

Nepal Earthquake Operations 2015 Movement-Wide Lessons Learnt Workshop



Workshop Report



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1. OVERVIEW



The Lessons Learnt workshop held in Budhanilkantha, Nepal on 5-7 March 2019, gathered representatives from Nepal Red Cross Society (NRCS), International Federation of the Red Cross and Red Crescent Societies (IFRC), International Committee of the Red Cross (ICRC), and 13 Partner National Societies¹ in-country. The workshop also conveyed key stakeholders such as community representatives, government authorities, research organizations, HRRP and academia to share insights and experiences supporting communities affected by the 2015 Earthquake in the country. Participants discussed issues of shared interest in 11 thematic sessions facilitated by a NRCS lead and co-facilitated by Movement partners (see Annex 2).

During these sessions, participants identified key lessons learnt related to challenges and achievements. Furthermore, each group identified key recommendations and priority action points for future recovery and development efforts in Nepal and beyond (See Annex 1).

¹ American Red Cross, Australian Red Cross, Belgian Red Cross, British Red Cross, Canadian Red Cross Society, Danish Red Cross, Finnish Red Cross, Japanese Red Cross Society, Norwegian Red Cross, Qatar Red Crescent Society, Spanish Red Cross, Swiss Red Cross, Republic of Korea National Red Cross .

2. Day 1: Opening Ceremony and the 4+1 Components group work

The workshop started with an opening ceremony, accompanied by the following personalities:

-Umesh Dhakal, Executive Director, NRCS, who welcomed the participants and shared workshop objectives.

-Banshi Kumar Acharya, Under Secretary, Ministry of Home Affairs, Government of Nepal, gave overall remarks on earthquake recovery programme.

-Juja Kim, Head of Office, IFRC, gave some general remarks and expectations of the workshop.

-Andre Paquet, Head of Mission, ICRC, gave general remarks to participants.

-Kazuyo Igarashi, Country Representatives to Nepal, Japanese Red Cross, gave remarks on behalf of in-country PNSs.

-Dev Ratna Dhakhwa, Secretary General, NRCS – also gave welcome remarks and expectations.

-Sanjeev Thapa, Chairman, NRCS, gave welcome remarks, expectations and official opening of the workshop, who also launched a book on beneficiary success stories.

After the opening ceremony, the Lead Facilitator explained the difference between a “Lessons Learned Exercise” Vs “An Evaluation or Review”.

The group work methodology was explained, the expected results, the Agenda of the workshop reviewed, and participants were led to their respective groups.

This Lessons Learned Workshop’s was the opportunity for all stakeholders of the post-2015 Earthquake Operation in Nepal to come together and share insights and experiences working together in support of community resilience in the country. A key purpose of this Lessons Learned (LL) workshop was therefore to document the main lessons learned under One Plan (4+1 integrated model) and to share and use the knowledge derived from experience in order to repeat success and avoid future setbacks. In other words:

- Promote the recurrence of desirable outcomes
- Preclude the recurrence of undesirable outcomes

The LL exercise allowed participants to reflect and learn from both positive experiences i.e. good ideas that improve efficiency and/or effectiveness, as well as negative experiences. The collective learning was documented to be shared with stakeholders as a means of helping to improve future similar initiatives.



The Forum's Working Objectives were the following:

- WO1: To generate key lessons learned related to the most significant achievements and best practices under Movement-Wide Recovery Plan "One Plan" that can be used by stakeholders in future contexts, not only in Nepal but also for similar large-scale operations within the Movement.
- WO2: To identify how key contributions generated through the operations can be sustained, broadened/up-scaled to the wider NRCS development programming, as part of the wider humanitarian and development system in the country.
- WO3: To serve as inputs session for future planning and coordination of the Movement programmes in Nepal and beyond.

The above objectives were largely met if we consider the end of workshop survey, the concrete matrices that resulted from the exercise and the general comments and praise received during the last day of the workshop.

Day 1 focused on the 4+1 technical components of the program (See Annex 3). The structure of the first working day consisted in the following sessions: Input Session, Preparation for Discussion Session, Discussion Session, and a Recap Session.

After the introduction, participants were invited to join the group previously assigned and 5 main groups were created, where each one had a main NRCS Lead: Shelter, WASH, Health, Livelihoods and ICB. Additionally, a Drafting Committee was previously selected with 4 volunteers tasked to carry out the drafting of the final set of lessons learned, using the outcome documents for each one of the 11 working groups throughout the workshop.

After the Introductory Session, participants enjoyed a coffee break before the working sessions.

For the Input Session, prior to the working groups discussion, each Session Lead and input partners had 60 minutes to provide input to frame the conversation and provide guidance in order to ensure that key issues and main questions were effectively addressed.

With support of a presentation previously prepared, Leads introduced to their group's participants all necessary content related to their particular component so the discussions could be informed by examples, contextual aspects, and evidence of successes or challenges ([Google Drive](#) with all the presentations).

The Preparation for Discussion Session consisted of 30 minutes to allow the 5 main groups to organize and break into 3 smaller subgroups, with 7 to 10 people each, to allow time for everyone to contribute. The main task was to clearly identify specific roles as note-taker and moderators, to present and clarify discussion questions, and explain the methodology for this part. The objective was to set up subgroups before lunch to be ready for the next working session.

After lunch break, the Discussion Session started. Each sub-group gathered to discuss and identify key questions, challenges, success stories and best practices. The session moderator had 15 minutes to introduce some general questions previously chosen to start the conversation. With that set on place, sub-groups had 75 minutes and achieved the following:

- a.** Focused their discussion in line with following stages of the recovery operation.
- b.** Filled in a provided matrix, clearly identifying lessons learned from successes and challenges and recommendations.
- c.** Concluded the discussion and presented a draft document with key results. The subgroups also delivered their Thematic Discussion Notes to the Drafting Committee.

After lunch break, the final working session was the Recap, where sub-groups gathered in their original one and presented their findings to the rest. After listening to all sub-group's lessons learnt and recommendations, the whole group agreed on a final list of common recommendations and prioritized action points to be shared on day 3 in

- a.** Matrix
- b.** Thematic
- c.** Discussion Notes

Finally, as a closing activity, all participants and the Lead Facilitator reconvened in plenary in order to get Feedback from the day and key ideas from participants about forum. Participants gathered in plenary at the end of the day to comment on the characteristics of the conversations and group work: the following adjectives were used by participants to describe day 1 included: participatory, exciting, inclusive, honest, interesting, thought provoking, challenging, respectful of time, useful, exhausting.

the plenary forum (for the final Group Matrixes see Annexes 4-8). Groups also started planning this presentation in an innovative way. Each main group delivered the following drafts:



3. Day 2: Cross-Cutting & Management Components

The agenda for the second day consisted in the following sessions, with the same dynamics as the first day: Input Session, Preparation for Discussion Session, Discussion Session, and a Recap Session.

Participants were invited to join the group previously assigned and 6 main groups were created, where each one had a main Lead: PMER-IM, GESI, CEA + Comms, Transition, Coordination and Partnership, and Decision-making and Approval Mechanisms. The established Drafting Committee kept working with all groups and was involved in all sessions.

After the Recap session, the groups also agreed on a final list of common recommendations and prioritized action points to be shared on day 3 in the plenary forum (for the final Group Matrices see Annexes 9-14).

After the working sessions, the Plenary Preparation Session took place. All 11 main groups prepared for Day 3's feedback session for the whole plenary using a diversity of methods either chosen by the group leads or assigned by the facilitator. Guidance notes on each method were provided to group leads. The Drafting Committee met to agree on the main elements to include in the final draft document. Here, participants had time to engage in bilateral meetings.

Day 2 did not include a final plenary session and each working group finished at its own pace.



4. Day 3: Plenary Session



The third and last day of the workshop consisted of a plenary with all participants with a Feedback Session from the 11 components, a Panel Discussion with External Speakers, and a Panel conversation with Beneficiaries. The groups engaged in a final working session of "Prioritization of recommendations and action points" before the official closure of the workshop.

Day 3 started with the Feedback Session of the 11 groups. The aim of presenting the project's key findings to VIP guests and external stakeholders was to consolidate the essence of the discussions, as well as analyze the key elements and present them in a digestible and easy to understand format. Each group used a different methodology and way of presentation as follows:

- Shelter – Plenary without PPT
- Health – Power Point
- PMER-IM – Video
- WASH, Livelihoods, ICB, CES – Gallery Walk
- Transition – PTT
- GESI – Role Play
- Coordination and Partnerships
- Decision-making and Approval Mechanisms



4. Day 3: Plenary Session

The Drafting committee worked in parallel preparing the final draft summary of the workshop's conclusions and recommendations for the afternoon session.

After all groups presented their key findings, there was time to engage in Q&A.

The aim of the Panel Discussion with External Speakers was to better understand the experiences and lessons beyond the RCRC Movement, as it applies to the lessons learned exercise, while gaining a deeper knowledge of how external stakeholders perceived the RCRC Movement's "One Plan". The invited stakeholders were Jeevan Baniya, PhD., assistant director at Social Science Baha, a well-known research institute in Nepal; Loren Lockwood, the National Coordinator of the Housing Recovery and Reconstruction Platform (HRRP) in Nepal; Ram

Thapaliya, PhD., who currently chairs the Institute of Crisis/Disasters Management (TU) Masters in Crisis and Disasters Management Study Program; and Ramesh Guragain, PhD, who is the Deputy Executive Director at National Society for Earthquake Technology-Nepal (NSET).

The panel was facilitated by the Lead Facilitator who guided both the panel, as well as the audience through the event. This panel was designed to encourage a constructive and engaging conversation between non-RCRC stakeholders. The four experts shared facts, offered opinions and responded to the following questions, previously shared with them:

- a.** Please share one or two key lessons that your organization has learned in relation to your EQ recovery efforts?
- b.** Which are the concrete actions that helped in the institutionalization of these lessons?
- c.** What are your recommendations and/or messages to deliver to the Components of the International Red Cross and Red Crescent Movement for future improvements?

4. Day 3: Plenary Session

The panel session lasted 60 minutes], and left some time for a Q&A session from the audience (30 min). The main points that emerged from the conversation are listed as follow:

- 1.** Institutionalization of knowledge and lessons learnt from EQ Recovery.
- 2.** To allocate significant resources for socio-technical support to most vulnerable families.
- 3.** NRCS should consider long recovery time frame and scale up the strategy through follow-up programmes to complement Government strategies and priorities.
- 4.** NRCS needs to revisit its policies, procedures, and guidelines to deal with post-disaster recovery programmes.

All participants enjoyed lunch and afterwards they gathered once more for the Beneficiaries Panel. This session had the objective of hearing perception of beneficiaries, whether the provided support from NRCS has been fruitful or not, and to demonstrate the real scenario of the intervention and its impact to the individual level in the community where the support was implemented.

The one-hour panel was held in Nepali to make sure beneficiaries felt more comfortable sharing their experiences. The main points that emerged from this dynamic are the following:



4. Day 3: Plenary Session

- 1.** The provision of livelihoods support (training and cash grants), as well as construction of shelters, using AALO-PAALO² model was very useful. NRCS should promote similar community-based models.
- 2.** Construction of permanent health posts and residential facility with provision of water ensured 24/7 service delivery in remote location. However, NRCS needs to adopt a flexible design construction of Health Posts and Water facilities based on availability of land and ground realities.
- 3.** In remote communities, the level of education is very low, so it would be good to consider provision of vocational trainings to build the capacity of uneducated youths.
- 4.** NRCS needs to train more people from the community, in order to support construction of huge number of houses in rural communities by trained masons.
- 5.** NRCS awareness intervention increased the impact on sanitation drive and women are now more aware of the importance of taking care of their own health.

The final session included a report from The Drafting Committee, along with the Lead Facilitator, presented the consolidated version of the Lessons Learned Outcomes Document (See Annex 1). Then, the Lead facilitator moderated a small plenary discussion to agree on the main and overall priorities of recommendations and action points (see Annex 15).

This final discussion aimed to consolidate the consensus and ensured a product with

ownership by the entire group. All groups worked on finalizing some details of/for the Drafting Committee. All outputs were brought to the plenary and the Drafting Committee read the final version of the document.

For the Workshop Closure, the IFRC, PNS, ICRC and NRCS gave all brief closing remarks and all participants got a Token of Love by NRCS.

² In the AALO-PAALO model, people from different households work together to complete their work turn by turn. For example, if there are 10 houses to be constructed, at least one member from each of the 10 households work together to complete the construction turn by turn. They complete house 'A' together, then start house 'B', then 'C', and so on. In Nepal, this practice is common not only for construction but also for farming in remote areas.

4. Day 3: Plenary Session

Closing Remarks

In his closing remarks, Umesh Dhakal, Executive Director (Former Head of ERO), highlighted the size of the operations and its structure, geographical coverage, and number of partners involved for the first time in the 56 years of NRCS. Despite being a massive operation with huge geographical coverage and operational challenges, NRCS has achieved anticipated outcomes. For which he thanked all partners, government agencies and line ministries, Red Cross staff and volunteers, district chapters, NRCS departments, and communities across all 14 districts chapters for their tireless efforts and contribution towards making the operation successful. In addition to learnings from this workshop, NRCS is working on a process documentation, in order to capture major milestones, experiences and lessons learned from this 3-years operations to serve as a reference document for future.

Additionally, Sanjiv Thapa, Chairman of NRCS, highlighted the results achieved through the integrated recovery programme, showing the importance of addressing community needs. Also, he added how the Red Cross intervention has changed people's live; especially women and children from rural villages through reconstruction of drinking water schemes, health care facilities and livelihoods opportunities. NRCS achieved this through its network of volunteers who served thousands of affected people with immediate relief and recovery assistance. More importantly, the involvement of local authorities and communities from the beginning of programme has been an effective approach to develop their ownership and sustainability. He appreciated and thanked all partners, government, staff and volunteers, and community people.



5. Strategic Lessons Learned Summary

The Lessons Learned Outcome Document (See Annex 1) identified by participants and groups consisted of two parts: 1) Strategic Directions and 2) Sector Specific Considerations. The former took into account key learning points and recommendations of the Earthquake Response Operation as a whole, while part 2 focused on each

of the technical and cross-cutting components. The Strategic Directions identified and prioritized during the workshop were the following:

- a)** The Integrated Approach (One Movement, One Set of Principles, One Plan, One Team, One Programme, One Tracking System and One Reporting Mechanism) was overwhelmingly considered by all partners as a good practice.
- b)** The 4+1 approach was also considered a relevant and practical integrated solution to community needs, as well as the addition of the Institutional Capacity Building (ICB) component.
- c)** Community Engagement and Accountability (CEA) approaches were necessary and successful.
- d)** A critically identified need was to adapt existing relief and recovery policies and guidelines of the NRCS to clarify the working modalities of such integrated approach, including cross-cutting components.



5. Strategic Lessons Learned Summary

- e)** The dedicated structure of the Earthquake Response Operation (ERO) helped in delivering large-scale programme commitments within the given timeframe. However, the recommendation for future operation was to institutionalize such structure within existing NRCS Departments at all levels.
- f)** To support this process, the identified recommendation was to enhance the recovery function within the Disaster Management Department.
- g)** Given the multiple stakeholders engaged in the recovery operation at all levels (including communities), wide dissemination of Red Cross principles, approaches, programmes and tools were required.
- h)** Informal practices of transfer-shared leadership were seen in the operation, which were identified to be replicated to other programmes of the NRCS and beyond.
- i)** Multiple technical partnerships were built throughout the recovery timeframe and provided added value to the delivery of services. It was identified and recommended to maintain flexibility in the system.
- j)** Challenges were encountered throughout the operations due to inadequate NRCS policies for recovery programming as well as evolving institutional frameworks (Federal System).
- k)** The need for a stronger legal status for NRCS through Red Cross Law was identified.
- l)** Participants identified that the NRCS should have a “strategic intent” with regards to construction activities and should invest in sustainable capacity to support this, including having clear mandate, policy, plan, working procedures, minimum skilled HR and funding plan.
- m)** The recovery operation included a wide use of cash-based approaches that should be institutionalized for future recovery efforts.
- n)** In the long-term, investment in Disaster Risk Reduction at all levels was identified as a key strategy for NRCS to enhance coordination and strengthening partnerships.
- o)** Safety of staff and volunteers was identified as a needed investment. Protocols should be in place with appropriate tools and measures mainstreamed throughout the operation.

For all the Sector Specific Considerations please consult Annex 1 and Annexes 4-14.

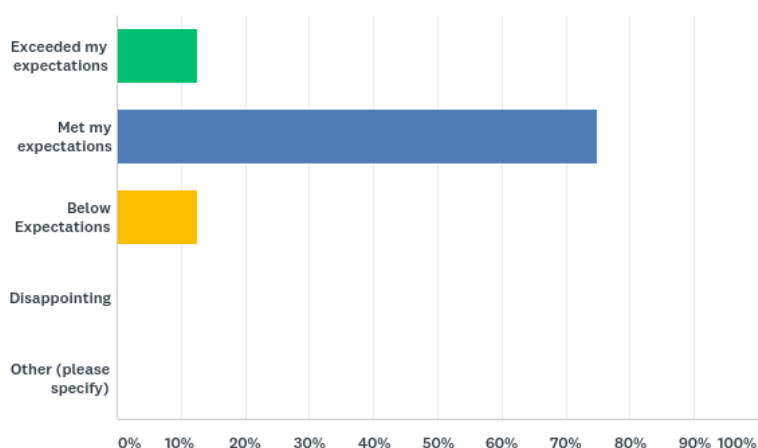
6. Workshop Evaluation by Participants

At the end of the workshop, a short survey was distributed to the participants. The results of the survey below are based on a total of 31 completed surveys. However, the number of total observations used to calculate each indicator varied as some questions were left blank.

The survey represented well the different institutions represented at the workshop participants: NRCS National level, Partner NS working in Nepal, Partner NS based outside Nepal, IFRC support working in Nepal, and IFRC support based outside Nepal.

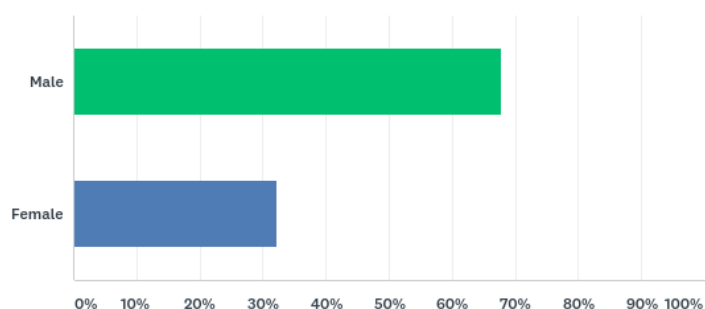
(see Figure 1).

Q9 Overall rating of the Lessons Learned Workshop?



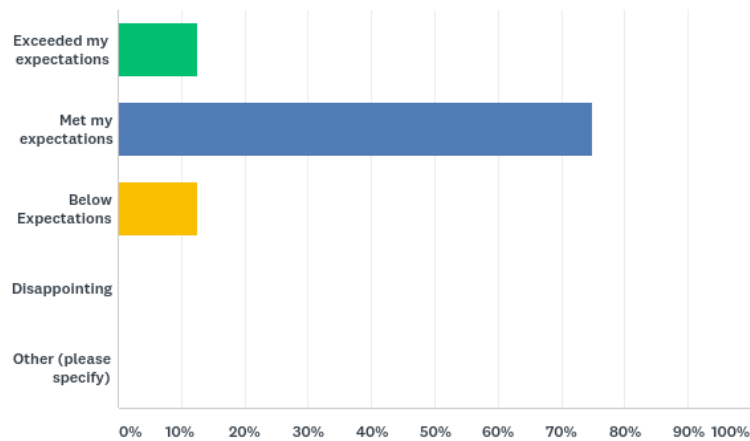
The value of the workshop to the participants received a favorable rating, where 75% considered that expectations were met (see Figure 2).

Q4 Your Gender?



6. Workshop Evaluation by Participants

Q9 Overall rating of the Lessons Learned Workshop?



Participants agreed strongly with the interactive methodology chosen for the workshop and the facilitation skills of the Lead Facilitator. On the question of the ways in which the workshop would be better, many responded that although the sessions had time for discussion and generally received good feedback, more time should be allocated to discussion while cutting some time from the introduction and presentations. Also, some pointed out that not enough participants with strong technical and field expertise were in the workshop, missing an opportunity of including different points of view. The language barrier was another of the concerns raised.



Annex 1

Post 2015 Nepal Earthquake Operation Movement-wide lessons learned workshop Kathmandu, 5 - 7 March 2019

OUTCOME DOCUMENT - *THE BUDHANILKANTHA DECLARATION*

The Lessons Learnt workshop gathered representatives from Nepal Red Cross Society (NRCS), the International Federation of Red Cross and Red Crescent Societies (IFRC), the International Committee of the Red Cross (ICRC), Partner National Societies (PNSs) as well as key stakeholders such as community representatives, government authorities and academia in Budhanilkantha, Nepal, on 5-7 March 2019 to share insights and experiences supporting communities affected by the 2015 Earthquake in the country. Participants discussed issues of shared interest in eleven thematic sessions co-facilitated by Movement partners and identified key lessons learnt and recommendations for future recovery and development efforts in the country and beyond.

This document reflects the key learning points and recommendations identified by participants. It should be read in conjunction with the reports from each thematic session which provide more background information and details.

PART 1 – STRATEGIC DIRECTIONS

The Integrated approach (One Movement, One Set of Principles, One Plan) is overwhelmingly considered by all partners as a good practice that should be replicated in other similar contexts. Its implementation however varied from Partner to Partner, district to district and sector to sector.

The 4+1 approach (shelter, health, WASH, livelihoods + institutional capacity-building) is also considered a relevant and practical integrated solution to community needs, based on existing implementation capacities of the NRCS, and results of the needs assessments at the time. The addition of the **Institutional Capacity Building (ICB)** component also proved to be successful (despite being underfunded at times) and should remain a key part of future recovery planning.

Community Engagement and Accountability (CEA) approaches played a significant role in bridging Red Cross partners with communities, helping to coordinate with stakeholders and enhancing accountability.

There is a critical need to adapt existing relief and **recovery policies and guidelines** based on the overall long-term strategic priority areas of the NRCS to clarify the working modalities of such integrated approach, including cross-cutting components such as CEA, Gender Equality and Social Inclusion (GESI), Planning Monitoring Evaluation and Reporting as well as Information Management (PMER-IM) and communication. This should be based on the wide experience and lessons learnt from this operation.

The establishment of a **dedicated structure** such as the Earthquake Response Operation (ERO) ensured the delivery of large-scale programme commitments within given timeframe. This was critical given the scale of the devastation, the large number of partners to engage with and the relatively large financial portfolio to be managed. The recommendation for future operation is to have policies and procedure in place allowing to quickly mobilize such temporary structure in support of existing capacities within the NRCS. This will be achieved through the clearly defined roles and responsibility (specific team for coordination as well as technical teams within respective departments), shared allocation of resources among departments as well as agreed mechanisms to transition back to long-term programming as part of the Recovery Planning.

To support this process, it is recommended to **enhance the recovery function** (in particular in the recovery planning phase) within the Disaster Management Department which will work in close collaboration with all related departments. This should be supported by appropriate trained HR, provisions in existing contingency plans and Standard Operational Procedures (SOPs).

Given the multiple stakeholders engaged in the recovery operation at all levels (including communities), in the context of new administrative structures, being set up in the county, **wide dissemination of Red Cross principles, approaches, programmes** and tools is required. Budget allocations for this should be considered in the recovering planning.

Informal practices of **shared leadership** were seen in the operation (for example in Water Sanitation and Hygiene – WASH and PMER). It resulted in developing knowledge, innovative approaches, joint learning and contributed to overall quality of NRCS programming. Such practice could be further replicated to other programmes of the NRCS and beyond.

Multiple **technical partnerships** were built throughout the recovery timeframe and provided added value to the delivery of services. It is recommended to maintain flexibility in the system (in line with our Principles and Code of Conduct) to engage external support, maximizing the opportunities offered by technical partnership such as with the Housing Recovery and Reconstruction Platform (HRRP), Academia and local Non-Governmental Organizations (NGOs). In connection to this, Partners should conduct regular partnership mapping with relevant agencies to identify opportunities for collaboration. It is also important for IFRC and NRCS to leverage its leadership position in the shelter cluster to map opportunities and to promote collaboration among partners, as well as strong common technical guidance.

Challenges were encountered throughout the operations due to inadequate NRCS policies for recovery programming as well as evolving institutional frameworks (new administrative levels under the Federal System). In this context, a recommendation is to **adapt existing NRCS policies** (finance, procurement, HR, etc.) taking into account all lessons learnt including the need for decentralization based on existing capacities at various levels.

Stronger legal status for NRCS through Red Cross Law: although the NRCS has a clear role within the Disaster Response system at various level of the administrative structure (national, provincial, district and local level), the overall auxiliary role of the Red Cross would be strengthened by a Red Cross Law. Besides, this would overcome administrative barriers, and provide a higher status within Nepal, hence allowing to access additional resources and act with greater independence/autonomy in providing services.

NRCS should have a **“strategic intent” with regards to construction activities**, both in terms of its own buildings (District Chapter (DC)/Sub-Chapter (SC) building, blood center, warehouse, etc.) as well as other public facilities (school, health facilities, community building, complex water schemes, etc.). In both cases, the NRCS should define its minimum sustainable capacity to handle such construction activities, including having clear mandate, policy, plan, working procedures, minimum skilled HR and funding plan.

The recovery operation included a wide use of **cash-based approaches** (both conditional and unconditional) in support of Shelter, Livelihoods and WASH interventions. NRCS and Movement Partners should institutionalize the learning and experience from such operations to inform future recovery efforts. It is also recommended to improve **cash-based preparedness** within the organization so that all sectors can optimize this modality ensuring a flexible use (transfer values, transfer mechanisms, etc.) according to diverse contexts, needs and capacities.

NRCS and Partners should carefully review the exit strategies and modalities in each district to ensure that District Chapters can sustainably handle the continuation of the hardware/software interventions beyond the end of particular projects, with technical support from the respective technical departments in NRCS Head Quarter (HQ).

In the long-term, **investment in Disaster Risk Reduction** at all levels is a key strategy for NRCS to enhance coordination and strengthen partnerships, laying strong foundations for potential future operations. A particular focus should be given to the local level in the context of the Federal System and in line with the localization agenda promoted by the Red Cross Movement.

Safety of staff and volunteers is an investment. Protocols should be in place with appropriate tools and measures mainstreamed throughout the operation.

PART 2 – SECTOR SPECIFIC CONSIDERATIONS

2.1 Shelter

- **Owner driven approach** was deemed successful, with clear policies adhered by NRCS and Partners as well as appreciation from the communities. It should be replicated in future operations, also taking into consideration specific local contexts.
- Beyond the cash transfer and the shelter construction itself, the key added value of the Red Cross was the **technical / social support** and software activities provided to communities, in particular marginalized groups, for example masons trainings, PASSA rollout, 10 Key build back safer message dissemination, government guideline and policies dissemination, participation of social mobilization volunteering (**Aalo Palo**), etc.
- **Cash transfer for shelter construction** through banking system was considered helpful for maintaining accountability. However it should consider issues such as remoteness and literacy, allowing for other options (mobile banking, cash in envelope, etc.) where and when relevant in conjunction with government's decisions.
- **Coordination with authorities** at all levels was seen as very successful. In particular, the learning about how relationships with National Reconstruction Authority (NRA) were built and sustained over time should be well captured for future replication.
- Despite all the innovation and learning from such complex and varied operation in terms of shelter, a challenge identified in the current transition phase is the **lack of identified counterpart within NRCS** to capture the learning from the operation. Moving forward, it is recommended to identify the unit within NRCS that is responsible for shelter programming (and maybe overall construction), and to maintain minimum capacities in-between operations with some level of policies, plans, knowledge, tools, relationships with government authorities, etc.

2.2 Health

- **Structurally safe health infrastructures** have been constructed and are now able to deliver better and more stable health services for communities. However, if construction remains a priority, NRCS needs to focus more on the construction of permanent health infrastructure rather than prefab ones. Still, in case it is decided to go for prefab-structures (as per government decision), market assessment mechanism need to be in place beforehand.
- A key factor of success of health interventions was that the **trained staff** of NRCS involved in the emergency phase continued to be actively engaged in the recovery activities in the districts.
- **Engagement with government** at national and district levels from planning to hand-over stages helped to create better ownership of the facilities and services by local counterparts, ultimately helping to enhance Red Cross' image and people perception.
- In future operation, it is recommended that NRCS positions itself as a bridge between **mental health** service providers and people in need of PSS and mental health support. Accordingly, NRCS should further build its capacity on mental health and PSS.
- Another key area is for the NRCS to enhance its **health preparedness and response capacity**, including through prepositioning of health kits at various levels, conducting technical trainings for staffs and volunteers, developing contingency planning and strengthening existing coordination mechanisms with health authorities as well as cluster partners

2.3 WASH

- In this operation, the WASH sector is considered as an exemplary model in terms of **working modality**, with clear mechanisms, shared resources, and strong collaboration between ERO/WASH and WASH Division, the existing unit in the NRCS, as well as with and among all Partners.

- The WASH sector also worked in **synergy** with other areas, in particular shelter, health, livelihoods and GESI, hence demonstrating the added value of the integrated approach.
- The WASH sector also implemented **innovative approaches**, such as the large-scale water lifting systems and the Child, Gender and Disable-friendly toilets (CGD toilets). Therefore, it is recommended to revise the technical guidelines based on learning and prepare inclusive model guideline on WASH
- A critical challenge in the WASH interventions was the delays related to the use of **rate contracts** which should be thoroughly reviewed and regulated for future operations (*see procurement section below*)
- **Sustainability and ownership of infrastructure** after exit was ensured through the linkage building with local authorities and community Drinking Water User Committees (DWUC). The process for this should be well documented to inform future interventions.

2.4 Livelihoods

- Livelihoods interventions need to respond to a **common framework** that allows flexibility and adaptation of activities to the diverse and specific contexts, community-based needs assessments, technical capacities and available financial resources.
- **Beneficiary selection** processes need to be contextualized and carried out using objective vulnerability criteria in close coordination with local authorities/representatives to ensure accountability and minimize social and political interests. Likewise, there is a need to ensure that early recovery activities are designed and implemented in time in order to avoid the negative coping strategies by the affected population.
- Recovery livelihoods interventions designs need to consider **continued support** once the recovery phase is over, meaning that large geographical and population targets may not receive the support they need in the medium long term if financial and technical resources are not allocated. A solution for this could be to enhance the advocacy and networking components to identify local support and /or hand-over interventions to the development programming of the NRCS where applicable.
- Various **guidelines and tools** developed during the operation should be institutionalized so that they can be used and adapted in future as needed (Cash for Work and community infrastructures, Conditional Cash Grants and technical trainings, vocational trainings, saving and credit groups, etc.).

2.5 Institutional Capacity Building

- **Capacity assessment** at all levels was a good practice to inform the prioritization of ICB interventions and building ownership. This has an opportunity to become a regular practice for all district chapters and sub-chapters across the country, as a basis for future programmes as well as decentralization / power delegation processes.
- In terms of **planning**, a recommendation is to define “minimum ICB package” for all projects (recovery and development) to ensure that local capacities are built in the process. This should also include budget allocations as appropriate.
- Ensuring NRCS offices at all levels are EQ-resistant is a key element of enabling the continuity and sustainability of RC services. The inclusion of such **construction activities** is considered relevant and should continue. However, a dedicated team should be established to ensure quality of the process (*see below under construction*)
- With regards to the **construction of chapter and sub-chapter building**, there were challenges in mobilizing resources. A recommendation is to integrate chapter building with a specific service (such as warehouse, blood bank, health clinic, training) which would help to raise funds with related institutions and donors. A good practice was the synergy between shelter and ICB sectors, in which masons built the sub-chapter office as part of their training, hence decreasing the costs.
- **Strategic and Operational Planning processes** supported at district level proved to be instrumental in enhancing the positioning of chapters. However, there is a need to further strengthen capacities of Committee members and staff to mobilize local resources in support of such plans.
- Many **trainings** were conducted for staff and volunteers. However, there is a broader need to invest on creating an enabling environment for all to learn and contribute, remaining engaged in services in the longer term.

3.1 Planning, Monitoring, Evaluation and Reporting and Information Management (PMER-IM)

- **Strong team spirit** was seen among the PMER teams at all levels and with partners. To continue building on this momentum, IFRC and PNS PMER-IM focal persons need to dedicate certain time/efforts in working together (physically) with National Society PMER-IM team.
- **Management Information System** is considered a key success of this operation, which should be institutionalized throughout the organization. In future, systematic data collection processes (including disaggregated data) with a focus on analysis and use of data should be further strengthened.
- **Overassessment** has been one of the key challenges in the operations, due to different implementation timelines and targeting same community, paper-based vs. mobile based data collection, minimum use of secondary data.
- A key recommendation for this is to develop Movement-wide standard planning, monitoring as well as reporting guidelines and tools. A good example of this is the **Movement-wide reporting system** based on common indicators used in the Recovery Operation, which enables to demonstrate movement wide achievements in one platform.
- **At the organizational level, it is recommended to centralize PMER-IM staff** of all departments together in one PMER-IM division at National Society rather than having PMER-IM functions in each project teams. Centralization and mainstreaming of PMER-IM functions are needed in operation. Policies and procedures should be in place with appropriate tools and measures throughout the operation.

3.2 Community Engagement and Accountability (CEA) and Communication

- **Participatory approach** was followed since the inception of the recovery operation including planning, decision making and implementation of sectorial work. This was based on previous experience of the NRCS, while new innovative tools were introduced.
- **Different feedback mechanisms** (hotline, suggestion box, face-to-face communication, radio programme) established under CEA helped to resolve the community issues and involved government authority. For example, proper socialization of the livelihood activities about selection criteria, process, objective and limitation to all authority, community leaders, residents, staff and volunteers were seen as a good practice.
- **Institutionalization of CEA practices** could be further supported by clear policies, guiding documents, contextualized tools for implementation at all level.
- A critical need is to implement a **standard “log”** compiling all the feedbacks received and tracking technical / management answers to these.
- NRCS is recognized as a first responder during the emergency as a result of long run communication work over the years. Proper **dissemination** of information through multiple channels during the recovery operations proved effective to reinforce the positive image of the Red Cross Movement.
- With such massive operation, communication issues are common, including challenges such as multiple partners’ involvement, media interpreting information differently, rumors or community grievances. In this context, **strategic and proactive engagement with media** on Red Cross work is a key recommendation, enforcing a “One Movement Voice” with clear communication strategy and lines of communications.
- Accordingly, **communication trainings for leadership and managers** should be provided, in particular in handling sensitive issues. A group could be created consisting of **journalists who are NRCS volunteers**. This would serve as a network to disseminate Red Cross stories and diffuse misinformation and rumors.

3.3 Gender Equality and Social Inclusion (GESI)

- Application of **twin track approach** (stand-alone and mainstreaming) has proven to be more effective and success oriented in addressing the special needs of the most vulnerable by age, sex, ability, cultural-social appropriateness etc.
- **Dignity**: continuous advocacy at all levels to overcome the socio-cultural barriers following relevant policy and norms has proven to be an effective tool when combined with long term program intervention.

Likewise, establishment of PGI fund and its mobilization for specific PGI intervention at different level has been proved to be an effective initiative to address unmet PGI needs. Finally, cash for work intervention established message of equal wages for same work at community level.

- **Access:** establishment of Children Gender and Disable (CGD) friendly services across all sectors is not only sufficient to ensure utilization of these services, however access to these services also needs to be addressed. This is why there is a need to empower communities to advocate to public authorities for the actual access to CGD friendly services
- **Participation:** Increased female participation contributed towards better community engagement and their access to services and programme ensuring inclusiveness at all level. It is expected that this will be further maintained with the constitutional commitment to ensure minimum 33% female participation in decision-making processes at all levels.
- **Safety:** in operationalizing the complaint mechanism for Sexual and Gender Based Violence (SGBV) and child protection issues, privacy and confidentiality should be ensured. In this regard, involving dedicated senior management representative in addressing complaint /allegation has proven to be effective

PART 4 – SUPPORT FUNCTIONS

4.1 Finance

- There is a need to adapt or develop **specific policy provisions** for emergency and recovery contexts. In particular, such provisions should include approval levels, validation thresholds, clear guidance for delegation of authorities as well as Fraud and corruption reporting mechanism.
- Given the complexity and frequent changes within the **tax system**, it is recommended for NRCS and Partners to jointly invest in a periodic legal review of the system, analyzing the duties and exemptions applicable to NRCS and Partners. At the same time, a technical guidance note based on this review should be disseminated to all levels and Partners to foster similar understanding and practice.
- The Recovery Operation was based on clear financial guidelines and tools. However, there is a need to further build the **capacity on financial management** at all level including programme staff as well as social mobilisers and volunteers.
- In terms of **reporting**, clear guidelines were provided on validation process for supporting documents, vouchers, and necessary requirements. However, there is a need to further adapt a minimum standard reporting system across NRCS and synchronize the software system between levels to smoothen the reporting mechanisms.
- Budgetary control decision should be revisited based on the emergency or recovery contexts between HQ and District Chapter, in which DC should also have the authority to manage agreed expenses of the programme activities from the allocated budgets

4.2 Human Resources

- On-time and **quality recruitment** was a major challenge in the operation. Hence revising the recruitment system is recommended, with a particular attention to practicability, transparency, flexibility and speed (including provisions for “fast-tracking” in relief and recovery phases). In particular, the recruitment system should include disclosure provision and consider levels of delegation to allow recruitment at various levels of the organization.
- **Staff turnover** was another challenge, which could be tackled through giving longer contracts to key staff members, investing on quality staff development management (including quality RCRC onboarding, periodic performance assessments, fair opportunities for trainings, regular carrier progress, etc.) and ensuring DC as well as executive committee members are consulted in decision-making processes

4.3 Procurement

- The recovery operation included major procurement processes in support of all sectors. As such, lot of experience was gained in the timeframe, which should now contribute to a **thorough review of NRCS Procurement policy**, in line with applicable rules and regulations and including specific provisions for relief and recovery phases, as well as community-level transactions.
- In line with decentralization processes, new policies could carefully **review levels of decision-making** to allow a clear definition of accountabilities among levels while ensuring quality of the goods and services procured.
- **Rate contracts** were used (especially in WASH) in the emergency with mixed results. As such, their use should be carefully analyzed, with guidance note and list of material-based experience to be developed. Also, NRCS should consider using multiple contractors for such contracts.
- NRCS, with support of Partners, should enhance its **capacity to handle contractors** and ensure quality of construction, goods and services provided. This included reviewing contract formats to ensure penalty clauses are included, establish “control units” at various levels and build capacity of staffs in procurement processes.
- As for **construction**, it is recommended to establish a technical unit to ensure the retention of knowledge, quality assurance/safe construction practices and on time delivery. For large construction project, due-diligence/check is needed before financial bid opening.

What we heard: Key points from the panel discussions on day 3

From our partners Panel Discussion):

1. Institutionalization of knowledge and lessons learnt from EQ Recovery
2. Allocate significant resources for socio-technical support to most vulnerable families.
3. RC should consider long recovery time frame, scale up strategy through follow up programme to complement Government strategy and priorities.
4. NRCS to revisit its policy, procedures and guidelines to deal with post-disaster recovery programme

From the people we serve (Community Interaction):

1. Provision of livelihoods support (training and cash grants) as well as construction of shelters using AALO-PAALO model was very useful. RC should promote similar community-based models
2. Construction of permanent health posts and residential facility with provision of water ensured 24X7 service delivery in remote location (Dhading district). However, Red Cross need to adopt a flexible design construction of Health Posts (in close dialogue with the Ministry of Health) and Water facilities based on availability of land and ground realities.
3. In remote communities, level of education is very low so it would be good to consider provision of vocational trainings to build the capacity of uneducated youths.
4. RC need to train more community people in order to support construction of huge number of houses in rural communities by trained masons.
5. RC awareness intervention has increased impact on sanitation drive and women are more aware of importance of taking care of their own health.

Annex 2

Theme Sessions' NRCS leads and Movement partners co-facilitators

Theme	Session lead NRCS	Lead Partner	Input partner
Shelter	Dipak Giri	American RC	IFRC, Japanese and British RC
Health	Mona, Aryal and Sushil Regmi	Canadian RC	Korean, Japanese and Finnish RC
WASH	Amar Mani Poudel and Birendra Shahi	Japanese RC	Norway, IFRC, Belgian and Swiss RC
Livelihoods	Sagar Shrestha and Saroj Shrestha	British and Spanish RC	American, Danish, Belgian and Qatar RC
ICB / Construction	Bishnu Hari Devkota, Janardan Pokharel	IFRC	IFRC, British, Korean, Japanese, Luxembourg RC
PMER-IM	Tara Devi Gurung, Deepak Dawadi	American RC	IFRC, British and Japanese RC
CEA/COM	Dibya Raj Poudel, Sarita Dhunguna	British RC	American and Australian RC
GESI	Puja Koirala, Bipul Neupane	Australian RC	Danish, Canadian RC and IFRC
Transitions	Ishwar Regmi, Kamal Nirula	IFRC and Australian RC	Canadian and Danish RC
Coordination and Partnerships	Umesh Prasad Dhakal, Bijay Dahal	Canadian RC	IFRC, Finnish and Danish RC
Decision-making	Dev Ratna Dhakhwa, Dharam Datta Bidari, Madan Phoju, Bijay Adhikari	IFRC	British, American, Japanese Swiss RC

Annex 3

Participants Programme and Guidance: Movement-Wide Lessons Learnt Workshop of the Nepal Post 2015 Earthquake Operation

5 -7 March 2019, Kathmandu, Nepal

Overview: The Nepal Red Cross Society (NRCS) will host a 3-day Movement-Wide lessons learned workshop to be held from 05-07 March 2019. A total of approx. 150 practitioners and key decision makers from the Red Cross / Red Crescent Movement will convene to identify learning and transform it into concrete action to improve the way we fulfil our mission. This interactive and engaging workshop will consist of two days of technical sessions, and one day for a plenary and overall discussion of key findings and lessons learned.

Forum's Aim: The Lessons Learned (LL) workshop is the opportunity for all stakeholders of the post-2015 Earthquake Operation in Nepal to come together and share insights and experiences working together in support of community resilience in the country. A key purpose of this Lessons Learned (LL) workshop is therefore to document the main lessons learned under One Plan (4+1 integrated model) and to share and use the knowledge derived from experience in order to repeat success and avoid future setbacks. In other words:

- Promote the recurrence of desirable outcomes
- Preclude the recurrence of undesirable outcomes

Why? The LL exercise will allow participants to reflect and learn from both positive experiences i.e. good ideas that improve efficiency and/or effectiveness, as well as negative experiences. Our collective learning will be documented and shared with stakeholders as a means of helping to improve future similar initiatives.

Forum's Working Objectives:

- **WO1:** To generate key lessons learned related to the most significant achievements and best practices under Movement-Wide Recovery Plan "One Plan" that can be used by stakeholders in future contexts, not only in Nepal but also for similar large-scale operations within the Movement.
- **WO2:** To identify how key contributions generated through the operations can be sustained and up-scaled to the wider NRCS development programming, as part of the wider humanitarian and development system in the country.
- **WO3:** To serve as inputs session for future planning and coordination of the Movement programmes in Nepal and beyond.

Programme Overview

	DAY 1 Tue 5 th	DAY 2 Wed 6 th	DAY 3 Thu 7 th
08:30 10:30	08:30 – 09:00 Participation Registration and Coffee	08:30 – 09:00 Participation Registration and Coffee	08:30 – 10:30 VIP and External Stakeholders arrival
	Opening and Introduction NRC	Cross-cutting components and processes 6 Sessions	Feedback session (11 groups)
10:30 11:00	Break		
11:00 12:30	Thematic Sessions 4+1 Components	Cross-cutting components and processes 6 Sessions	Panel Discussion with External Speakers
12:30 13:30	Lunch		
13:30 15:00	Thematic Sessions 4+1 Components	Cross-cutting components and processes 6 Sessions	Panel with Beneficiaries
15:00 15:30	Break		
15:30 17:00	Thematic Sessions 4+1 Components	Cross-cutting components and processes 6 Sessions	Prioritization of recommendations and action points Workshop Closure
		Social Event (19:00)	

Annex 4

Movement-Wide Lessons Learnt workshop of the Nepal Post 2015 Earthquake Operation Shelter: Group Work Matrix

SHELTER		
What we learned from our SUCCESSES	What we learned from our CHALLENGES	RECOMMENDATIONS
POLICY LEVEL		
<p>What were the key successes?</p> <ul style="list-style-type: none"> GoN created a new structure with legal authority to move issues forward – structures, policies ERO Owner driven approach followed, and policies adhered by NRCS Identify and agree on the main factors that contributed to the success of each key finding above. <p>National:</p> <ul style="list-style-type: none"> Good leadership despite frequent changes National: Good mapping exercise Place each contributing factor in their corresponding level (International, national, district). <p>What did you learn from each of these key successes?</p> <ul style="list-style-type: none"> It is very useful to have an authority in place to manage disasters – with clear policies and procedures and consistent leadership! ERO: the structure, policies, dedicated team – commitment of partners to ERO (all partners) – one plan 	<p>What were the most difficult challenges faced?</p> <ul style="list-style-type: none"> Frequent changes to guidelines Reliance on Government engineers for verification Frequent staff (CEO) changes within NRA Gaps in understanding from local level <p>ERO</p> <ul style="list-style-type: none"> Delay in decision making Partners not seconded into ERO ERO had to follow NRCS policies <p>Timeframe</p> <ul style="list-style-type: none"> Need to have more realistic approaches especially when construction is involved in recovery Identify and agree on the main factors that lead to each challenge identified above. Place each factor in their corresponding level (International, national, district). <p>How did you solve each challenge?</p> <ul style="list-style-type: none"> Advocacy, communication, flexible approaches Develop relationship despite frequent changes 	<p><i>“Therefore, next time we will...”</i></p> <p>International level:</p> <ul style="list-style-type: none"> Shelter Cluster should work closely and influence GoN through development programmes. Timeline: Feed into the IFRC DM policy review <p>National level:</p> <ul style="list-style-type: none"> Advocate for one permanent authority for Disaster Management (like the NDMA) – apply learnings from this disaster <p>District level:</p> <ul style="list-style-type: none"> Influence at local governments and stakeholders as well. <p>NRCS Level:</p> <ul style="list-style-type: none"> Document LLW and disseminate widely ERO - adjust policies and procedures based on experience Incorporate shelter capacity building into long term planning. Owner driven approach was positive and should be replicated depending on context.

<ul style="list-style-type: none"> • Defined operational guidelines • Owner Driven approach: Aligned with the government policy – national society approach including participation by beneficiaries. • Standardized approach contributed to BBB 	<ul style="list-style-type: none"> • What did you learn from each of these challenges? 	<ul style="list-style-type: none"> • Analyse other approaches in shelter (urban) – thru preparedness – comprehensive approaches to shelter recovery. • Additional policies targeting the most vulnerable
INTEGRATION		
<ul style="list-style-type: none"> • Followed integrated approach, addressing cross-cutting components (CEA/GESI/PMER-IM/Comms) for shelter construction • Cash transfer for shelter construction from banking system was very much helpful for maintaining transparency/accountability • Different feedback mechanisms (hotline, suggestion box, face-to-face communication, radio programme) established under CEA helped to resolve the community issues, and also involved government authority. 	<ul style="list-style-type: none"> • Lack of trained and skilled manpower, including masons in the community • Cash distribution through bank was challenging for the most vulnerable group because of geographical condition • Frequent turnover of technical manpower 	<ul style="list-style-type: none"> • Followed integrated approach, addressing cross-cutting components (CEA/GESI/PMER-IM/Comms) for shelter construction • Develop robust MIS system from initial programming process - capture disaggregated data by sex, age, ability, sexual orientation, and cultural and social appropriateness. • Set up field level office with capacity of technical/social/volunteer for adequate socio-technical assistance • Marginalized group needs should be addressed through divers approach including mobile mason, mobile banking/branchless, standalone/complementary project.
IMPLEMENTATION		
<p>A) Awareness:</p> <ul style="list-style-type: none"> • Acknowledge the compliance of the building code • PASSA Rollout • 10 Key message dissemination and government guideline and policies dissemination. • Participation of Social mobilization volunteering (Aalo Palo) <p>B) Co-ordination</p>	<p>A) Resources:</p> <ul style="list-style-type: none"> • Scarcity of Skilled persons (Carpenter/Masons) • Construction Materials (Lacking and inflation) • Financial Resources (Insufficient Resources) <p>B) Policy and Guidelines:</p> <ul style="list-style-type: none"> • Frequent changed in the deadlines and guidelines • Intime policies for Cash grants • Additional beneficiaries were find out 	<p>International level:</p> <ul style="list-style-type: none"> • CASH and Technical support from implementing agencies <p>National level:</p> <ul style="list-style-type: none"> • Should have Technical and Construction Unit <p>District level:</p> <ul style="list-style-type: none"> • We should prepare the specific guidelines for specific cases • Awareness Raising for Staying at EQ Resistance Building (New and Old).

<ul style="list-style-type: none"> • Mitigated the confusion of rumors in the community during construction. • Helped to speed up the construction process • Strong co-ordination and collaboration with government <p>C) Technical and Financial Support</p> <ul style="list-style-type: none"> • Community people’s capacity enhanced (Mason/ Carpentry) • Government Recognition • Identify and agree on the main factors that contributed to the success of each key finding above. • Onsite technical support. • Mobilization of Technical and Social Mobilization • Capacitated Technical Manpower (through Mason/ • Timely dispersant of the CASH grants • Carpentry 	<p>C) Execution:</p> <ul style="list-style-type: none"> • Identify and agree on the main factors that lead to each challenge identified above. • Place each factor in their corresponding level (International, national, district). • How did you solve each challenge? • What did you learn from each of these challenges? 	
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Annex 5

Movement-Wide Lessons Learnt workshop of the Nepal Post 2015 Earthquake Operation WASH: Group Work Matrix

WASH		
What we learned from our SUCCESES	What we learned from our CHALLENGES	RECOMMENDATIONS
<p>A) Open to learn new technology based on our existing strength, capacity and experiences</p> <ul style="list-style-type: none"> • Strong technical team at different level • Pre-established relationship with Govt. line agencies • Clear policy/ guideline from the GoN and gave spaces based on need • Formation of WASH technical working group • Inventory survey • Endorsed and practice of long-term framework contract (constant follow up, improvised purchase order templates) <p>B) One plan, one team, same working modality</p> <ul style="list-style-type: none"> • Clear structure/mechanism • More focus and clear target with agreed timeline in advance • Integrated approach (multilateral; community driven) in close coordination and involvement of local authorities and community people • Shared resources and leadership • Good working relationship • Transparent communication 	<p>A) Challenges</p> <ul style="list-style-type: none"> • Lack of understanding and the process for rate contract (NRCS no experience with big responsibility had to supply huge items, materials) • No emergency and recovery procurement and logistic in place • No availability of skilled human resource with in NRCS and community, scope of work was high, too big to handle • Big gap between supply and demand because increased wages and availability of skilled HR • Quality assurance of materials supply at field level • Transportation of materials in remote area • New HR for emergency /Took time to orient, teach them (Staff could not understand the whole operation, No experienced staffs within NRCS) • Delay on decision making process/HR recruitment, procurement process / Design estimate <p>B) Main factor that lead to each challenge</p> <ul style="list-style-type: none"> • Lack of experiences took huge time to make a consensus with rate contract (NRCS, Partners) 	<ul style="list-style-type: none"> • Transfer the skilled staffs to the normal department • Properly document the learnings/innovations/reports • Replication of inclusive model on all development projects • Revision of existing WASH guideline based on learning • Prepare inclusive model guideline on WASH • Prior thought of quality inspection agency/unit, especially in larger operation like EQ both at HQ and District Chapter level • Make more sustainable-HR/Financial/cultural • Give full contact to key staff based on agreement with partners • Prior thought about Post Implementation Monitoring support (PIMS) for minimum 1 year • Sustainability and ownership of infrastructure after exit - linkage building with local authorities and community Drinking Water User Committees (DWUC) and potential stakeholders • Develop one big plan for all with clear timeline, budgeting, actions • NRCS has to develop business continue plan • Continue one operational plan

<p>C) Inclusiveness and sustainable WASH intervention</p> <ul style="list-style-type: none"> • Strong Coordination with stakeholders including beneficiaries • flexibility on wash team to address the need of most vulnerable • Policies (PGI, CEA, CP, BENCOM & Communication) environment is good/conducive within NRCS to be inclusive • Inclusive Design of WASH infrastructure • Strong coordination between ERO WASH division and partners <p>What we learnt?</p> <ul style="list-style-type: none"> • Competent and unique technology/ have experienced, expertise on new technology of water lifting system, CGD toilet • Keep business continue by scaling up the capacity, transfer innovation and knowledge, skills • Proper mapping of water scheme helps • Integration with other areas such area shelter, health and livelihoods, etc. to be more inclusive and cohesive approach • Clear guidance and directions with the shared resources (PNS, GoN) • Data management, PMER approach monitoring through the MIS • Identify the Strength/weakness/ priorities of PNs support • Working together communication/partnership building with partners • Development and enhanced community ownership and sustainability of the system 	<ul style="list-style-type: none"> • No fleet management department / no realistic plan • Work focused on normal time and There is no business continuity • Regular coaching mechanism not in place, No clear line of communication at all levels • No emergency friendly policy... No post to support recovery related issues • Too many decision-making process <p>C) Solutions</p> <ul style="list-style-type: none"> • Create awareness tools in different level-include in training module • Documentation and institutionalization putting in the policy/rules regulations procedure • To develop a model or a guidance on rate contract (Make a list of materials based on our experiences) • To review and amend the existing procurement policy specially for emergency or recovery • To discuss and update those issues in annual DM/WASH review meetings • To include in briefing and annual operational plan • Pre-agreement with govt. and local community to mobilize skilled labour • Lump sum contract through community putting in our procurement process/provision • Increase our budget in transportation including approach to the village 	<ul style="list-style-type: none"> • Review our procurement policy and procedure for recovery • Develop a model guidance on rate contract • Proper assessment need to be done before giving training • Put in place Pre-supplier agreement /framework • Clear-cut decision making process to be established and communicated • NRCS should develop training curriculum and good facilitators • Decentralization and delegation of authority • Multiple follow up and regular meeting
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Annex 6

Movement-Wide Lessons Learnt workshop of the Nepal Post 2015 Earthquake Operation Health: Group Work Matrix

Health		
What we learned from our SUCSESSES	What we learned from our CHALLENGES	RECOMMENDATIONS
<ul style="list-style-type: none"> Structurally safe health infrastructures have constructed and are able deliver better and regular health services with increased confidence of people (community, staff). Health facilities are able to provide 24*7 emergency services due to provision of health service equipment and accommodation facilities. Engagement of NRCS with government at national and district levels including MoH, NRA, municipal offices throughout the project (from planning to hand over) helped to create better ownership and which ultimately helped to heighten Red Cross image/people's perception. Availability of trained HR, quick deployment in response and same HR were continued in the Recovery which helped to roll out CBHFA activities throughout 14 districts. Reproductive health camps were conducted in close coordination with governmental and non-governmental stakeholders as a result in breaking of stigma related to chronic diseases such as cancer. In addition, it has trickledown effect as number of females going for health check-up in health camp or health facilities increased. 	<p>Assessment/ planning phase:</p> <ul style="list-style-type: none"> Lack of proper assessment of geographical remoteness, seasonal calendar, festivals, and requirements on site selection criteria. <p>Construction phase:</p> <ul style="list-style-type: none"> Insufficient management and oversight mechanism to compel contractor and consultant for delivery of quality product on time (incentive, penalty, blacklisting, etc.) Unavailability of required number of skilled/ unskilled labor during construction especially during recovery programme. Lowest bidder sometimes cannot provide timely and quality product. Lack of due-diligence check/practice to select the best contractor. Leading of some of the construction projects by non-technical (Engineers) staff caused delay, frequent changes in plan and quality compromise. Lack of clarity on variation order and approval process. Limited resources including human and materials (limited supplier and stock for the prefab materials, technical people) led to delay in construction of health facilities. 	<ul style="list-style-type: none"> If construction is priority, NRCS need to focus more for construction of permanent health infrastructure rather than prefab structure. In case, if decided to go for prefab-structure, market assessment mechanism need to be in place beforehand. For knowledge management of the construction, quality assurance/safe construction practices and on time delivery, establishment of technical unit comprise of civil engineers, architect, sub-engineer etc is required. If the price quoted by lowest bidder is not workable price, second lowest and so on need to be considered. For large construction project, due diligence/check is needed before financial bid opening. Dedicated Engineer/Sub-engineers is needed for large scale construction project. Procurement guideline should have clarity on allowable limit of variation order/quantities that can be approved by site engineer/NRCS management including clear approval process.

<ul style="list-style-type: none"> • Psychosocial first aid, Child resilience, child friendly space tools to support the affected people to maintain their well-being <p>Contributing factors</p> <ul style="list-style-type: none"> • Brand of Red Cross and trust of people • Coordination and cooperation with governmental and non-governmental stakeholders at all level • Effective volunteer engagement at community level • Readiness of resources (HR, Finance, IEC materials and equipment) • Database of trained human resource related to ECV • Health camp increases awareness, access and health services seeking behaviour in the community • Integrated program approach supported the families holistically • All sectors (4+1) should identify and include vulnerable group such as PLD, single women headed household, etc. in their activities. • ECV tools, ECV trained volunteers and staffs are in place • Mental health PSS needed in the recovery phase including in assessment 	<ul style="list-style-type: none"> • Lack of standard bidding document in NRCS led to delay in drafting of bid document as well as repetition of similar errors, etc. <p>Contributing factors</p> <ul style="list-style-type: none"> • Follow up and reviews of CBHFA trained HR and activities less prioritized given the fact of limited time for the completion of operation • Lack of clear guideline for implementing integrated approach at all level • Not enough information related to transition • Diversion of CBHFA approach to CBH approach affected coordination of ERO health team with NRCS health department 	<ul style="list-style-type: none"> • Bidding document (based up on size of the project) need to be standardized that can be used for different construction projects. • Proper and agreed M&E tools should be in place and be followed from the initial phase of Recovery • There should be proper guideline for implementing integrated approach • Documentation and sharing of information related to transition (time, resources, HR, equipment, etc.) from the beginning of Recovery phase maintaining transparency • Concerned department should always be kept in close coordination from the beginning of Recovery phase; it promotes ownership smooth transition and easy handover of activities to the department. • CBHFA related modules should be selected based on need identified. • NRCS has to build capacity on mental health and PSS and liaison between the mental health service providers in country
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Sub theme – Emergency health		
What we learned from our SUCSESSES	What we learned from our CHALLENGES	RECOMMENDATIONS
<ul style="list-style-type: none"> • Timely mobilization of first Aid staff & volunteers / stockpiling of enough FA kit. • Effective co-ordination (MOHP, MOD, HOHA) • Interdepartmental (WASH, OD & DM) • MOHP (FMT, Health cluster) • Immediate resume of blood services. • Contingency plan & SOPs. • Movement wide co-ordination. 	<ul style="list-style-type: none"> • Limited HR trained on health in Emergencies. • Emergency health kits (basic live saving) needs to be prepositioned. • Safety of staff & volunteers needs to be considered. • PSS should be initiated from the very beginning. • Health SOPs should be prepared. 	<ul style="list-style-type: none"> • Co-ordination at all level should be continued. • Increase health NDRT, PSS, staff & volunteers • Health dept SOPs based on NRCS contingency plan, Health preparedness & response plan. • Establish regular co- ordination with MoHP, EDCD, HEOC, PHEOC, Hospitals, UN agencies • Strengthen regional & sub- regional warehouses including provision of health kits • Increase DDRT, ECV, PSS, CBHFA trained staff & volunteers • Co-ordination with district health office, hospital, rural/ urban municipalities, DCC • Develop municipality level preparedness & response plan • Prepositioning of E. health response kit. • Support/ invest for safety of staff & volunteers involved. • Staff & volunteers safety protocols should be in place • Provision of safety tools & measures should be provided to staff & volunteers deployed in emergency • Identify appropriate/ safe location for blood donation, training, workshop & interaction.

Annex 7

Movement-Wide Lessons Learnt workshop of the Nepal Post 2015 Earthquake Operation Livelihoods: Group Work Matrix

Livelihoods		
What we learned from our SUCSESSES	What we learned from our CHALLENGES	RECOMMENDATIONS
<p>A) Targeting</p> <ul style="list-style-type: none"> Community Centered Selection Process (Community Led) Coordination with local government, communities and NRCS for targeting. Communities had access to information and feedback that reduced conflict and misinterpretation Reached to vulnerable and marginalized people Built good relation and coordination with government authority that ensured ownership and sustainability Vulnerable assessment tool used for beneficiaries' selection, has been proved to be useful (Inclusive) Selection criteria & process: defined and agreed and contextualized 	<ul style="list-style-type: none"> Targeting beneficiaries took long time because vulnerability criteria differ in different context Only Red Card as a criteria for selecting the beneficiaries in initial phase left more vulnerable people without assistance Local political influence and hidden interest (social political and elite group) 	<ul style="list-style-type: none"> Every project in future should be community led and should address community needs In consultation with communities and local government, vulnerability criteria and guideline should be developed Developed joint monitoring framework in coordination with government Beneficiary selection criteria must be contextualized for all type of assistance, Objective oriented criteria: Proper socialization of the livelihood activities about selection criteria, process, objective and limitation to all authority and community leaders and residence and red cross staff and volunteers
<p>B) Cash Coordination Group</p> <ul style="list-style-type: none"> Ability to adjust/change on implementation of modalities over the time as per community recommendations (Adoptive Management) Push factor(Activity plan, monitoring of utilization of grant) that reduced the misuse of the grant Develop Cash based assistance guideline to support livelihood recovery activities Cash combined with technical training Flexible and contextualized cash transfer options 	<ul style="list-style-type: none"> Conflict between beneficiaries and non-beneficiaries Lack of process documentation and decision-making process Perception of government that cash made people more dependent Delayed implementation resulting in alternative coping strategies by the communities that could result negative consequences in the long run Continuity of the business in long run Management of the distribution site 	<ul style="list-style-type: none"> Timely decision making and timely response to restart livelihood activities in time and avoid less effective coping mechanism NRCS should take advantage of the system and process developed for earthquake response to further improve cash-based intervention, preparedness. Advocacy to local government and stakeholders for cash-based intervention to recover the livelihood activities.

<ul style="list-style-type: none"> • Availability and coordination with financial service provider • Identify the productive opportunity for the selection of right business options <p>C) Technical Training</p> <ul style="list-style-type: none"> • Established linkage between community people and government service providers • Dissemination of government livestock insurance policy during technical training session 	<ul style="list-style-type: none"> • Initial resistance by DC to use the CASH as a tools • Resistance by DC to use the banking system to distribute the cash • Liquidity available in the financial institute • Financial settlement in case of bearer cheque • Restructuring of government service providers/centers • Ensuring participation of all beneficiaries 	<ul style="list-style-type: none"> • Develop joint monitoring framework together with Government and NRCS district chapter and communities • Establish linkage with market financial service provider and government line department. <p>Cash distribution followed by the technical training back up with continues technical advice</p> <ul style="list-style-type: none"> • Flexible and contextualized cash transfer • Efficient cash transfer mechanism to financial institution • Capacity building to DC to use the CASH as a tools • Use of government existing training packages as much as possible. • Technical training should be followed with actual business plan and should be monitored regularly.
<p>D) Cash for Work</p> <ul style="list-style-type: none"> • Infrastructure developed on the basis on community demand. • Temporary employment created • Food security enhanced • Seasonal migration stopped for period of time • Community led infrastructure helped for community ownership/sustainability • Trained mason • Able to establish message of equal wages for same work at community level (GESI) • Women were motivated in Cfw involvement • Able to build community ownership on public infrastructures 	<ul style="list-style-type: none"> • Community demands were mostly focused on material intensive project • Availability of community people can delay the completion of project (seasonal/cultural context) 	<ul style="list-style-type: none"> • In-depth discussion and clear guidelines when Cfw should be implemented in terms of timeframe and type of infrastructure (only for response & early recovery)
<p>E) Decision Making and Coordination</p> <ul style="list-style-type: none"> • Coordination among communities, Government and Red Cross on coming up with cash recipient 	<ul style="list-style-type: none"> • Institutional memories lie with only few people. There is no provision to retain those memories and experience in the organization. 	<ul style="list-style-type: none"> • Timely decision making and timely implementation of the programme to restart livelihood activities in time and avoid less

<p>criteria/cash recipient list community-based approach/owned approach</p> <ul style="list-style-type: none"> • Common livelihood framework and contextualized interventions learning among the partners and implementing at the field 	<ul style="list-style-type: none"> • Timeliness of livelihoods activities the grant would have been more effective if we could start within a year after the earthquake. • Lack of strategy to adapt delay - difficulty/institutional capacity to follow activities follow the recovery activities institutional memory 	<p>effective coping mechanism from the member of the community</p> <ul style="list-style-type: none"> • Communities having voice on making decisions made the projects sustainable. Continue having community voice in decision making level timely recruitment of the staff • Revision of the target and commitment periodically at the respective level - realistic plan and commitment and the proper documentation and transfer the learning and knowledge prepare and update the risk management framework
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Annex 8

Movement-Wide Lessons Learnt workshop of the Nepal Post 2015 Earthquake Operation ICB: Group Work Matrix

ICB		
What we learned from our SUCCESSES	What we learned from our CHALLENGES	RECOMMENDATIONS
<p>PLANNING</p> <ul style="list-style-type: none"> • Participatory approach PNS and NRCS • DC coordinated with stakeholders at the ground • Understanding the real need of the community (Need based Assessment) <p>IMPLEMENTATION</p> <p>What were the key successes?</p> <ul style="list-style-type: none"> • Sustainable: Tangible Physical infrastructures constructed (district, Hq, subchapter level) • District chapter, subchapter building construction-Due to infrastructure motivation for volunteers to be active, more coordination within the team. • Cross Complemented other sectors. Eg subchapter building constructed where other 	<p>PLANNING</p> <ul style="list-style-type: none"> • Limited resources to implement the planning of DC building construction. Local resource mobilization should have been done because only coordination with stakeholders about master plan is always not enough. • DC create master plans in the planning phase but sometimes we don't get enough resources locally to utilize those resources. • Partners have low priority for ICB. If ICB activities has more visibility in the community then partners could prioritize ICB more. <p>IMPLEMENTATION</p> <p>What were the most difficult challenges faced?</p> <ul style="list-style-type: none"> • Centralized decision-making causing delays. Authority delegation. • Budget limitation and time constraint. Eg district chapter construction • Inadequate and inappropriate instruction to bidder. • Low level of financial resource capacity. No income generation source 	<p>PLANNING</p> <ul style="list-style-type: none"> • Better investing in capacity building with regards advocacy, humanitarian diplomacy and marketing. • Keep ICB as a part of recovery plan. • Define “minimal package” of ICB for all projects (recovery and development). • Integrating construction of DC building with services. Should linked the construction of DC with the service (warehouse, blood bank, health clinic, training) to facilitate the fund training. • Where possible, integrate mason training with construction activities to maximize resources. • Logistics plan should be prioritized on ICB. • Build ownership with wider involvement. • Proper assessment prior to DC/SC to capacities prior to power delegation. • Prioritizing community needs with strong involvement of DC. • Involve communities in the ICB activities like WUC, mother group which has further connection to larger audience. • DC coordinating with key relevant stakeholders in decision making for resource pooling. • Allocation of resources should be need based but not on “nice to have” approach.

<p>trainings could be conducted, community people can visit for support</p> <ul style="list-style-type: none"> • Capacity enhancement of volunteers at local level • ICB related trainings coordination, interaction with local level representatives, stakeholders-gaps identified where each can support the other. • School construction: support for capacity enhancement not just others. Community infrastructure construction increased the credibility and image of Red Cross. • Land donated by community due to good image • Due to linkage and networking of volunteer-based organization good coordination, trust of local stakeholders. Could maintain good reputation • Wider dissemination and Red Cross credibility enhanced in community by building schools. • Enhanced Technical expertise and partnership from involvement of several PNS • Coordination with different government agency has enhanced. Good teamwork with management which has helped in achieving good result 	<ul style="list-style-type: none"> • Long timeframe for construction than agreed timeline. • Variation in budget during construction like time frame, cost. • Clear guidelines and specific design agreement for district chapter building. • Contractors accountable to HQ, not completing the construction in time. Monitoring would have been easier if responsibility given to district. • Remoteness of construction sites and water scarcity in some cases (no-cost of water in contract) 	<ul style="list-style-type: none"> • Have periodic DC/SC capacity assessment. <p>IMPLEMENTATION</p> <ul style="list-style-type: none"> • Infrastructure construction (both community infrastructures and district chapter) to continue as integrated part of recovery. Plan for how the infrastructures will be linked with service delivery, sustainability. • Develop HR training, mobilization and retention plan with proper budget provision. • Maintain database of trained volunteers. Not only focus on training but more practical aspects should be considered. Link trainings with the service delivery. • Coordination, resource mobilization strategic plan at all levels. • Revision of policies, strategies ensuring decentralized approach for effective
<p>EXIT/TRANSITION:</p> <p>What were the key successes?</p> <ul style="list-style-type: none"> • Included exit/Transition in recovery framework and "Integration statement of Intent": District chapter should also prepare the district level exit strategy. • Exit strategy plan was realistic based on the original exit strategy. • Training and capacity of volunteers increased. 	<p>EXIT/TRANSITION:</p> <p>What were the most difficult challenges faced?</p> <ul style="list-style-type: none"> • Exit strategy of huge operation • Building construction. • Delay in construction work. • District level exit plan • Alignment with government policy, plan • Identify and agree on the main factors that lead to each challenge identified above. 	<p>EXIT/TRANSITION:</p> <p>International level:</p> <ul style="list-style-type: none"> • District chapter should also prepare the district level exit strategy in line with headquarter plan. • Sustainability plan for overall institutional devolvement activities. • Organizational capacity should be increased in terms of human resource, policy strategy and working procedure should be in place. <p>District level:</p> <ul style="list-style-type: none"> • Formulation of assets/building management plan before the construction of building

<ul style="list-style-type: none"> • Different time line for hardware and software activities. • Identify and agree on the main factors that contributed to the success of each key finding above. • "Integration statement of Intent" • District capacity assessment. <ul style="list-style-type: none"> • Place each contributing factor in their corresponding level (International, national, district). • What did you learn from each of these key successes? 	<ul style="list-style-type: none"> • No clear vision of use of the infrastructure. • Availability of land/ No concrete plan for building use • Policy and working procedure for the construction related work. Ex. Proper "Bid document" policy of Nepal Red Cross. • Volunteer retention <p>How did you solve each challenge?</p> <ul style="list-style-type: none"> • Used original exit plan to exit ICB activities • Searched volunteers for land donation/ or purchase land or use existing available land for the construction <p>What did you learn from each of these challenges?</p> <ul style="list-style-type: none"> • Pre-plan the construction work 	<ul style="list-style-type: none"> • Database management of volunteers in all levels (well-maintained MIS). • Create an enabling environment to volunteers to make them feel that they are the part of movement. • During exit planning: different timeline for construction should be considered. <p>Final recommendation:</p> <ul style="list-style-type: none"> • NRCS should well maintain its alignment with government policy, plan and working procedure, specially maintaining the pace of progress with government. • If construction of infrastructure (School, Health facility, community building, DC/SC building) is a strategic intent of the NRCS, then it should be developed with clear mandate, policy, plan strategy, working procedures, minimum skilled HR and funding plan. Also prepare sustainability strategy. • Volunteers would be interested to engage with Red Cross Movement for cause. Therefore, it is very important to create an enabling environment whereby they would be able to contribute learn and grow through their engagement with Red Cross.
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Annex 9

Movement-Wide Lessons Learnt workshop of the Nepal Post 2015 Earthquake Operations PMER-IM: Group Work Matrix

PMER-IM		
What we learned from our SUCCESSES	What we learned from our CHALLENGES	RECOMMENDATIONS
<ul style="list-style-type: none"> Established mobile/web-based MIS system for data collection, processing, information management and reporting system. This system is also being replicated by other department. Movement-wide reporting system based on common indicators, which enables to demonstrate movement wide achievements in one platform. Informal practices of shared leadership concept have been adapted in PMER-IM working group. It resulted in knowledge transfer, fostering learnings and contributed to overall data and knowledge management of recovery operations. As part of qualitative assessment, collection of success stories was very powerful tool to communicate – which has helped programme team to understand the impact of programme at individual level. So far, two booklets on success stories have been published. Developed and implemented guideline/tools and framework for evaluation, baseline survey and monitoring. This has helped to ensuring quality of studies and also maintain common understanding. 	<ul style="list-style-type: none"> Frequent changes in activities and targets without reflecting in Logframe caused difficulties in tracking and analysing achievement against target. Overassessment has been one of the key challenges in the operations, due to different implementation timeline and targeting same community, paper-based vs. mobile based data collection, minimum use of secondary data Different reporting requirements (template, timeline and frequency) of different partners. Data discrepancy was one of the challenges which hindered timely preparation of quality reports. 	<ul style="list-style-type: none"> Set-up and institutionalize mobile web-based MIS from planning phase of the operation. Follow systematic data collection processes with a focus on analysis and use of data. IFRC and PNS PMER-IM focal person need to dedicate certain time/efforts in working together (physically) with National Society PMER-IM team. Centralize PMER-IM staff of all departments together in PMER-IM division at National Society than projectized staffing. Based on the learning from the existing working approach of PMER-IM team, it would be good to formally initiate the shared leadership concept in the operations.

Annex 10

Movement-Wide Lessons Learnt workshop of the Nepal Post 2015 Earthquake Operation CEA and Communications: Group Work Matrix

CEA and Communications		
What we learned from our SUCCESSES	What we learned from our CHALLENGES	RECOMMENDATIONS
<ul style="list-style-type: none"> Participatory approach was followed since the inception of ERO Project including planning, decision making and implementation of sectorial work. Community were made well aware about project information including processes, scope of work, and limitation of work. Setting up feedback mechanism and complaints were well addressed and logged for future learning Presence of Red Cross structure at different levels including at National Level, community level helped in proper dissemination of information Proper dissemination of information through multiple channels like IEC materials, radio broadcasting, videos, street drama Community involvement made sectorial activities effective CEA became bridging point among Red Cross and communities and help coordinating with stakeholders and making them accountable. 	<ul style="list-style-type: none"> Lack of proper guiding documents, guidelines mechanisms and minimum standards. Institutionalize CEA Challenges on being accountable towards community members because of coordination between different key stakeholders Community are not aware of rights to receive humanitarian aid making them reluctant to raise any problems they face Utilisation of established tools by community. Making PNS representatives familiar with local environment and understanding the situation. Adaptability of community to undertake new behaviour. Lacking compilation and documentation of feedbacks, suggestions and responses from all the channels available. 	<ul style="list-style-type: none"> Clear policies, guiding documents, contextualized tools should be developed at national level and ensure implementation at all level. Continuation of Community-lead approach Institutionalization of CEA through the presence of Red Cross structure at different levels including at national level, community level. Mandatory involvement of CEA perspective during planning process to integrate CEA. Prepared and apply standard log for different feedback mechanism (including face to face communication) Inclusion of perception survey in all assessments
COMMUNICATION		
<ul style="list-style-type: none"> Proper dissemination of information through multiple channels like IEC materials, radio broadcasting, videos, street drama, live interviews, print and electronic media. 	<ul style="list-style-type: none"> Since it was huge operation with multiple partners, we could not follow communications channels properly. (internal communication) 	<ul style="list-style-type: none"> Strengthen communication strategy (External and Internal) and ensure its implementation. Build the capacity of leadership and communication staffs to deal

<ul style="list-style-type: none"> • Handling of rumors and response in time along with collaboration with different agencies. • Organizational nature of Red Cross (national and international channels) communicated information in effective way • Nepal Red Cross was recognized as a first responder during the emergency as a result of long run communication work over the years. 	<ul style="list-style-type: none"> • Information was interpreted differently by different media houses as per their perception. • Community Expectations versus resources and capacity at local and national level. • Lack of Communication TOR for field level staffs and volunteers 	<p>effectively externally (most importantly sensitive issues)</p> <ul style="list-style-type: none"> • Periodic engagement with media houses on Red Cross work. • Well dissemination of Red Cross Scope of work to community. • Continue one movement one voice - Start to establish Red Cross journalist network of volunteers
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Annex 11

Movement-Wide Lessons Learnt workshop of the Nepal Post 2015 Earthquake Operation GESI: Group Work Matrix

Group: GESI		
What we learned from our SUCCESSES	What we learned from our CHALLENGES	RECOMMENDATIONS
<ul style="list-style-type: none"> Increased female participation contributed towards better community engagement and their access to services and programme ensuring inclusiveness at all level. Application of twin track approach (stand-alone and mainstreaming) has been proven to be more effective and success oriented in addressing the special needs of the most vulnerable by age, sex, ability, cultural-social appropriateness etc. Regular dialogue, coordination and collaboration with external stakeholders from national to local level supports NRCS to be recognized as an active organization promoting PGI issues. It also ensures better access to services. Regular internal coordination and follow up from the planning phase help integrate PGI issues within the projects/services and institutions with better ownership at all levels. Establishment of PGI fund and its mobilization for specific PGI intervention at different level has been proved to be an effective initiative to address unmet PGI needs. Peer support on PGI for capacity enhancement of other national societies has been effective 	<ul style="list-style-type: none"> Socio-cultural – continuous advocacy at all levels to overcome the socio-cultural barriers following relevant policy and norms has been proven to be an effective tool when combined with long term program intervention. Insufficient Resources (Financial, HR, Technical): Provision of consortium & basket fund has been able to address the gaps to some extent. Operationalizing the complaint mechanism of SGBV & Child protection issues: Involvement of selective senior management people (privacy and confidentiality) in addressing complaint /allegation has proven to be effective Access & utilization of CGD Friendly services Establishment of CGD friendly services is not only sufficient to ensure utilization of these services, access up to these services also needs to be addressed. Quality participation of women/disadvantaged groups Separate homogeneous group prior to discussion on a larger group (heterogeneous) is needed to encourage “speak up culture” 	<ul style="list-style-type: none"> Dissemination & advocacy of plan/policies/guidelines & its ownership at all level-I/N/L Promote Consortium approach for diversifications of fund-N/L Constitutional commitment to ensure minimum 33% female participation-N/L Promote twin-track (Mainstreaming & standalone) approach-N/L Expand & continue regular coordination and collaboration with stakeholders from International, national to local level-I/N/L Promote & establish monitoring mechanism (including MIS SADD data)-N/L Development of SoP/strategy for internal response mechanism-N Advocate and empower communities to advocate public authorities in order to ensure access to CGD friendly services - N/L Apply innovative approach to encourage quality participation-N/L Continue peer support on PGI-I/N

Annex 12

Movement-Wide Lessons Learnt workshop of the Nepal Post 2015 Earthquake Operation Transition: Group Work Matrix

Transition		
What we learned from our SUCSESSES	What we learned from our CHALLENGES	RECOMMENDATIONS
<ul style="list-style-type: none"> • ONE Transition Plan: Inclusive and participatory discussion and agreement on common principles and transition framework is relevant for effective Transition Planning (such as model transition plan and mapping of HR, assets and financial resources) from the beginning until end of the operation. • Establishment of a dedicated One Operation Structure like ERO helps in delivering large-scale programme commitments within given timeframe • Coordination, collaboration and engagement of stakeholders; especially with Government institutions at different levels helps in developing common understanding, defining targets, timeline and liabilities transition • Practice of having Sectoral Transition Strategies (via technical working groups), wider stakeholder consultations and meetings (Way-forward meeting, transition review meeting and Movement-wide mid-term review) helps in facilitating a smooth transition process to existing NS department through interim structure and mechanisms 	<ul style="list-style-type: none"> • Managing transition of organizational infrastructure, constructions, assets and HR took longer time than expected • No prior experience and established transition mechanism for large-scale EQ operation creates confusion, mis-understanding at different levels • Different transition strategy by partners and delayed formal communications to District Chapters may result in high turnover of key staff as well as slow programme implementation • Translation of One Transition Plan into action is difficult without adequate preparation, well defined strategy and commitment/decision at different levels • Limited ownership, capacity building, transfer of resources and authority and engagement of NS's existing Department heads slows down the transition process 	<ul style="list-style-type: none"> • Endorsement and communication of One Transition Plan/mechanism (common framework, principle, criteria with tentative timeframe, roles and responsibilities and resource transfer) with flexibilities from the beginning • Developing long-term HR and asset transition strategies/criteria for all levels as part of Recovery Guideline/Scenario-based Contingency Plan of NRCS • Managing future large-scale disaster recovery operation through a dedicated structure such as Earthquake Response Operation (ERO), with clear linkage to existing departments, defined roles and responsibility as well as a tentative timeline to transition under Recovery Planning. • Prior identification of thematic/sectoral transition to NS existing structure (e.g. Shelter and construction) Defining guidelines and tools (Phasing down, Phasing Out and Phasing Over) in advance as part of Recovery Guideline/Scenario-based Contingency Plan of NRCS • Ensure Department engagement, build their capacity and transfer resources (finance, HR/skill/knowledge and expertise) to take over roles and responsibilities under transition (at least 1 year prior to actual transition) • Establishment of a Recovery division under DM by putting regular staff with special responsibility during normal time. However, during emergency, experienced staff from CDD, Health, etc. should be pulled to this division.

Annex 13

Movement-Wide Lessons Learnt workshop of the Nepal Post 2015 Earthquake Operation Coordination and Partnership: Group Work Matrix

Coordination and Partnership		
1. External agencies and I/NGOs and Private Sector		
What we learned from our SUCSESSES	What we learned from our CHALLENGES	RECOMMENDATIONS
<p>Technical assistance/support from HRRP at District level</p> <ul style="list-style-type: none"> NRA engineers did final decisions, but HRRP provided technical support based on the request Skills were strengthened, e.g. training to the masons Supported to avoid duplication with other agencies <p>Key factors contributing to the success:</p> <ul style="list-style-type: none"> Working Information Management System Relevant technical expertise Successful timing <p>Successful engagement of external expertise</p> <p>Knowledge sharing with Academic Sector (Crises Management Studies)</p> <ul style="list-style-type: none"> Support to IFRC Two-way sharing and learning: theory and practice to meet 	<p>Limited coordination at local level</p> <ul style="list-style-type: none"> Coordination focused only to avoid duplications, quality perspective was lacking <p>Coordinated need analyses and communication</p> <ul style="list-style-type: none"> District level should identify where the needs are and who can support <p>Multiple requests to RC that is not RC core area</p> <ul style="list-style-type: none"> High expectations from the community members and sometimes also from the authorities 	<ul style="list-style-type: none"> Hold regular coordination meetings at all levels (international, national, district and ward level). Authorities should have a responsibility of engaging all agencies to the coordination platform. Foster long-term partnerships with academia and agencies, targeted focus recommended (e.g. students) Explore active agencies and possibilities for collaboration in the region. When feasible, make pre-agreements to ensure needs and resources will meet. Enhance understanding of the roles and responsibilities, expertise and capacities of different agencies (including NRCS) At shelter cluster, bring the coordination to the local level. To support DC level 1) to understand the importance of coordination and 2) to collaborate with the other agencies Empower the coordination at ward level (CDMC), co-operation between the RC DC and sub-chapters levels and local authorities

2. Authorities and local communities		
What we learned from our SUCCESSES	What we learned from our CHALLENGES	RECOMMENDATIONS
<ul style="list-style-type: none"> • Significant contribution to government recovery plan • Selection of beneficiaries for targeted activities were transparent, inclusive and integrated. • Good participation of local people and acceptance of red cross activities by local communities. • Involvement of local government for selection process of beneficiaries to targeted activities. • Ownership of Red Cross activities by local government. • The plan and activities of Red cross should be in line with local government/government and need of local people • Transparent, inclusive and integrated way of selection of beneficiaries leads to avoid conflicts at community level. 	<ul style="list-style-type: none"> • Duplication of work in software activities in the community by other organization. • Gap between expectation of local communities /local government and available resource of Red cross • Unnecessary influence from influential people in all level • Participation in local level plan formulation process • Applying flexibility approach on our implementation modality • Many organizations working in the community • Red cross limited time and resource • Applying flexibility in our implementation approach contributed to reduce challenges in all levels. • Coordination and plan sharing with local authority and community reduces duplication of work 	<ul style="list-style-type: none"> • NRCS should develop local level coordination plan as minimum requirement for implementation of project in line with new federal system and new local level government. • Increase the dissemination of NRCS principle and working modalities.

3. Red Cross Movement

What we learned from our SUCSESSES	What we learned from our CHALLENGES	RECOMMENDATIONS
<ul style="list-style-type: none"> • Integrated plan (4+1) ‘1 Plan’ for the RCM linked to GoN recovery plan but also included innovative elements (cash grants for shelter and seasonal support linked to GoN coordination) • Integrated Rapid Assessment (IRA) lead by NRCS within the cluster system as a common tool for planning with INGOs and shared across the clusters (with GoN) • NRCS linked to DDRC formally part of the DM system at the National and District level with a network of DCs, sub-chapters and volunteers • Reputation of NRCS facilitated the partnerships with NRCS, clearly developed guidelines for working with DDRC • Coordination with DDRC permitted a scale up of the response even with limited NRCS resources (one door system of distribution with response kits) • New Constitution, new policies and formation of the NRA required accountability. NRCS responded as a national organization and a key humanitarian actor • NRCS engaged in the cluster system to coordinate with the ‘leads’ (WFP, Unicef, etc) and other cluster members to deliver relief assistance • Handover of infrastructure and other recovery projects to the Chair of the Wards after which the Ward-level links to the user groups/committees 	<ul style="list-style-type: none"> • Limited resources within the initial response period at the District-level • All-party coalition structure existed at the local level (absence of an elected local body) that did not respond to the humanitarian need but rather based on political constituency • DDRT available in the initial response were not enough to meet demands at District-level • DC were also affected by the disaster and needed to respond to personal-level impacts (destruction of family home, death/injury). Despite this NRCS staff and volunteers mobilized to support the overall response • Consortia and bilateral partnerships existed within ERO, but their coordination was not always smooth in terms of priorities and/or capacities in support • EQ contingency plan was based on a mega-disaster occurring in the KTM Valley where the actual disaster impacted in more remote areas • ERO was an opportunity for NRCS to reach vulnerable communities, raised the profile of RC and raised expectations of the community. How to return to ‘normal’ programs and operations with limited NRCS resources. • Executive Officer at the municipal level had funds but did not have the response capacity but could defer to the NRCS as the lead to manage the response 	<ul style="list-style-type: none"> • More investment in DRR (preparedness, response and recovery) at local level to build capacity. Current municipal level does not have the systems, resources and staff to deliver on their mandate • EQ contingency (preparedness and response) plans need to be developed for all levels in the DM system (national, provincial, municipal) • DCs need to be the focus for capacity building (including resources) with DRR to provide a response at the local level which can be sustained over the long term (initial investment is high but will create longer term capacity) • A clearly defined exit strategy/plan for ERO was shared with non-RCM/external partners. DCs continue to develop operations strategies/plans for longer-term post-EQ programming • Setting up ERO for future operations in response to future mega-disasters, including EQ Steering Committee at HQ and District-level (agile and quick decision making by a sub-group of the CEC). Normal DM response system for smaller-scale disasters. • Although the NRCS has a clear role within the Disaster Response system at national and District level the overall auxiliary role of the RC would be strengthened by a RC Law. Overcome administrative barriers to focus more on the response, a higher status within Nepal permits NRCS to access additional resources and act with greater independence/autonomy in providing services

Annex 14

Movement-Wide Lessons Learnt workshop of the Nepal Post 2015 Earthquake Operation Decision-making and Approval Mechanisms: Group Work Matrix

Decision-making and approval mechanisms		
What we learned from our SUCCESSES	What we learned from our CHALLENGES	RECOMMENDATIONS
<p>Structure coordinators /HR</p> <ul style="list-style-type: none"> Steering Committees HQ and district level. ERO One plan should be followed Joint decision making Frequent meeting to discuss issues ant DC level Senior staff as DPC HQ level support and encouragement from HQs as well as partners <p>Finance</p> <ul style="list-style-type: none"> Standard format for budget Audit and feedbacks to improve Same financial reporting format and guidelines CTP in shelter, WASH, livelihood owner driven shelter Software in DC level <p>Procurement/logistics</p> <ul style="list-style-type: none"> Long term agreements with suppliers Warehouses Adaptation as per district chapter request and need. 	<p>Structure coordinator/HR</p> <ul style="list-style-type: none"> High expectation pressure to programme. Delay in decision. Difficult decisions with conflicts of interest. Different donors or back donor's reporting format. Community, local government demand development phase programme. Ad hoc Management and bottle neck for decision making in ERO. Comply regulations of the government. Lack of training to social mobilizers and Jr. staff. Delay in cash forecast which could impact programme implementation. Programme/partners commitments in community without consultation of finance. Transition to development demands from government and community. <p>Finance</p> <ul style="list-style-type: none"> Approval thresholds. Lack of knowledge of rules and regulations. Tax issues. Law is complicated. Untimely reporting. 	<ul style="list-style-type: none"> Capacity building-Knowledge and skills on financial management should be enhanced at all level including social mobilisers and volunteers. Taxes- Dissemination system from HQs to DC regarding tax rates should be established and reviewed time to time. Policies-Develop Finance manual for emergencies and recovery. Fraud and corruption reporting mechanism to be included in the finance policy Approval authority and review of validation threshold. Clear guidelines in absence of governance for the approvals. Timely reporting - Clear guideline on validation process of supporting documents, vouchers, and necessary requirements. HQs to do proper analysis of different locations, rules and applicability (level and operational aspects) Minimum Standard reporting system. Synchronization of software system between HQ and DC so that's its faster. Recruitment system and process should be reviewed for making it more practical, transparent, flexibility, quick. HR recruitment process for response and emergency recovery phase. Involve PNS in interviews for senior technical staff. (*) Disclosure for recruitments to avoid Nepotism. Delegate authority to district chapter for staff recruitment.

<ul style="list-style-type: none"> MIS 	<ul style="list-style-type: none"> Validation process. Shelter, lack of policy by government impacted late payment. <p>Procurement/logistics</p> <ul style="list-style-type: none"> No provision of NRCS rules for community-based procurements. Central procurement impacts delays in supply. Late supply by vendor and providing good quality. Procurement process (lengthy, time consuming) Not having procurement plan in programme. Transportation. Improper design and wrong estimate in construction. Issues in long term agreement with the suppliers. 	<ul style="list-style-type: none"> Periodic capacity assessment and development plan Consider establishing recovery operation unit managing technical departments staff More sustainable staff management through proper required contracts as per HQ/project. (*) Develop policy or system for staff development at all level, no discrimination. <p>Structure</p> <ul style="list-style-type: none"> Empowering of senior and middle level managers at DC and HQ to take Decisions. <p>Procurement</p> <ul style="list-style-type: none"> Policy- Financial procurement policy will be revised by making compatible to the government policy to community level transaction. Special provision for emergency and recovery phase. Special decision-making system should be established for emergency and recovery also roles of province. Authority mechanism system for timely supply Bidding criteria and quality control. Risk management, legal implication, protection of reputation of organization. Adopt the policy integrating international standards. Rate contractors' terms and conditions criteria, selection procedure, multiple contractors. Penalty clause in contracts and enforcement of them. Established quality control unit and prepare sop at HQ and DC level. Capacity enhancement for district for procurement processing and documentation as well as monitoring, accountability
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Annex 15

Chart: Priorities of recommendations and action points

