MALAYSIAN RED CRESCENT

IFRC

MID-TERM REVIEW OF MALAYSIAN RED CRESCENT SOCIETY COVID-19 RESPONSE
MAY 2021

Contents

List of Abbreviations and Acronyms

B40	Bottom 40 per cent
BOCA	The Branch Organizational Capacity Assessment
CSOs	Civil society organizations
COVID-19	Coronavirus disease (SARS-CoV-2)
CEA	Community engagement and accountability
CHF	Swiss francs
CVA	Cash and voucher assistance
DM	Disaster management
DRM	Disaster risk management
DREF	Disaster Relief Emergency Fund
EMT	Evaluation Management Team
ICRC	The International Committee of the Red Cross
IFRC	The International Federation of Red Cross and Red Crescent Societies
MATCH	The Malaysian Coordination and Action Hub
MCO	Movement Control Order
MRCS	Malaysian Red Crescent Society
MTR	Mid-term review
MYR	Malaysian Ringgit
NADMA	Malaysian National Disaster Management Agency
NGOs	Non-governmental organizations
NSC	National Security Council or *Majlis Keselamatan Negara*
NSRP	National Society Response Plan
PMER	Planning, monitoring, evaluation and reporting
PPE	Personal protective equipment
OCAC	Organizational Capacity Assessment and Certification
RCCE	Risk communication and community engagement
RCRC	Red Cross Red Crescent
RMCO	Recovery Movement Control Order
SOPs	Standard operating procedures
WASH	Water, sanitation and hygiene
WHO	World Health Organization
UN	United Nations
UNDP	United Nations Development Programme
UNHCR	The United Nations High Commissioner for Refugees

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Executive Summary

The purpose of this mid-term review was to assess the progress and results of the overall COVID-19 response of Malaysian Red Crescent Society (MRCS). The mid-term review aimed to seek understanding on the relevance and appropriateness, effectiveness and efficiency as well as connectedness and sustainability of the COVID-19 operations between January 2020 and January 2021. The review assessed progress in implementation vis-à-vis the initial operational strategy, operation management, quality assurance, MRCS implementation capacity and challenges faced, areas for improvement and measures for mid-course correction on the strategy, management and implementation of the operation.

20 key informants from 9 organizations and 2 aid recipients were interviewed between 3 March 2021 and 8 April 2021. These key informants came from five groups of organizations or backgrounds, namely i) Government agencies, ii) The International Red Cross Red Crescent Movement, iii) Malaysia-based NGOs and CSOs, iv) Donors from the private sector, and v) Individuals such as aid recipients. Key documents, reports and secondary data from previous survey conducted by MRCS were also reviewed. The analysis and triangulation of data obtained from the key informant interviews and desktop review led to the following main findings and recommendations.

Main findings

The main findings from MRCS COVID-19 response are presented below based on the main areas of focus for the mid-term review: relevance and appropriateness, effectiveness and efficiency, as well as connectedness and sustainability.

Relevance and appropriateness

- MRCS COVID-19 response complemented government's efforts and reached the target population including, but not limited to, B40 households, undocumented migrants, foreign workers and homeless people.
- Aid recipients benefitted from the assistance delivered by MRCS or its collaborating partners through MATCH including food packages, hygiene kits and cash and voucher assistance (CVA).
- MRCS volunteers were well protected from COVID-19 while delivering humanitarian services and no volunteer was infected by COVID-19 while on duty.
- MRCS was entrusted by the government to coordinate volunteers for the roll-out of the National COVID-19 Immunisation Programme.
- The Malaysian government recognized the auxiliary role of MRCS, but not all government agencies, partners and the public understand its roles and mandate.
- MRCS COVID-19 response was less engaged in addressing psychosocial needs despite clear needs of the population.
- MRCS needs to improve its needs assessment and community engagement and accountability practices including having beneficiary feedback mechanisms.

Effectiveness and efficiency

- Government agencies, collaborating partners and donors, and public at large regarded MRCS as a trustworthy and responsible humanitarian organization competent to offer swift relief and assistance.

- MRCS volunteers were regarded as an army of altruistic and dedicated team committed to serve the community when their services were needed.
- MRCS had been learning and improving its overall operation in responding to COVID-19.
- MRCS disaster management standard operating procedures as well as financial and admin policies need to be reviewed and updated.
- MRCS lacked capacity in planning and implementing integrated and multisectoral programme effectively due to organizational culture of working in silos.
- Programme development and management capacity
- Varied understanding and expectations on operational transparency and accountability, which were critical to build trust with stakeholders.
- No formal communication mechanism to ensure timely feedback information sharing involving donors and government entities.
- MRCS lacked an innovative, longer term and integrated volunteer development programme in meeting emerging emergencies such as the global pandemic.
- Challenges of recruiting and retaining staff to serve the cause of MRCS due to unclear human resources needs and staff development plan.

Connectedness and sustainability
- MRCS leadership and participation in the Malaysian Coordination and Action Hub (MATCH) reflected its commitment in delivering coordinated and sustainable humanitarian services with other partners.
- Not all within MRCS understood its role in MATCH and some members of MATCH were unclear with its objectives, structure and communication mechanisms.
- MRCS did not have a long-term strategy for resource mobilization, while partnerships with other organizations and government agencies were often on a case-by-case basis and not as part of a longer-term collaboration.
- Innovative ideas needed in planning and anticipating resource mobilisation challenges through pre-arranged initiatives involving private sector/donors.
- Uncoordinated communication between MRCS and external partners and between headquarters and state branches.
- Emerging opportunities to formalize long-term strategic partnerships with stakeholders building on the momentum of the COVID-19 response.
- Unclear expectations and understanding on fund allocation and project management between MRCS headquarters and state branches.

Recommendations

Recommendations from the mid-term review based on findings in the respective areas of focus are summarized below (not ranked in order):

Relevance and appropriateness
1. Sustain best practices and take pride in maintaining the tradition
   - Communicate auxiliary role and mandate to authorities, NGOs and public through innovative approaches.
   - Review and realign the Red Cross Society (Incorporation) Act 1965 or Act 540 and the current MRCS Constitution.

2. Complement government's plans in addressing COVID-19 impact

- Engage stakeholders and state branches to understand current response priorities and revise action plan as necessary.
- Include standard and ongoing needs assessment as an integral part of the planning process and to adapt to evolving needs.

3. Support the population most adversely affected
- Strengthen community engagement and accountability practices including establishing beneficiary feedback mechanisms.
- Strengthen communication system with partners and state branches for timely information sharing and feedback as means of strengthening delivery of quality humanitarian services and operational accountability.

Effectiveness and efficiency

4. Review and strengthen current SOPs
- Strengthen procedures useful in providing guidelines and clear direction on roles and responsibilities during emergency response including reviewing relevant strategies and procedures.
- Form a "SOPs joint task force" with the aim to strengthen emergency response/disaster management, finance and admin SOPs centred on building a culture of disaster preparedness.

5. Improve programme development and management capacity
- Enhance collaboration across departments and review organizational response structure for multidisciplinary programme.
- Develop internal programme planning and management capacity to managing programme systematically and measure progress in a coordinated manner.

6. Enhance organizational transparency and accountability
- Build a systematic platform with mutually agreed format for timely feedback and information sharing.
- Clarify expectations and sustain trust and operational transparency via deliberate joint activities with state branches.

7. Rejuvenate training and retention programme for staff and volunteers
- Expand Red Ready projects to other states and develop longer term volunteer development programme to engage and retain mature and trained volunteers.
- Review human resources needs and improve staff development and retainment strategies.

Connectedness and sustainability

8. Foster cross-sector collaboration in achieving common objectives
- Strengthen communication and coordination in MATCH to facilitate collaboration and avoid duplication of efforts.
- Foster greater engagement and collaboration with external organizations including government agencies and private sectors to strengthen mutual reciprocity and trust, with an emphasis to build long-term engagement strategy conducive to advance, expand and sustain partnership.
- Develop long-term strategy and explore innovative measures for resource mobilization.

9. Establish trust with partners for the long-term

- Engage with relevant partners and arrange pre-disaster partnership and agreements to facilitate resource mobilisation and develop SOPs or strategies on matters related to aid receiving, distributing and rejecting donated goods.
- Strengthen relationship management with MRCS partners and donors through regular meetings.

10. Strengthen coordination between MRCS and Movement members
- Strengthen coordination with members of the International Red Cross Red Crescent Movement by formalizing coordination agreement and arranging inter-agency coordination meeting at the operational level including state branches with scheduled virtual conversations.
- Decentralize management and resources allocation in line with localization strategies, and to create a regional system intertwined with dimensions of administration, governance, organizational autonomy, mutuality and norms.

1 Introduction

Malaysia announced its first COVID-19 case on 25 January 2020. The infection surged drastically between 27 February and 17 March 2020, but a more significant spike happened later in the last quarter of 2020 - from 15,096 on 5 October 2020 to 117,383 on 28 December 2020, an increase of 7.8 times within 3 months (WHO, 2021). Figure 1.1 illustrates the accumulated positive cases of COVID-19 and death toll between January 2020 and January 2021 in Malaysia.
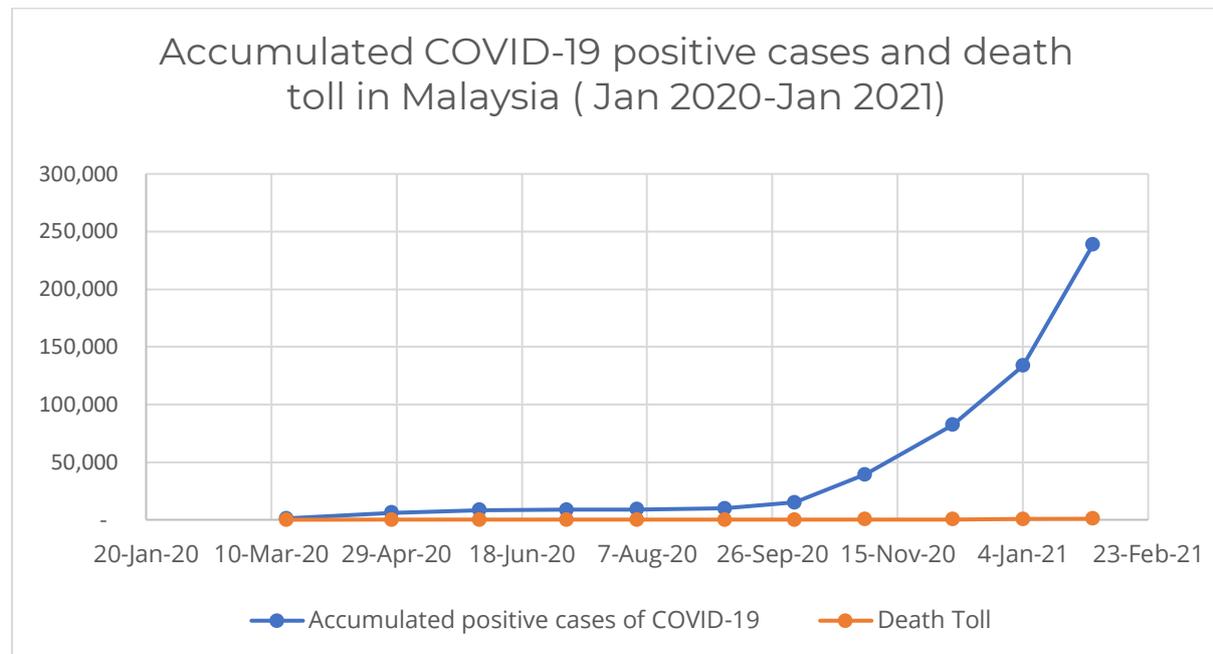
Source: World Health Organization

Figure 1-1: Accumulated COVID-19 cases and death toll (Jan 2020-Jan 2021)

Despite the increasing trend of COVID-19 cases in Malaysia since January 2020, the death toll in Malaysia was generally under control with a record of 10 deaths on 16 March 2020 to 857 deaths as of 1 February 2021 (WHO, 2021). To mitigate the spread of COVID-19, the Government of Malaysia announced the Movement Control Order (MCO) aimed at flattening the rate of infection. When the number of daily cases reduced, MCO restrictions were eased on 10 June 2020 under the Recovery Movement Control Order (RMCO).

MRCS began its COVID-19 operation on 31 January 2020 by coordinating activities and participating in meetings with the National Security Council, Ministry of Health and National Disaster Management Authority (NADMA). In response to the exponential growth of COVID-19, MRCS intensified its operation from October to December 2020 accordingly.

At the sub-national level, MRCS branches have been coordinating with state governments and other stakeholders. The MRCS's response has since focused on training of staff and volunteers; ambulance services; support to public health facilities (including with PPE); health and hygiene awareness; blood donation programme; disinfection works; provision of food assistance and hygiene supplies to the most vulnerable groups (households that earn the least income in Malaysia or B40 households, migrants and the homeless); risk communication and community engagement (RCCE) and accountability; cash and voucher assistance (CVA), and education support to B40

households. Details on progress made by MRCS in its COVID-19 response operation can be obtained at [Malaysia: COVID-19](#).

To support the MRCS response, the International Federation of Red Cross and Red Crescent Societies (IFRC) initially advanced CHF 16,000 from the Disaster Relief Emergency Fund (DREF). In February 2020, IFRC launched an Emergency Appeal in which needs for MRCS were included. In May 2020, the IFRC increased its total allocation for MRCS to CHF 994,000 of which CHF 512,000 was transferred to the National Society while procurement worth CHF 482,000 was done by IFRC on behalf of MRCS. In September 2020, the IFRC total allocation to MRCS was increased to CHF 1.5 million, of which procurement worth CHF 763,000 was done by IFRC on behalf of the National Society. The additional funds were transferred to MRCS upon revision of its COVID-19 Response Plan.

In addition to the IFRC Emergency Appeal, the MRCS COVID-19 operation has been supported by various partners through bilateral arrangements. The International Committee of the Red Cross (ICRC) has provided MRCS with assistance worth approximately MYR 320,000 (CHF 70,000) for the initial response, mobilization and safety of volunteers, and business continuity of headquarters and five branches. Furthermore, under a mobilization platform dubbed #responsMALAYSIA, MRCS has been able to raise cash and in-kind resources amounting to MYR 12 million (CHF 2.8 million). MRCS also received cash and in-kind assistance from government agencies, government-linked corporations and the private sector. Figure 1-2 shows the timeline of major activities conducted by MRCS from January 2020 to January 2021 in responding to COVID-19 nationwide, and funding and in-kind support received from various partners and public during the same period.

This mid-term review aimed to assess the progress and results of the overall MRCS COVID-19 response from January 2020 to January 2021 and identify areas for improvement to prepare MRCS for the next phase of the COVID-19 response. The **objectives** of the mid-term review were:
- To assess the advancement towards objectives of the MRCS COVID-19 National Society Response Plan (NSRP) at national and sub-national levels.
- To determine whether MRCS has ensured community engagement in designing and implementing its COVID-19 NSRP and whether assistance has reached those who deserve it most in an accountable manner.
- To determine how the MRCS operation management and quality assurance mechanisms, systems, procedures, business continuity and duty of care aspects contributed to or hindered advancement of the objectives of the NSRP.
- To determine how Movement and external coordination mechanisms contributed to or hindered advancing of the objectives of the MRCS COVID-19 NSRP.
- To identify areas of concern and strategies to mitigate those that may inform the next phase of COVID-19 operation and longer-term pandemic preparedness.
- To recommend (1) programming elements that need to be modified to maximize achievement of NSRP objectives, (2) how the response and implementation capacity of MRCS can be further strengthened, and (3) how coordination mechanisms and initiatives can be maintained, at national and sub-national levels.

Distributed PPEs (318,390 masks, 20,948 gowns, 22 ventilators, etc); volunteers made 99,787 face shields; Established #ResponsMalaysia to raise fund
(Jan - Mar 2020)

Advanced CHF 16,000 from DREF

ICRC provided in-kind assistance worth CHF 70,000
(July- Sep 2020)

Analysed the outcomes of the perception survey; MTR ToR was prepared
(Jan 2021)

MRCS raised cash MYR 12 million; received cash and in-kind support from govt, government-link corporations and private sector

Conducted first perception survey (2,012 respondents); Provided cash assistance to 2,987 families nationwide, and co-leading MATCH-Hub
(Apr-June 2020)

IFRC allocated CHF 994,000 (CHF 512,000 for MRCS, and CHF482,000 for procurement) in May 2020

Established MHPSS Committee at the national level; established MRCS Migration Working Group; Conducted second perception survey (5,921 respondents); Launched 'RedCrescent4u Careline' in December 2020; Procured three off-road (4WD) vehicles, two negative pressure ambulances
(Oct-Dec 2020)

Total allocation from IFRC to MRCS: CHF 1.5 mil (CHF 737,000 for MRCS, and CHF 763,000 for procurement) in Sep 2020

Figure 1-2: Timeline of major activities of MRCS COVID-19 national response (Jan 2020-Jan 2021)

2 Methods

This study employed an inductive approach using qualitative methods for primary data collection and analysis. Semi-structured interviews were conducted with 22 key informants across 9 organizations and 2 aid recipients. Secondary data including previous reports, documents and survey results provided by MRCS were also reviewed. The findings of the mid-term review resulted from combination and integration of both the primary and secondary data analysis.

The key informants consisted of strategic and operational decision-makers of different organizations with knowledge about MRCS COVID-19 response, as well as individuals who received assistance from MRCS. Specifically, the key informants were from five groups of organizations or backgrounds, namely i) government agencies, ii) the International Red Cross and Red Crescent Movement, iii) Malaysia-based NGOs and CSOs, iv) donors from the private sector and v) individuals such as aid recipients. The list of organizations and number of participants interviewed is included as Annex B.

The mid-term review questions were focused on areas of relevance, effectiveness and sustainability of MRCS COVID-19 response. The interview questions were further developed, translated (four participants preferred to be interviewed in Bahasa Malaysia) and contextualized by the review team. A sample of interview questions is included as Annex C. 27% (n=6) of the interviews were conducted face-to-face and 73% (n=16) were conducted by means of audio-visual conferencing. Out of the 22 interviewees, 40% (n=9) are female and 60% (n=13) are male. The interviews were mainly conducted in English with only three interviews conducted in Bahasa Malaysia.

The interview transcripts were analysed systematically as guided by qualitative research methods of coding, memoing, constant comparisons, and theoretical saturation (Charmaz, 2014; Saldaña, 2016). The Excel-based RapidCode[1] was used to organize and catalogue data collected. Two data coding phases, an initial coding followed by focused coding (Charmaz, 2008) were conducted. The first cycle coding began with initial or open coding. Throughout this coding, frequently used words, essential sentences or paragraphs of interview transcripts with similar patterns were identified and categorized as open codes. The analysis emphasized *In vivo* coding, which consisted of participants' original statements and *process* coding that used gerunds to show action in the data (Charmaz, 2006, 2008). Numerous initial codes were reduced to lesser number of focused codes. Continued detailed analysis of focused codes led to themes, which informed the findings, recommendations and conclusions of this mid-term review. Annex D shows the categorisation of open code, focused code and deliberation on areas of concern.

Desktop review of reports and documents related to the MRCS COVID-19 response included the following:
- MRCS COVID-19 Outbreak National Response Plan
- COVID-19: Community Insights from the Asia Pacific Region - Indonesia, Malaysia, Myanmar, and Pakistan (September 2020)

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[1] RapidCode is a system developed by evaluation consultant Jess Letch to organize and catalogue qualitative information collected from interview, observation, real-time evaluation or other field-based humanitarian evaluations. Available at this link.

- Perception Survey (December 2020)
- Operation updates
- [IFRC Asia Pacific COVID-19 Need Assessment Report](#)
- Preparedness for Effective Response Assessment Report
- Branch Organizational Capacity Assessment (BOCA) Report
- Organizational Capacity Assessment and Certification (OCAC) results

The mid-term review team worked closely with the Evaluation Management Team that provided direction and strategic advice. This mid-term review also adhered to the guidelines of the [IFRC Framework for Evaluation](#) as well as the seven Fundamental Principles of Red Cross and Red Crescent.

Limitations

There were more interview participants from the International Red Cross Red Crescent Movement (n=11) (hereinafter referred as the Movement) compared with those from government agencies (n=3) and aid recipients (n=2). This was partly due to the challenges of arranging external interviews especially with key strategic decision makers from various government agencies. It was the intention of the mid-term review team to include a wide range of stakeholders for interview during the data collection process, but some had declined because of tight working schedule, no longer in the same organization or no response at all. Should more inputs from key strategic decision makers of government agencies, other partner organizations and beneficiaries were included, the findings may be different. In addressing this limitation, the mid-term review filled the gaps using secondary information sources through desktop review.

3 Findings

The findings posited the achievements, potentials and strengths of the MRCS as evidenced in its operation, interactions, and collaboration with diverse partners during the COVID-19 national response. The findings also revealed gaps between the original objectives and actual implementation as well as areas of improvement in terms of programme development and management, potential barriers to effective and coordinated response. Lessons learnt from the COVID-19 response are also included in this section.

3.1 Achievements

The mid-term review revealed the achievements of MRCS during its COVID-19 response between January 2020 and January 2021. MRCS has acted fast in responding to the pandemic despite many challenges. During the first phase of response between January and August 2020, MRCS faced challenges in funding, finding the right people, limitations of SOPs, among others. With the close support from members of the Movement, donors, authorities and volunteers, learning from lessons, MRCS's operation between September 2020 and January 2021 had demonstrated a steady improvement. The main achievements are summarized below:

- MRCS COVID-19 response complemented government's efforts and reached the target population including, but not limited to, B40 households, undocumented migrants, foreign workers and homeless people.
- Aid recipients benefitted from the assistance delivered by MRCS or its collaborating partners through MATCH including food packages, hygiene kits and CVA.
- MRCS volunteers were well protected from COVID-19 while delivering humanitarian services and no volunteer was infected by COVID-19 while on duty.
- MRCS was entrusted by the government to coordinate volunteers for the roll-out of the National COVID-19 Immunisation Programme.
- Government agencies, collaborating partners and donors, and the public at large regarded MRCS as a trustworthy and responsible humanitarian organization competent to offer swift relief and assistance.
- MRCS volunteers were regarded as an army of altruistic and dedicated team committed to serve the community as and when their services were needed.
- MRCS has been learning and adapting to improve its overall operation in responding to COVID-19.

3.2 Relevance and appropriateness

COVID-19 response planning and activities

The MRCS COVID-19 Outbreak National Response Plan elucidated four priorities of the action plan. First, health and WASH; second, addressing socioeconomic impact; third, institutional strengthening; and fourth, quality assurance, coordination and accountability. On the first operational priority, emphasis was on giving aid to a) migrant workers, b) medical and hospital frontliners, c) densely populated urban areas and d) addressing the underlying issues related to mental health and anxiety facing the populations. However, support and resources had been channeled more towards the first three concerns with lesser resources focused on providing psychosocial support services to frontline workers and the affected population.

In 2020, two perception surveys were conducted by MRCS in partnership with the World Health Organization (WHO) with the support of IFRC. Based on analysis of the Perception Survey results

(September and December 2020), the mid-term review confirmed that the following findings from the survey informed the MRCS COVID-19 response:

- Finding 1: 94% respondents think that COVID-19 is very dangerous.
- Finding 2: 43% people said they did not seek any essential health care services during COVID-19 pandemic…20% mentioned that they were afraid of being infected by COVID-19 while seeking such services from health facilities.
- Finding 3: The vast majority of respondents believe in …practicing …the Ministry of Health (MoH) recommended protective measures (92% hand washing, 82% using hand sanitiser, 82% wearing a mask, 77% covering mouth…).
- Finding 4: A high percentage of respondents frequently use social media (79%), television (68%), websites/online news (57%) to get information.
- Finding 5: It is concerning that almost half of the participants (47%) continue to think that a specific group of people are causing the spread of COVID-19 in their community.
- Finding 6: 44% people are not sure whether they will get the vaccine as they have various concerns and questions about the vaccine, including potential side effects of the vaccine, overall safety and its effectiveness, cost and concerns regarding religious appropriateness.

The Perception Survey also unpacked an important finding on mental wellbeing issues facing the respondents: "A slightly higher percentage of female respondents (40%) reported feeling sad, anxious or worried in comparison to male respondents (35%)". The finding was consistent with a survey conducted by UNICEF on concerns and wellbeing of adolescents during the MCO which suggested that more than half of the respondents felt tired, bored and agitated. However, MRCS COVID-19 response focused on distribution of food packages, hygiene kits and CVA, and was less engaged in addressing psychosocial needs. In part, this was because MRCS has more available resources, expertise and information of the abovementioned activities, but lack expertise or volunteers specially trained in providing psychosocial or counselling services. This is an area that requires the attention of MRCS when advancing the response plan to the next phase.

MRCS, through its national headquarters and state branches, had largely assisted population who were most adversely affected by COVID-19. The beneficiaries included, but were not limited to, B40 families, people who were homeless, people evacuated from floods, frontliners, villagers, undocumented migrants and foreign workers. Aid recipients interviewed reflected that they were appreciative of the one-off assistance and suggested future aid to go beyond provision of food items. These included provision of learning tools such as computers or phones for school children, skills training for income generation to improve the livelihoods of rural villagers and sharing of information on implementation of the National COVID-19 Immunisation Programme.

The mid-term review found that MRCS lacked a culture of preparedness for disasters as well as procedures for early warning and developing an action plan when disaster strikes. This included designation of clear roles and responsibilities for response operations and subsequent scenario planning. Therefore, MRCS faced limitations in convening the right people in setting the direction, deliberating ideas, strategizing and designing the plan of action. These issues were amplified especially during the COVID-19 response due to the unprecedented nature of the pandemic and its uncertainties. Due to the lack of planning, MRCS also faced challenges in distributing in-kind donations as the additional costs for volunteer mobilization were not factored in.

The findings also revealed that a needs assessment was necessary and should have been conducted during the process of developing the response plan. This was especially crucial to allow identification of needs and priorities for intervention. More detailed assessment would also allow aid to be given to affected populations based on needs in accordance with conditions set forth by geographical, demographical and age groups. There was a lack of awareness on the need to conduct an assessment and shortage of staff with the technical competencies. Movement restrictions and the rapidly evolving situation during the initial response to COVID-19 also made it difficult to conduct a needs assessment. Inclusion of a standard and ongoing assessment process would allow MRCS to better adapt to evolving needs.

MRCS as auxiliary to the government

Based on the MRCS COVID-19 Outbreak National Response Plan, MRCS was also expected to perform the following:

a) to support the Ministry of Women, Family and Community Development in providing food to relief centres, distributing relief items (such as clothing and blankets), registration of affected people and providing recovery support

b) to support other mandated agencies in rescue and evacuation efforts

c) to support the Ministry of Health in providing first aid, ambulance, medical and health services in relief centres

d) to play an active role beyond the International Red Cross Red Crescent Movement such as with the UN-led Malaysia Humanitarian Country Team, UNHCR and UNDP.

The triangulation of secondary and interview data unpacked that MRCS had worked closely with government agencies during the COVID-19 response in providing ambulance and support services, distributing aid, mobilizing resources and coordinating volunteers. Nevertheless, MRCS had not established close working relationship with the Ministry of Women, Family and Community Development compared with other government agencies such as National Disaster Management Agency (NADMA), local governments, hospitals and National Security Council. Moreover, MRCS did not play an active role in the Humanitarian Country Team nor collaborate with UN agencies such as UNDP. However, since April 2020, MRCS helped to establish and co-led a coordination platform, the Malaysia COVID-19 Coordination and Action Hub (MATCH), which brought together local civil society organizations, donors and relevant government agencies to facilitate collaboration and streamline humanitarian aid for the COVID-19 response.

MRCS is recognized as auxiliary to the government under the 1965 Malaysian Red Crescent Society Act. However, MRCS's auxiliary role to the government has not been fully understood by public authorities, partners or the general public, sometimes considering them as an NGO. Based on interview findings, MRCS being an auxiliary to the government led to participating in high-level meetings with government agencies such as NADMA and National Security Council. But not all government agencies and ministries have the necessary awareness and understanding of the mandate. These gaps in understanding were also documented in the MRCS Preparedness for Effective Response Assessment report completed in August 2019. NGOs in MATCH and donors also expected to receive regular sharing of official information, directives, access to additional resources from the government and beneficiary's database through MRCS, but these expectations were not fully met. On the other hand, MRCS was entrusted by the government to manage and coordinate volunteers for the COVID-19 immunisation programme nationwide, which strengthened its auxiliary role.

3.3 Effectiveness and efficiency

Emergency response procedures

MRCS has a Disaster Management Standard Operating Procedures (SOPs), but it was out-of-date (2014), and the existing financial and admin procedures were found to be inefficient for emergency response. The mid-term review found limitations of the SOPs similar to what were documented in the Preparedness for Effective Response Assessment Report: *"Different departments have their own emergency procedures, however it was noted these have been developed independently and remain siloed and not aligned"*. As the COVID-19 pandemic required a multidisciplinary response across departments, the gaps in the emergency response structure of MRCS that worked in silos were apparent in the lack of clear direction for the initial response.

The existing Disaster Management SOPs were found to be inadequate during the COVID-19 response. The SOPs were disseminated, but not well understood by all. Gaps were identified on the flexibility, practicality and comprehensiveness of current SOPs in responding to pandemic in a rapidly changing working environment while maintaining coherent coordination and liaison with different stakeholders. These included internal coordination within the International Red Cross Red Crescent Movement and between MRCS headquarters and state branches as well as external coordination between MRCS and donors. The current SOPs may have hindered the coordinated and integrated response involving partners within and beyond the Movement. For instance, Movement Control Order nationwide imposed from March to May 2020 made face-to-face meeting impossible among MRCS executives, but decisions made in a virtual meeting were not warranted until escalated to the Executive Council for endorsement later.

The current financial and admin procedures were also inadequate when responding to the COVID-19 pandemic that limited the movement of volunteers. For example, there were some delays due to authorization limits for approvals, but efforts were made to rectify these issues. On financial and admin procedures related to logistics and procurement, there were no MOUs or agreements with vendors/suppliers to facilitate procurement in emergencies. Moreover, the requirement of three quotations for any procurement more than RM3,000 were not practical during the pandemic, and there were no clear guidelines to reallocate funds from existing programme to support more pressing activities.

Quality assurance and accountability

Findings from the mid-term review revealed that MRCS was regarded as a trustworthy humanitarian organization, but there were areas for improvement in its quality assurance and accountability framework. Information sharing and reporting for partners including donors and government agencies for MRCS COVID-19 response were found to be irregular and not meeting expectations in some instances. There was also no feedback mechanism for aid recipients to provide information on their experience. MRCS staff interviewed believed they followed existing standards on operational accountability, but the understanding was different between headquarters and state branches, and among Movement members and other partners.

It was found that MRCS has no formal communication mechanism to ensure timely and necessary information sharing involving donors and government entities. MRCS had a close informal working relationship with government operational entities such as the Welfare Department, City Council or specific hospitals, but not at the strategic leadership levels crucial for decision making in emergencies. Donors also expressed their expectations for 'real-time' or frequent sharing of

information, especially on aid distribution including through social media to facilitate sharing the actions with the public or updating their superiors.

MRCS did not have a formal planning, monitoring, evaluation and reporting (PMER) system in place within the organization. There was standardized framework or plan of action for emergency operations, but operational results/objectives and indicators were often not identified or monitored. There was also no proper system to ensure previous lessons learnt were reviewed and integrated in future actions. The Finance Department was often referred to when it came to reconciliation of reports, and not the owner of the project/programme. This was partly because MRCS lacked dedicated personnel for programme management such as a project manager or coordinator for specific programme. In addition, state branches lacked standard reporting templates or forms (e.g., expenditure reports, progress reports) for quick reference, resulted in some branches being unable to finalize project closing report, including expenditure report on time.

Volunteer mobilization and staff development

MRCS volunteers were well protected from COVID-19 while delivering humanitarian services and no volunteer was infected by COVID-19 while on duty. However, the mid-term review identified gaps of MRCS in developing an integrated volunteer development programme to recruit volunteers and retain talents within the organization. For instance, the current volunteer recruitment programme was inclined towards youth over mature and experienced volunteers who may not have time to undergo the standard training programme pursuant to the training handbook. Training programme was also often for specific short-term project instead of as a sustainable longer-term programme. In addition, innovative approaches including virtual recruitment and training were needed due to movement restrictions during the pandemic.

MRCS volunteers were regarded as *professional, act fast[2]* and altruistic. The volunteers delivered food packages to remote community, sewing PPEs for frontliners, and comforting the wary souls at urban homeless shelters. However, there was a pressing need to revitalize the volunteer development programme in the areas mentioned above. MRCS relied on volunteers in delivering quality and coordinated humanitarian services, and the presence of volunteers nationwide was an important reason other NGOs and donors prefer to collaborate with MRCS. Thus, the overall organizational capacity and reputation of MRCS as the humanitarian partner of choice in Malaysia could be strengthened should an appropriate volunteer development programme was in place and equipped to address this challenge.

On the other hand, unattractive remuneration package and unclear future needs for human resources made it difficult to retain talents and staff at the MRCS headquarters for a longer period. For instance, human resource policy focused on recruiting, but it was not clear what specific skillsets were needed to meet the organizational needs. Staff also often received directives from multiple stakeholders within MRCS, which complicated the decision-making process. Furthermore, the Preparedness for Effective Response Assessment report also disclosed other limitations such as "no psychosocial support available for staff and volunteers after emergencies" and "no trainings on self-care, violence and harassment in the workplace".

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[2] Words or sentences in italic are participant's quote.

3.4 Connectedness and sustainability

Resource mobilization

The mid-term review found that MRCS had a resource mobilization policy but there was no specific strategy. According to the Preparedness for Effective Response Assessment report, MRCS was working on building partnerships with donors in the private sector for a coordinated response capacity, but no agreement or mechanism was in place. MRCS did not have pre-disaster agreements with the private sector/donors. These pre-disaster agreements would be useful to prepare MRCS on planning how many volunteers were needed to be mobilized or trained before disaster strikes, or what type of vehicles could the collaborative partners provide for relief distribution. In-kind donations from the private sector/donors were accepted based on needs subject to approval by MRCS's Secretary-General. There were no formal procedures for accepting or rejecting donated goods. Through the #responsMalaysia initiative, MRCS raised cash and in-kind donations amounting to 12 million MYR (2.8 million CHF) from the Malaysian public and corporates.

Cross-sector collaboration with external partners

The mid-term review found that external partners including donors and government agencies had trust in MRCS as the humanitarian partner of choice in general. There was reasonably good coordination with several government agencies such as NADMA, National Security Council, Welfare Department and other local government authorities. Both strategic and operational personnel from MRCS regarded building and sustaining good relationships with government agencies as an important priority. Coordination with other government agencies such as the Ministry of Women, Family and Social Development, Ministry of Health, Ministry of Finance, Ministry of Education, rescue agencies were limited and often in a passive manner. Dure to less frequent coordination and interaction, these agencies may not have the awareness and understanding of the role of MRCS as the auxiliary organization to the government.

On communication, external partners informed that sometimes MRCS headquarters and a state branch may approach them separately for a common cause. MRCS recognized the need to have more detailed procedures and criteria to partner with another organization. Partnerships with other NGOs or CSOs were often on a case-by-case basis and not as part of a longer-term collaborative arrangement. MRCS lacked necessary drive or motivation to develop collaboration with external agencies such as UN agencies, NGOs or CSOs during peacetime due to the mindset that '*Malaysia is not a disaster-prone country*'. Establishing ongoing collaboration as an organizational core practice would be crucial for future collaboration in emergencies. MRCS had limited coordination with UN agencies during the COVID-19 response.

On the other hand, voluntary participation and leadership of MRCS in the Malaysian Coordination and Action Hub (MATCH) reflected MRCS's commitment in delivering coordinated and sustainable humanitarian services. MATCH was the first national-level collaboration hub aimed at streamlining humanitarian aid delivery, which was formalized in April 2020. Key informants welcomed MRCS's leadership and administration support to MATCH. However, not everyone within MRCS have knowledge about MRCS's role nor the existence of MATCH, and some NGO members of MATCH were unclear with its objective, structure and communication mechanism. MRCS headquarters had yet to establish a clear and systematic communication channel with key government agencies such as NADMA and National Security Council, resulting in members of MATCH resorted to its own channel to obtain the necessary beneficiary list sometimes.

Internal coordination within Red Cross Red Crescent Movement

Internal coordination between MRCS headquarters and branches as well as MRCS and members of the Movement were perceived to be incoherent and not structured. Key informant interviews revealed that MRCS headquarters and state branches as well as MRCS and Movement members had different perception of trust with one another. For instance, MRCS believed that some state branches made assistance request not for immediate use but for future reserves, whereas state branches perceived headquarters compliance to certain guidelines as bureaucratic. On the other hand, efforts were made by MRCS headquarters to enhance Movement coordination including monthly coordination meeting and a draft of Movement Coordination Agreement circulated in late 2020. However, this agreement has yet to be finalized and formalized. At the operational level, there were also gaps in shared understanding across all levels of the organization on programme implementation. For instance, some Movement partners found it challenging to follow up on reports or updates from MRCS. It was expressed that no focal point was assigned at the headquarters for follow-up, making it challenging to monitor the progress of a programme or when a project completion report could be submitted.

Furthermore, MRCS headquarters suggested that operational transparency of some state branches could be strengthened. For instance, the headquarters perceived that some state branches have adequate resources and should not make further pledge of assistance, whereas state branches believed that headquarters did not have a clear picture of local logistical challenges and should continue in disseminating more resources to the state branches. Limited trust of MRCS headquarters towards some state branches could be due to unfavourable past experiences, ineffective communication and lack of understanding of state operational and administrative challenges.

3.5 Lessons Learnt

In summary, the mid-term review findings elucidated the following lessons learnt:
   a) The importance of building a culture of preparedness, strengthened accountability and transparency for future emergencies and enhanced mandate as auxiliary to the government.
   b) The approaches to address programming and operational challenges innovatively with an emphasis on reviewing current SOPs, programme planning and management capacity, strengthening leadership and building trustworthy relationships with partners within and outside the International Red Cross Red Crescent Movement.
   c) The determination of undertaking continual improvement by addressing challenges and enhancing coordination and communication between members of the International Red Cross Red Crescent Movement and with external partners.

As a learning organization, it is necessary for MRCS to be an organization with proactive attitude and desire to bring innovativeness and improvement in implementing the COVID-19 response and building a culture of preparedness in responding to future emergencies. The mid-term review uncovered lessons learnt useful for the MRCS in advancing the COVID-19 response to the next phase. The findings suggest that MRCS need to take further measures in building a long-term cross-sector collaboration with wider stakeholders, strengthening coordination among diverse partners of International Red Cross Red Crescent Movement, and between MRCS headquarters and state branches. By doing so, the trust and accountability of MRCS will be enhanced in the eyes of the public and with partners within the Movement.

4 Recommendations

This mid-term review aimed to provide specific, measurable, achievable and realistic recommendations for advancing the COVID-19 response plan to another phase. MRCS has strengthened its operational competency and efficiency over time since it started operation in January 2020 in responding to COVID-19. The mid-term review unpacked that MRCS, partners within the International Red Cross Red Crescent Movement, NGOs and government agencies were learning to *expect the unexpected* because COVID-19 was a catastrophic global event beyond their experience or imagination. Participants even cited *COVID-19 as a blessing in disguise* because they believed the pandemic had taught them to think out of the box, assess organizational capacity, review operational and community engagement strategies, and avoid working in silo.

Along the learning journey of the past one year, MRCS connected, collaborated, and built network with external partners such as those from government agencies, CSOs, donors and aid recipients of diverse backgrounds. Nonetheless, such 'working together' was built on the desire to resolve a particular event, often on *ad hoc* or case-by-case basis, such as jointly delivering relief items to a particular remote community. Both *ad hoc* and longer-term collaboration (such as in the form of MATCH) happened during the COVID-19 response, however, only on-going collaboration can form as an established organizational core practice (Brooks, 2002; Johnson, Goerdel, Lovrich, & Pierce, 2015).

Juxtaposition and analysis of the interview and secondary data led to the discovery of the recommendations. Ten recommendations are presented in the context of relevance and appropriateness, effectiveness and efficiency and sustainability and connectedness. These recommendations are not exclusive and only the most important and instrumental are stipulated. The details of recommendations are as follows:

Relevance and appropriateness

4.1 Sustain best practices and take pride in maintaining the tradition

MRCS has many best practices and traditions that might have been forgotten or taken for granted and likely go unnoticed by new partners. The best practices of MRCS include an army of altruistic, dedicated and well-trained volunteers who stand ready to serve the community, special status as the only auxiliary organisation to the government, high level of trust in the eyes of the general public, government agencies and donors, presence of offices at every state in Malaysia and uninterrupted ambulance service for the nation for 52 years (since 1969). These strengths with its inherent and adaptive capacities at different levels are to be sustained. In addition, the practice of engaging eminent and statured people as National Chairman, patron and president is exemplary and can be further capitalized.

As short- and mid-term measures, MRCS may organize roadshows or campaigns nationwide to re-introduce and communicate its roles as auxiliary to the Malaysian government in the humanitarian field as well as its achievements in emergency responses and services to vulnerable populations. Furthermore, MRCS may celebrate its history, best practices and traditions through publication or online activities, and engage donors and external partners in cultivating a culture of volunteering among students from secondary schools and higher institutions as well as staff from private sector corporations.

As a long-term measure, MRCS may study the contents of the Malaysian Red Cross Society (Incorporation) Act 1965 or Act 540[3] if they are in line with the MRCS Constitution. For instance, MRCS Constitution Part II (General Provisions) item no. 8 stated that the "Prime Minister of Malaysia and the Deputy Prime Minister of Malaysia shall be the Honorary President and the Deputy Honorary President of the Society respectively"[4]. However, the Act 540 has no such provision yet. This is a gap that needs to be closed in the long term. Alignment between Act 540 and the MRCS Constitution is important to boost morale, enhance empowerment and good will among the management, staff and volunteers of MRCS.

This mid-term review also revealed that MRCS has learnt fast, built momentum, engaged and reached out to existing and new partners previously not collaborated through the COVID-19 response. Continuing efforts to address challenges faced throughout the COVID-19 response and sustaining lessons learnt are prerequisites of MRCS becoming a learning organization with proactive attitude and desire to bring innovativeness and improvement. This will also lead to long-term measure of building a culture of preparedness in responding to future large-scale emergencies.

4.2   Complement government's plans in addressing COVID-19 impact

MRCS has played its role as auxiliary to the government and complemented government's efforts between January 2020 and January 2021 in addressing the multi-faceted challenges resulted by the COVID-19 pandemic. To some extent, MRCS has become the humanitarian partner of choice in COVID-19 response nationwide, and it shall continue its service augmenting government's efforts in curbing the pandemic, sustaining health and WASH, addressing socioeconomic impact and strengthening National Society's capacity.

During the initial phase of COVID-19 response from January to June 2020, MRCS shared similar challenges as other government agencies and NGOs in developing appropriate and inclusive approaches to respond to COVID-19 yet not putting volunteers at risk of being infected by the virus. These external uncertainties, uncoordinated planning mechanism in responding to the global pandemic and constraints imposed by movement restrictions have limited MRCS's overall capacity in responding to COVID-19.

After more than one year of COVID-19 response, MRCS should engage with each state branch to understand the possible changes in types of assistance and response priorities. The COVID-19 response plan should be revised if significant changes were to be expected. Continued assessment in cooperation with ministries, state and local authorities and community leaders will also be important to understand the actual needs on the ground to avoid duplication of efforts. For future response, needs assessment should be included as an integral part of programme design. Interventions should be community-centred and need-driven with an emphasis on prioritising the actual needs on the ground over quick mobilization and availability of relief items.

4.3   Support the population most adversely affected

MRCS COVID-19 response had largely assisted population who were most adversely affected by COVID-19. The beneficiaries included, but were not limited to, B40 families, people who were

[3] http://www.commonlii.org/my/legis/consol_act/mrcsa19651995528
[4] https://www.rcrc-resilience-southeastasia.org/wp-content/uploads/2017/12/MRCS-Constitution-2016.pdf

homeless, people evacuated from floods, frontliners, villagers, undocumented migrants and foreign workers through collaboration between MRCS headquarters and state branches. These beneficiaries were grateful of receiving food packages, first aid services, hygiene kits and relief items from MRCS's volunteers or its collaborating partners. However, MRCS assistance and services could be further strengthened through stronger community engagement and accountability practices including establishing beneficiary feedback mechanisms.

Aid recipients reflected that while they were appreciative of the one-off assistance, they suggested future aid may include in-kind assistance of learning tools such as computers/phones for school children, skills training for income generation to improve the livelihoods of rural villagers and sharing of information on implementation of the National COVID-19 Immunisation Programme. MRCS should continue to serve and support vulnerable populations most adversely affected by COVID-19 in the next phase of the COVID-19 response and demonstrate its added values in complementing government's efforts. The management of MRCS should also acknowledge that there might not be one standard relief programme for every state and district as the contexts are different. Therefore, timely information sharing and feedback from partners and state branches could strengthen MRCS delivery of quality humanitarian services and operational accountability.

Effectiveness and efficiency

4.4 Review and strengthen current SOPs

As detailed in the findings section, gaps were identified on the flexibility, practicality and comprehensiveness of current SOPs in responding to pandemic in a rapidly changing working environment while maintaining coherent coordination. Revision of the SOPs shall be based on the desire to build a culture of disaster preparedness and acknowledge that *Malaysia is prone to disasters just like any other countries.* MRCS may focus on strengthening procedures useful in providing clear direction on roles and responsibilities during the initial response phase, approaches in preparing situation report when disaster strikes, what information to be shared and how to engage with relevant government agencies, guidelines and authority to procure emergency relief items and procedures for fund re-allocation.

In the mid-term, MRCS SOPs can be strengthened by establishing a "SOPs joint taskforce", consisting of representatives from MRCS headquarters and state branches, IFRC, ICRC and independent consultant, to review the current SOPs and propose areas for improvement useful in responding to future emergencies and procurement during emergency situations with an emphasis of effective communication and coordination. These SOPs include, but are not limited to, emergency response/disaster management as well as finance and admin procedures. For long-term measure, there is a need for MRCS to review the current constitution to make it disaster-ready in the future, e.g., warrant the virtual meeting setting and emergency decision-making mechanism.

Furthermore, to ensure that it continues to complement government efforts and is disaster-ready, MRCS can further strengthen its internal organizational capacity by assessing and reviewing its strategies on stakeholder engagement, volunteer mobilization, staff development, organizational and operational management, programme development and community engagement. In addition, some levels of flexibility should be encouraged in terms of organizational structure, programme administration and logistical arrangement. Procedures should also be explored to

allow specific fund allocation to be re-programmed for more pressing activity as the situation evolves.

4.5 Improve programme development and management capacity

The initial phase of the COVID-19 national response between January and June 2020 showed that MRCS faced limitations in convening the right people in setting the direction, communicating ideas succinctly, designing and deliberating the plan of action or understanding the modus operandi of the response plan. The coordination and planning for response can be strengthened should there be better coordination across departments to convene a multi-disciplinary team with practical knowledge, experience and skills in programme development and management. MRCS should review its organizational response structure for multisectoral programme and avoid working in silos.

As short- and mid-term measures, MRCS may identify suitable staff with programme development and management capacity or hire experienced staff with the expertise and engage external resources to provide training on PMER and effective communication to existing staff members, as well as develop programme monitoring framework and tools. MRCS needs to develop a practical system and set guidelines in convening decision makers, initiating and designing action plan, monitoring implementation and documenting lessons learnt. Another mid-term measure is to identify project coordinator for specific project/programme to monitor and provide monthly status update on implementation and liaise with partners within International Red Cross Red Crescent Movement and beyond.

4.6 Enhance organizational transparency and accountability

Expectations on transparency and accountability towards implementation of MRCS COVID-19 national response varied between partners, Movement members and the general public. Clarifying expectations and setting high internal standards for transparency in administering funding, distributing aid and communicating with stakeholders will enhance MRCS programme quality and accountability towards donors, other peer organizations, internal management and Movement members as well as beneficiaries.

In the long-term, MRCS may develop a systematic approach (e.g., MRCS website or a new mobile App) where plan of action and distribution of aid are made available to the public regularly, so that donors and communities are kept informed in a timely manner. It is worth noting that being proactive in submitting milestone or progress report of plan implementation to partners and donors in accordance with the mutually agreed format and timeline is of utmost importance to build trust and accountability. This recommendation relates to the previous recommendation on the importance of programme development and management capacity where the availability of a project coordinator is essential for PMER purposes will contribute to enhancing transparency and accountability with partners.

Furthermore, the mid-term review finding on limited trust of MRCS headquarters towards some state branches was likely driven by unfavourable historical baggage, ineffective or lack of communication and understanding on respective operational and administrative challenges. Sustaining trust and accountability is time consuming and building them prior to a disaster by means of organizing joint activity or programme could prove more effective. To address this challenge, MRCS shall transparently communicate and establish agreement on funding allocation

to state branches including any terms and conditions, reporting frequency, types of information to share, platform to publish information and reporting mechanism.

4.7 Rejuvenate training and retention programme for staff and volunteers

MRCS staff and volunteers were protected from the risks of exposure to COVID-19 throughout the operation and were well received by the public as a professional and dedicated team who can provide care, assistance and perform swift action. The mid-term review identified gaps of MRCS in developing an integrated volunteer development programme to recruit as well as retain talents. For instance, the current volunteer recruitment programme was inclined towards youth and not to include mature and experienced volunteers who may not have time to undergo the standard training programme pursuant to the training handbook.

The short- to mid-term measures are to continue and expand Red Ready projects to other states and even at district levels with an emphasis to boost disaster preparedness and response, and develop planning capacity for those responsible for volunteer recruitment and training programme, design attractive reward system and provide due recognition for volunteers. Volunteer development programme may expand beyond youths and include employees from donor company, providing them with the necessary training not limited by the training handbook as well as opportunities in view of current needs including volunteering virtually. For long-term measure, MRCS may formulate a longer-term capacity building programme with aims to recruit, engage and retain mature and trained volunteers.

On staff development and retainment, unattractive remuneration package or unclear career prospects made it difficult to retain staff at the MRCS headquarters for a longer period. This could be addressed through a comprehensive review of human resources needs and renumeration packages within MRCS, as well as staff development plan and working arrangement to recruit and retain talents, particularly experienced staff engaged through the COVID-19 response.

Sustainability and connectedness

4.8 Foster cross-sector collaboration in achieving common objectives

The COVID-19 pandemic resulted in multi-faceted socio-economic challenges impacting all levels of populations. No single organisation, government agency or entity was competent or had sufficient resources or knowledge to respond alone. Thus, responding to the pandemic effectively required joint effort, partnership or collaboration of multiple organisations, agencies, groups, networks and communities. During the COVID-19 response, MRCS fostered cross-sector collaboration through co-leading MATCH. Nevertheless, the relationship is built without necessarily having a long-term engagement strategy on how the partnership can be advanced, expanded and sustained.

Collaboration is perceived as important for mutual benefit, problem solving, reciprocity and concerted action (Kamensky, Burlin, & Abramson, 2004; O'Leary & Vij, 2012) and capable of addressing complex public problems (O'Leary & Vij, 2012). Collaboration is also regarded as having the ability to strengthen efficiency in addressing shared problems, to access more resources, to diffuse risk, and can provide opportunities for organisational learning and increase institutional legitimacy (Foster & Meinhard, 2002; Gazley & Brudney, 2007; Gray, 1989; Provan, Kenis, & Human,

2015; Provan & Milward, 1995) and perceived as useful to promote innovation (Hartley & Rashman, 2018; Koppenjan & Klijn, 2004). In the non-profit, non-government sector or among civil society organisations, collaborating with other partners is perceived as being able to improve service delivery and build a stronger relationship with grassroots community (Snavely & Tracy, 2000). Therefore, MRCS may strategize its long-term roles and functions as well as future directions in co-leading MATCH as a hub for cross-sector collaboration. MRCS may also share information obtained from official channels, updating and maintaining project database for the benefits of members of MATCH.

On the other hand, collaboration with multiple government agencies was instrumental to MRCS's response plan, but not all agencies have the same level of understanding, appreciation or knowledge of MRCS's role as the auxiliary organisation to the government. Therefore, it is crucial for MRCS to re-introduce or re-affirm its position as the auxiliary organisation to the government and make clear its role in the perception of key government agencies such as NADMA, National Security Council and Ministry of Women, Family and Community Development. Among the short-term approaches are regular communication between decision makers, not only during emergencies, but begin with normal routine. In addition, as mentioned in 4.1, MRCS may consider organizing roadshows to showcase history and contributions of MRCS thus far and reaching out to existing and emerging partners for possible short-term or long-term partnership. These measures are also useful to enhance mutual reciprocity and trust between MRCS and other collaborating NGOs and partners in the private sector.

Moreover, MRCS should also develop long-term strategy for resource mobilization. Innovative measures for raising funds including utilizing the expertise of mature volunteers can be further explored. For instance, MRCS may team up with a celebrity or social media influencer who can play a role as Charity Ambassador in fundraising activity, or an experienced multimedia expert who may help to create interactive social media platforms and reach out to new and potential donors. Other sources of funding to sustain MRCS activities may also include government funding and training for partners' employees.

4.9 Establish trust with partners for the long-term

Establishing trust among different partners including members of the International Red Cross Red Crescent Movement, and between MRCS headquarters and state branches for the long-term are imperative in advancing and transitioning the MRCS COVID-19 response in the next phase. This includes engaging with trusted partners to arrange pre-disaster partnership and agreements and facilitate resource mobilization in the long-term as well as developing strategies on matters related to aid receiving, distributing and rejecting donated goods.

As short-term measure, MRCS can deliberately promote scheduled virtual meetings between MRCS headquarters and state branches (e.g., fortnightly video-conferencing conversation) and IFRC and ICRC may be invited as and when necessary. Joint activities and regular visits could also enhance trust and understanding between MRCS headquarters and branches. For instance, state branch to extend an invitation to MRCS headquarters to participate in relief items delivery at a remote community and MRCS headquarters may invite state branch to take part in national fundraising campaign. In addition, MRCS may establish regular virtual meetings between MRCS headquarters and key government agencies such as NADMA, National Security Council and Ministry of Health.

For long-term measure, MRCS may prioritize and foster relationship management between MRCS headquarters and state branches, as well as with partners and donors. For instance, at both MRCS headquarters and state branches level, have designated staff or personnel focusing on coordination and sharing of information on timely basis. These practices are conducive to establish trust and good working relationships among key disaster management agencies' decision makers who may play a leading role in future response.

4.10 Strengthen coordination between MRCS and Movement members

MRCS has unique, collaborative and symbiotic relationship with members of the International Red Cross Red Crescent Movement. Building on the momentum created by the COVID-19 response, MRCS can proceed to formalize coordination and communication arrangements between Movement partners by finalizing and signing the Movement Coordination Agreement. In addition, regular inter-agency coordination meeting at operational level including state branches with scheduled virtual conversations not only for sharing information of current project/programme implementation, but also for fostering mutual trust and relationships building could be beneficial. Another mid-term measure is to encourage inter-exchange of staff between MRCS headquarters, branches and other members of the International Red Cross Red Crescent Movement for a specific period.

Continued efforts in strengthening engagement with members of the Movement and branches are crucial. For long-term measure, MRCS may consider decentralizing management and resource allocation to different regions in line with localization strategies. For instance, three East Coast Region states that implement similar project concurrently may access respective progress status through a common web-based solution. MRCS may also create a regional system intertwined with dimensions of administration, governance, organisational autonomy, mutuality and norms, which requires coherent coordination before the next phase of project can be implemented or new funding to be released. For instance, MRCS as the convener of a specific programme, to agree on the terms that if one of the states in the region is unable to implement and report a programme within timeline, new funding for similar programme to another two states will be on hold till issues were resolves. These are some of the collective measures that could be useful in building mutual accountability and partnership in the sub-region.

5 Conclusion

This final section discusses the novel contribution of the Mid-term Review to the ongoing implementation of the MRCS COVID-19 Response post-January 2021, particularly during the roll-out of the National COVID-19 Immunisation Programme. The Mid-term Review suggests MRCS and its partners to continue serving the initial priorities of action, namely, support frontline health workers, people with severe socio-economic impact and place emphasis on strengthening coordination among members of the International Red Cross Red Crescent Movement.

The mid-term review presents main findings, achievements, challenges and recommendations. It also highlights appreciation of inherent capacity of MRCS and importance of advancing adaptive capacity in building a culture of preparedness and responding to future emergencies. This study informs areas of improvement in programme development, SOPs, communication, coordination, major barriers to cross-sector collaboration and managing relationship and expectation. MRCS may continue reflecting on the gaps in responding to emergency such as in the COVID-19 pandemic vis-à-vis normal routines. MRCS and its wider stakeholders can benefit from this mid-term review to deliver high quality services in a sustainable manner.

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Annex A: Mid-term review timeline

Activity	Deliverables	Dates
Kick-off discussion with MTR Team and EMT (remotely)		26 February 2021
Literature/desktop review, draft inception report, finalise the interview questions, conduct 2 pilot interviews	Draft inception report	26 February – 3 March 2021
Revision and approval of inception report Briefing with Commissioner from APRO, facilitated by the EMT, and key informant interviews (KII) with KL informants	Final inception report	4 - 10 March 2021
Briefing with Commissioner from MRCS, facilitated by EMT and review team; KII with informants		11 March 2021
In-country data collection (field work) and analysis		3 March – 8 April 2021
Presentation of initial findings by review Team Leader to MRCS, IFRC and other stakeholders (with some joining remotely)	Initial findings presentation	31 March 2021
Prepare and submit draft report with annexes	Draft report	9 April – 16 April 2021
Review of the draft report: MRCS and IFRC submits any requests for clarifications, corrections, changes on the draft report	Feedback on the draft report	17 April – 3 May 2021
Finalize and submit final report with annexes	Final report	7 May 2021
Final report approval by Commissioners	Final report	May 2021

Annex B: List of participating organizations and individuals in the mid-term review

No	Name of organization	No. of participants
I.	Government organizations	
1.	Malaysia National Disaster Management Agency (NADMA)	3
2.	Representative from Selayang Hospital/frontliners	
3.	Representative from the DBKL (PIC of Homeless Project)	
II.	The International Red Cross Red Crescent Movement	
4.	International Federation of Red Cross and Red Crescent Societies (IFRC)-Asia Pacific Regional Office	11
5.	Malaysian Red Crescent Society (MRCS)- NHQ level	
6.	Malaysian Red Crescent Society (MRCS)- State/Branch level	
7.	International Committee of the Red Cross (ICRC)	
III.	Malaysian NGOs and civil society organizations	
8.	NGOs components of the Malaysia COVID-19 Coordination and Action Hub (MATCH)	4
IV.	Private sector, donors or international organization	
9.	Donor	2
V.	Individual (Beneficiary)	
10.	Aid recipient	2

Annex C: Interview questions

Introductory Questions
a) Could you please tell me briefly about your role in your present organization? Where were you working prior to this? [ask only when necessary]
b) Could you please tell me about your role in the Persatuan Bulan Sabit Merah Malaysia (MRCS) COVID-19 response plan in Malaysia? How you began in contact with the MRCS? [ask only when necessary]

1. Relevance and appropriateness

1a. How is the service going?
1. Please tell me how Persatuan Bulan Sabit Merah Malaysia (MRCS) started to plan and carry out the operation involving external partners such as local authorities and donors?
2. How do you started to be in contact with Persatuan Bulan Sabit Merah Malaysia (MRCS) for the COVID-19 response plan?

1b. Is the COVID-19 response plan reaching the target population?
3. How do you think the MRCS COVID-19 response plan has successfully complemented government's effort so far? Why? How do you obtain the beneficiaries list? (if applicable)
4. a) Do you think the Persatuan Bulan Sabit Merah Malaysia or MRCS COVID-19 response plan has assisted the population who have most adversely affected by the COVID-19? Why?
   - *Were the most vulnerable selected?*
   - *Were any group or type of people excluded or missed?*
   b) How did MRCS choose who to give assistance? What is your opinion of the process? (For volunteers)
5. What do you think about the assistance or aid received by the beneficiaries so far?

2. Effectiveness and efficiency

2a. How can we finetune this operation/delivery to make it more effective and efficient?
6. To what extent have the Persatuan Bulan Sabit Merah Malaysia or MRCS's finance policies and procedures affected implementation of the operation (looking at the practices, barriers and risks related to cash flow, working advance liquidation, thresholds, opening of bank accounts, and cash disbursement as part of CTP modality)? What are the major financial risks? (answer only if applicable)
7. How do you think the existing Persatuan Bulan Sabit Merah Malaysia (MRCS) standard operating procedures (SOPs) and guidelines are useful to the implementation of the response plan? (if applicable)
8. What are your recommendations for Persatuan Bulan Sabit Merah Malaysia (MRCS) in improving their approaches in COVID-19 response plan?

2b. Is the delivery working?
9. In the eyes of the public or key donors, do you think the implementation of this response plan is transparent and accountable? Why? Do you receive all necessary support, information, guidelines or reports from the headquarters of Persatuan Bulan Sabit Merah Malaysia (MRCS) promptly as and when you need them? Why?

10. Do you think if any area of this operation or response plan is conducted based on ad hoc decision-making basis such as the matters related to procurement or logistical arrangement? Can you give an example?
11. Do you think the safety of Persatuan Bulan Sabit Merah Malaysia (MRCS) staff and volunteers are well taking care of throughout the operation? Why? (if applicable)

2c. What are the barriers to implementation?
12. In your opinion, what are the three major barriers to implement this response plan successfully? Why?
13. a) Were there challenges in volunteer mobilisation and how were these challenges addressed? (if applicable)
    b) What is your experience in interacting with the volunteers from Persatuan Bulan Sabit Merah Malaysia (MRCS)?

3. Sustainability and connectedness
3a. What is the response plan trying to achieve?
14. a) Will Persatuan Bulan Sabit Merah Malaysia (MRCS) is flexible enough in its operation to meet the COVID-19 National Society Response Plan's objective? (if applicable)
    b) In what area Persatuan Bulan Sabit Merah Malaysia (MRCS) can improve its approaches to meet the COVID-19 National Society Response Plan's objective?

3b. How is the implementation going between sites?
15. Do you think it is important to work with external partners (e.g., UN agencies, local NGO or civil society organizations) in the Persatuan Bulan Sabit Merah Malaysia (MRCS) COVID-19 response? Why?

3c. How is implementation going now compared with a year ago?
16. Do you think you have more resources now compared to last year in continuing implementing the MRCS-led COVID-19 operation (e.g., increase of number of volunteers, new resource invested)? Why?

3d. How could the organization be changed to make it more effective?
17. Do you think the experience gained from last year's response to COVID-19, make you and/or your organization more prepared in responding to and building back better from future crisis? Why?
18. In your opinion, what are the three major lessons learnt so far? How these lessons learnt can be documented and practiced ensuring similar mistakes are not repeated?

Annex D: Categorization of open code, focused code and deliberation on areas of concern

Open code	Focused code	Major area of concern
RELEVANCE AND APPROPRIATENESS		
• Programme design requires need assessment process • Acknowledging gap in programme development capacity	Enhancing ownership of programme development and operational accountability	Expounding the importance of building a culture of preparedness and accountability for future emergencies through capitalising on public trust and strengthening programming capabilities by means of collaborative approach
• Finetuning collaborative mechanism to maximise synergy creation • Cultivating proactiveness and anticipatory capabilities	Capitalising on external network and being innovative	
• Being open and acting fast • Perceived as a trustworthy organization	Sustaining conducive public perception as the chosen humanitarian partner	
EFFECTIVENESS AND EFFICIENCY		
• Disoriented perception on the practicality and relevance of SOPs • Different expectations and understanding on current SOPs • Strengthening ownership in planning right from the beginning	Urgency in strengthening SOPs	Addressing operational barriers proactively and innovatively with an emphasis on reviewing current SOPs, strengthening leadership and building trust among partners within and outside the International Red Cross Red Crescent Movement
• Revisit the leadership style needed in pandemic • Inconsistent level of trust between MRCS headquarters and branches • Insufficient level of innovativeness in day-to-day operation	In search of resilient leadership to promote innovativeness and trust building	
• Uncoordinated communication between MRCS and external partners and branches • Lacking resilient and integrated leadership in emergencies • Insufficient capacity for community engagement and accountability • Lacking integrated programme implementation capacity	Identifying major barriers in communication, leadership and programme development capacity	

SUSTAINABILITY AND CONNECTEDNESS		
• Inconsistent coordination mechanism between International Red Cross Red Crescent Movement partners • Imbalanced use of existing resources and manpower	Developing systematic coordinating and resources utilisation mechanism within the Red Cross Red Crescent Movement	Undertaking continued improvement by addressing lessons learnt and enhancing coordination and communication between headquarters and state branches, members of the International Red Cross Red Crescent Movement and with external partners
• External partners continue assessing the International Red Cross Red Crescent Movement's capacity • Unaligned coordination and communication with external partners	Managing expectation of external partners through effective communication and coordination	
• Becoming a learning organization • Building cross-sector collaboration with wider stakeholders • Strengthening accountability and transparency • Revitalising volunteer development programme • Self-awareness on continued improvement	Identifying major lessons learnt	