effectively managed
- Effective fleet management to meet emergency needs
- Administrative support provided to staff and visitors for travel, accommodations, supplies and provisions
- Compliance with all Government requirements and permits
- Offices, houses, warehouses and other buildings rented, equipped and maintained

**Required capacity and level of preparedness:**

- Current and appropriate procedures which permit a rapid and effective response.
- Clarity of roles and responsibilities.
- Procedures and forms in place in national and field office levels for
- Job descriptions in place for administrative staff in emergencies
- Filing system in place
- Fleet management system in place
- Government requirements and systems well understood
- Rental agreements available
- Offices have back up systems in place
- Communication equipment is available and functional (hand-held radios, mobile and land-line phones, etc)
- All import, shipping, customs clearance, travel and other authorizations are obtained and in place
- Back-filling plan prepared to analyse and plan for impact of mobilising of resources for, or shifting to emergency response, on the ongoing programs

**9.7. PROCUREMENT****Goal and Objectives:**

- Timely procurement of goods and services for effective implementation of the program in adherence to donor requirements and CARE policies.
- Ability to procure internationally.
- Required supplies, specifications and sources quickly identified.

**Required capacity and level of preparedness:**

- Procurement policy for emergency situation in place
- Knowledge of international procurement and import requirements
- Knowledge of major donor procurement guidelines/ changes in emergency situation
- Knowledge of the latest customs clearance regulations for import and export.
- Knowledge of prohibited items.
- Supplies likely to be required in emergency scenarios documented and suppliers identified
- List of providers and preferred vendors exists and is updated to include vendors of emergency supplies.
- Regular reporting system exists.

## **9.8. PROGRAM LOGISTICS**

### **Goal and Objectives:**

- Transportation, warehousing, dispatch and distribution of supplies and commodities to the program areas in a timely manner in adherence to donor requirements and CARE policies.
- Maintenance of controls and inventory system.
- Coordination with other authorities and stakeholder to ensure effective logistics

### **Required capacity and level of preparedness:**

- Appropriate plans for storing, transporting and distribution of materials in place
- Contracts/MOU with key service providers are developed and ready to be activated (e.g. with private contractors, government, UN and other agencies)
- Reliable transportation service providers identified.
- Appropriate warehousing management procedures in place.
- Inventory management and control system in place.
- Staff trained in management of program logistics.
- Good contacts with authorities and other agencies on logistics matters.
- Security procedures in place

## **9.9. INFORMATION TECHNOLOGY AND TELECOMMUNICATIONS**

### **Goal and Objectives:**

- Ensure rapid establishment of appropriate information technology and telecommunications services in the emergency areas, including internet connection, landline and mobile connections, faxes, satellite phones, radios, etc.

### **Required capacity and level of preparedness:**

- Likely impact of the emergency on IT and telecommunication analysed, and appropriate plan developed.
- Potential requirements on number and type of computing, printing, and telecommunication equipment identified.
- IT Staffing requirements identified
- Back up communication plan prepared.
- Potential internet providers identified.
- Potential telephone communication providers identified
- Government regulations on import and use of radio, satellite, and telecommunication equipment identified.
- Interagency telecommunication coordination mechanisms identified, and agreements with UN or other agencies developed for access to their communications systems in event of crisis.

### **Reference:**

CARE IT Standards and Guidelines 2005: [..\3.Reference Materials\Information Technology\CARE IT Standards and Guidelines 2005.doc](#)

## 9.10. SECURITY

### Goal and Objectives:

- Ensure safe access to affected populations, and the safety and security of staff and assets.
- Undertake risk and threat assessment to determine the exact nature of crisis, potential developments, and implications for program delivery and staff security.
- Undertake a rapid review of security preparedness in country and field offices and provide appropriate guidance, resources and training.
- Define appropriate responses to risks and apply preventative safety and security measures
- Ensure effective information sharing among humanitarian community regarding safety and security risks
- Manage appropriate responses to crisis situations (e.g. accident, injury, kidnapping)
- Ensure policies and procedures for safety and security are well understood and adhered to.

### Required capacity and level of preparedness:

- Identified and trained focal point for Security
- Evacuation plans are in place and practiced
- Identify key risks and corresponding security measures for emergency scenarios
- Safety and security monitoring system in place.
- All staff completed CARE Safety and Security training, and understand safety and security measures to be applied in emergency
- External relationships with UN, Police, and Government officials identified and practiced

### Reference:

CARE International Safety and Security Handbook (in five languages) [\3.Reference Materials\CARE Safety and Security Handbook](#)

## 9.11. FUNDRAISING

### Goal and Objectives:

- To ensure that adequate financial resources are available for the mitigation, preparedness and response measures.
- Situation Awareness, Donor and Sector Awareness, and Proposal Development.
- Public Fundraising activities- press, appeals, stories and photos
- Provide information, stories and photos for fundraising purposes

### Required capacity and level of preparedness:

- Have relevant formats and guidelines for emergency funds easily accessible
- Have contact details for donors and CARE members updated.
- Maintain good relationships with CARE members, donors and UN agencies
- Ensure awareness of different types of funds and donors available and how to access them, such as:
  - CARE emergency response funds
  - Bilateral
  - Multilateral and UN

- Private foundations
- Public appeals
- Access to or capacity to write human interest stories and take photos.
- Identify person responsible for donor liaison.

## **9.12. MEDIA**

### **Goal and Objectives:**

- External Liaison and Communications in a professional manner: with international and local journalists, filmmakers, and photographers
- Raise awareness internationally and promote fundraising

### **Required capacity and level of preparedness:**

- Focal points (authorised spokesperson) for the main office and sub offices identified
- Key messages developed
- Focal points trained in media relations, media monitoring and evaluation
- Staff are trained how to deal with media
- Documentation on CARE activities and programs developed and available (reports, stories, photos, etc)

## **9.13. INFORMATION MANAGEMENT**

### **Goal and Objectives:**

- Gather and disseminate information on the emergency situation and CARE's response back to CARE International Member offices for use in emergency response, fundraising and communications activities.
- Ensure appropriate and effective internal information flow to CI, CARE Lead member, and other Country Offices.
- Quality information gathered, processed and disseminated
- Generation of reports and response to requests for information

### **Required capacity and level of preparedness:**

- Focal point (a person with superior written communications skills, and three to five years writing experience) for information management is identified
- Internal reporting/information sharing mechanism established
- Identify central location of data and information
- Focal point and other staff trained and familiar with formats of Situation reports, Alerts, Assessment Reports, and other formats.

### **References:**

- CARE Emergency Alert Form: ..\3.Reference Materials\CI Emergency Forms and Guidelines\CARE Emergency Alert form.doc
- CARE Situation Report Form: ..\3.Reference Materials\CI Emergency Forms and Guidelines\CI Emergency Sitrep Form.doc

#### **9.14. OTHER FUNCTIONS**

Analyze other functions or units in the Country Office (if any) in accordance with the instructions given in the previous sections.

### **10. ACTION PLANS**

Identifying processes to accomplish preparedness, response, and rehabilitation measures will lead to action plans. Country offices should identify critical actions to be completed in the review periods, assign actions to individuals and set time frames for completion to address these capacity gaps. Country Offices should consider what financial and other resources are necessary to complete these tasks.

The action plan should include the following sections

- Staff development needs, such as formal training sessions, temporary duty assignments (TDY), or Experiential Learning Opportunities (ELO)
- Organisational capacity building needs, such as development/updating of manuals and procedures
- Infrastructure/equipment related needs, such as purchase of equipment or setting up communication infrastructure.

It is important for action plans to be practical, concrete, and achievable within a certain time frame. Country Offices also should look to partners to help fill capacity gaps that cannot be addressed internally.

## **11. REFERENCES<sup>3</sup>**

- 11.1. CARE International Emergency Strategy: [..\3.Reference Materials\CI Emergency Strategy](#)
- 11.2. CARE International Emergency Forms and Guidelines: [..\3.Reference Materials\CI Emergency Forms and Guidelines](#)
- 11.3. CARE USA Emergency Response Fund (ERF) Guidelines, Policies & Procedures: [..\3.Reference Materials\ERF Guidelines](#)
- 11.4. Country Office Emergency Protocols: [..\3.Reference Materials\CARE Emergency Protocols](#)
- 11.5. CARE Safety and Security Handbook: [..\3.Reference Materials\CARE Safety and Security Handbook](#)
- 11.6. CARE Food Manual: [..\3.Reference Materials\CARE Food Manual](#)
- 11.7. CARE Benefits-Harms Tools: [..\3.Reference Materials\CARE Benefits-Harms Tools 01](#)
- 11.8. Assessment: [..\3.Reference Materials\Assessment](#)
- 11.9. Finance: [..\3.Reference Materials\Finance](#)
- 11.10. HIV and AIDS: [..\3.Reference Materials\HIVAIDS](#)
- 11.11. Human Resources: [..\3.Reference Materials\Human Resources](#)
- 11.12. Information Technology: [..\3.Reference Materials\Information Technology](#)
- 11.13. Partnership: [..\3.Reference Materials\Partnerships](#)
- 11.14. Procurement: [..\3.Reference Materials\Procurement](#)
- 11.15. Rights Based Approaches: [..\3.Reference Materials\Rights Based Approach](#)
- 11.16. Sexual Exploitation: [..\3.Reference Materials\Sexual Exploitation Materials](#)
- 11.17. Good Practice Review, Mitigation and preparedness in development and emergency programming, John Twigg: [..\3.Reference Materials\Various materials\HPN Good Practice Review Risk Management](#)
- 11.18. Avian Influenza: [..\3.Reference Materials\Various materials\CARE Avian Influenza Booklet 2006.pdf](#)

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<sup>3</sup> The reference materials are available in electronic format on the accompanying Compact Disc.

- 11.19. Terminology (Adopted from: Living with Risk - A global review of disaster reduction initiatives, 2004 version. Inter-Agency Secretariat of the International Strategy for Disaster Reduction (UN/ISDR): [..\3.Reference Materials\Various materials\Terminology.pdf](#)
- 11.20. An ALNAP Protection Guide for Humanitarian Agencies: [..\3.Reference Materials\Various materials\ALNAPprotectionguide.pdf](#) or download from the ALNAP website <http://www.alnap.org/>
- 11.21. ALNAP Participation Handbook: [..\3.Reference Materials\Various materials\ALNAP Participation Handbook.pdf](#)
- 11.22. SPHERE HANDBOOK: [..\3.Reference Materials\SPHERE\Sphere Handbook.pdf](#), or download from: <http://www.sphereproject.org/handbook/index.htm>
- 11.23. DFID Guidance Notes on Conducting Conflict Assessments: [..\3.Reference Materials\Various materials\DFID Conflict Assessment Guide.pdf](#) or download from <http://www.dfid.gov.uk/pubs/files/conflictassessmentguidance.pdf>
- 11.24. IASC Civil-Military Relationship in Complex Emergencies: [..\3.Reference Materials\Various materials\IASC Reference Paper on Civil-Military Relations June 2004.doc](#)
- 11.25. IASC Inter-Agency Contingency Planning Guidelines: [..\3.Reference Materials\Various materials\IASC Inter-Agency CP guidelines 15.11.'01.pdf](#)
- 11.26. UN Cluster Approach: [..\3.Reference Materials\Various materials\Preliminary Guidance Clusters - FINAL.DOC](#)
- 11.27. REDUCING DISASTER RISK: A CHALLENGE FOR DEVELOPMENT. United Nations Development Programme: [..\3.Reference Materials\Various materials\REDUCING DISASTER RISK.pdf](#)
- 11.28. Living with Risk: A global review of disaster reduction initiatives: [..\3.Reference Materials\Various materials\Living with Risk.pdf](#)
- 11.29. Disaster Impact on Millennium Development Goals: [..\3.Reference Materials\Various materials\Disaster impact on MDG.pdf](#)
- 11.30. Impact of Droughts: [..\3.Reference Materials\Various materials\Impact of Drought.pdf](#)
- 11.31. Risk reduction strategies for some common disasters: [..\3.Reference Materials\Various materials\Risk Reduction Strategies by Hazard Type.pdf](#)
- 11.32. IFRC Disaster Preparedness Training Programme: [..\3.Reference Materials\Various materials\IFRC Disaster Preparedness Training.pdf](#)