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Emergency Plan of Action (EPoA)

Sierra Leone: Oil Tanker Explosion



International Federation
of Red Cross and Red Crescent Societies

DREF Operation n°	MDRSL011	Glide n°:	FR-2021-000169-SLE
Date of issue:	07 November 2021	Expected timeframe:	03 months
Operation start date:	07 November 2021	Expected end date:	28 February 2022
Category allocated to the of the disaster or crisis: Yellow			
DREF allocated: CHF 61,614			
Total number of people affected:	101 confirmed dead and 123 injured (and counting)	Number of people to be assisted:	1,120 people (approx. 224 households)
Provinces affected:	Wellington Area, Freetown	Provinces/Regions targeted:	Wellington Area, Freetown
Host National Society presence (n° of volunteers, staff, branches): Sierra Leone Red Cross Society (SLRCS) has above 17,000 active volunteers; 60 staff members. The National Society covers 13 Districts in all the four Regions in Sierra Leone.			
Red Cross Red Crescent Movement partners actively involved in the operation: International Federation of Red Cross and Red Crescent Societies (IFRC)			
Other partner organizations actively involved in the operation: National Disaster Management Agency, FCC & other humanitarian partners.			

A. Situation analysis

Description of the disaster

On 05 November 2021, a fire incident occurred in the Wellington PMD Junction east of Freetown involving a loaded fuel tanker that colluded with and a truck carrying granite stones while the fuel tanker was about to enter into a nearby filling station to discharge its fuel. This led to fuel spillage which population rushed to collect. In the interim, some community members rushed to the scene and took advantage of the leakage to scoop fuel and store it in nearby makeshift structures. As the fuel was being scooped, a fire broke out under unidentified reasons, and the [tanker exploded](#), killing nearly a hundred people and injuring more than a hundred.



Oil tanker exploded in Wellington area of Freetown, leaving nearly hundred dead ©SLRCS

As of 06 November, it is difficult to be exact on the numbers of people affected, but preliminary reports suggest 101 people have been confirmed dead and 123 seriously injured persons are currently receiving care at various hospital within the township including Connaught (the national referral hospital), 34 Military, the Emergency and Choithram hospitals. Both public and private properties such as vehicles, gas station, shops and dwelling houses got burnt. Families of the affected are severely distressed and traumatized.

The Government, through the Ministry of Health and Sanitation (MoHS) immediately convened the National Public Health Emergency Management Committee (PHEMC) on 6 November to inform partners of the incident and their initial actions so far. The PHEMC also activated Emergency Operation Center (EOC) Level 2 incidence response. Government informed partners that over 100 burn patients have been transported to various hospitals across Freetown and medical practitioners are being pulled from their locations to support case management in these hospitals. There is also challenge with the identification of victims by relatives due to the extent of the burns.

MDRSL011 – Sierra Leone Oil Tanker Explosion – DREF EPoA

Summary of the current response

Overview of National Society Response Action

Upon receiving the news of the fire incident, Sierra Leone Red Cross Society (SLRCS) immediately deployed 20 volunteers and 06 staff members to the scene to render first-aid service to some 23 injured persons. SLRCS has also been providing support in conveying the dead to Connaught mortuary, while also supporting referral of injured victims to health facilities for intensive treatment. Injured persons who know phone numbers of their relatives were also supported during referral and at health facilities to inform family members of their whereabouts, as the main hospital is overwhelmed, and families are struggling to locate loved ones. In addition, volunteers are sensitizing the communities on the dangers of hoarding fuel in their houses and providing first aid and psychosocial support to some of the affected people.



SLRCS staff and volunteers have collected data to inform the design of an emergency plan of action and supporting restoration of family links for people separated from their families by the ongoing chaos.

SLRCS is participating in national coordination meetings organized by the National Disaster Management Agency (NDMA) with other partners with below outcomes:

1. This is a level 2 incident (national emergency) that requires the support of every humanitarian actor. And it is considered as public health emergency, which suggests that SLRCS should be at the forefront of this operation.
2. An Incident Command Centre has been established at the scene by the actors present, led by National Disaster Management Agency (NDMA)

Overview of Red Cross Red Crescent Movement Actions in country

The International Federation of Red Cross and Red Crescent Societies (IFRC) has a Cluster Delegation in Sierra Leone also covering Liberia, Guinea and Guinea Bissau. The Delegation on 06 November, published a [press release](#) to inform humanitarian community of the disaster.

Given the limited financial means available at SLRCS, IFRC Country Delegation in Sierra Leone supported the preparation and submission of this DREF request to enable the NS to provide a response to the fire incidents. Through representation and coordination, the IFRC Delegation continues to engage SLRCS leadership and support in identifying SLRCS's areas of intervention, its roles and responsibilities in its coordination with Red Cross Red Crescent (RCRC) Movement partners, UN agencies, national and international NGOs, and donors through networking and collaboration.

Overview of other actors' actions in country

Following initial EOC meeting, another meeting was held on 6 November to further inform partners of the assessed damage and to set up the incident management team to coordinate the response. In the meantime, the EOC has activated all 14 pillars including Response, Logistics, Health, WASH, Social Mobilization, Risk Communication and Community Engagement, and Surveillance among others. The Minister of Health also authorised MoHS team to use the medical equipment and commodities in stock to respond to the incident and requested all partners to support the cause. During the EOC meeting held on 06 November 2021, Médecins sans Frontières (MSF) committed to provide medical equipment and commodities to support the case management at different hospitals.

Needs analysis, targeting, scenario planning and risk assessment

Needs analysis

At the time of writing, 101 casualties have been confirmed, and at least 123 people seriously injured by the blast had to be rushed to different health facilities in the area. As the situation is still unclear on the actual number of persons injured, the immediate needs are primarily around provision of first aid to the injured, supporting authorities in family tracing and providing psychological first aid support to both the affected families and volunteers exposed to the gruesome sight of charred bodies.

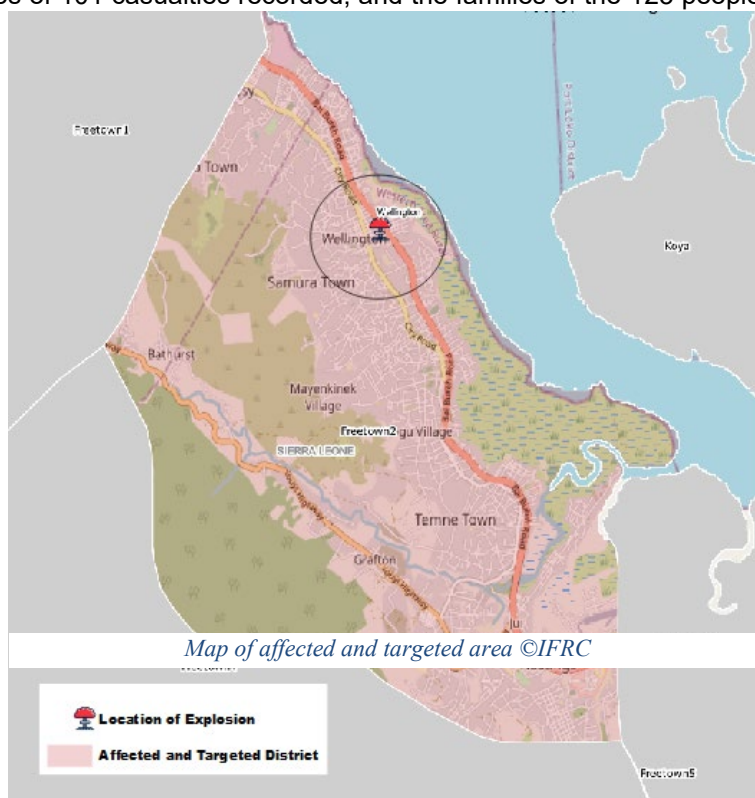
The NS will simultaneously support government authorities in conducting multi-sectoral needs assessments, to determine the number of families affected and material damage. Indeed, the explosion occurred at a busy intersection in the Wellington area of Freetown, which means livelihoods have likely been impacted. Likewise, habitations in the area have had probably been impacted though extent remains unknown for the moment.

Targeting

Considering that affected people have varied levels of vulnerability and that there are other partners on the ground, SLRCS will focus its initial intervention to target families of 101 casualties recorded, and the families of the 123 people injured and in hospitals. As such, total number of targeted will be **1,120 people (224 households)** directly affected by the tanker explosion in the community of Wellington. They will be supported with first-aid services, referrals, psychological first aid and family tracing, and hygiene promotion and eventually supported covering basic needs through one-off unconditional cash disbursement.

Reverification of targeted households will be done referencing the standard selection criteria. Community members will be consulted, listened to and informed of the selection process through meetings with key stakeholders within the affected communities to outline the response options suggested by the Red Cross. Beneficiary's selection criteria will also be discussed and decided with these stakeholders, ensuring to be fair and transparent. This way, the communities will have a chance to influence the operational strategy and provide key information on needs as they evolve.

The initial beneficiary selection criteria will include families of injured persons, and households led by women who lost their livelihoods due to the explosion. The criteria will be widely disseminated in a transparent way and will be revised as situation unfolds and more information is made available following the assessment which is ongoing.



Estimated disaggregated data for population targeted: Disaggregated data will be made available as soon as registration process is completed. This will be provided in any future updates/reports of this operation.

Scenario planning

Scenario	Humanitarian consequence	Potential Response
Best Scenario: Affected community receives emergency assistance within a month, from the partners and government, while waiting necessary measures to facilitate their return to a normal life.	<p>Affected communities have access to emergency shelter from the government and private sector</p> <p>Health facilities rapidly regain the capacity to care for emergencies and health needs in the communities</p> <p>No damages at essential water sources</p> <p>Affected communities can continue physical distancing to curb the rising trend of COVID-19 cases in their community</p>	The implementation of this DREF operation is finalized within planned timeline, in coordination with authorities and other stakeholders.
Most likely Scenario: Affected population receive emergency assistance within three months, while waiting for measures which will allow them to return to their homes.	<p>Affected communities have no access to adequate health and mental care</p> <p>Community remains highly exposed to the spread of Covid-19 within affected community because of overcrowding in unsanitary conditions</p>	This DREF operation is implemented as planned with possibility of a timeframe extension and adjustment of the operational strategy based on the specific situation.

	<p>Health facilities remain overwhelmed for several days and unable to cater for medical emergencies in the communities, with temporary shortage of doctors, nurses and essential hospital drugs (including anaesthetics, EM drugs)</p> <p>Some water sources are unusable / contaminated, some damages at WASH facilities carry risk of water borne diseases outbreaks</p> <p>Vulnerability of affected families increases due to trauma and need to cover medical bills, exposing them to negative coping mechanisms.</p>	
<p>Worst case scenario: Affected population receives no support within 03 months and cannot access adequate health and psychological care support.</p>	<p>Affected communities have no access to adequate health and mental care</p> <p>Health facilities remain overwhelmed for several weeks and unable to cater for medical emergencies in the communities, with extended shortage of doctors, nurses and essential hospital drugs (including anaesthetics, EM drugs)</p> <p>Several water sources are unusable / contaminated, heavy damages at WASH facilities carry high risk of water borne diseases outbreaks</p> <p>Vulnerability of affected families increases, exposing them to negative coping mechanisms such as theft, prostitution, etc.</p>	<p>SLRCS mobilises more volunteers and financial resources to support relevant response sector</p> <p>SLRCS engages its national and international partners to develop an exit strategy through a medium-to-long term project with a view to supporting development of livelihoods within the affected community</p>

Operation Risk Assessment

The current DREF operation is exposed to a number of risks as highlighted below, for which SLRCS and Country Delegation have discussed mitigation measures to ensure targeted communities receive the needed support.

1- Security Risks (and Mitigation measures):

The affected community members could be exposed to armed robbery, sexual and gender-based violence (SGBV), among other criminal activities, which could affect this operation in several ways. Likewise, Red Cross teams are equally exposed to these crimes, in addition to potentially having the affected community attack them if they deem support provided is not sufficient. Below are equally situations both Red Cross teams and affected communities must remain aware of, for their safety:

- Ambush, Armed robbery, Banditry, looting, and theft of asset.
- Carjacking, Road Travel Accident

To mitigate such incidents during the operation, all security measures of both the Movement and the Government will be strictly adhered to by all volunteers and staff involved in the operation to reduce risks. The security management as part of this operation will be based on the RCRC Fundamental Principles and humanitarian values. In addition, the following actions related to security will be implemented:

- These measures include the respect of visibility through the wearing of jackets and regular communication on all the movements.
- Ensure community engagement to provide clear explanations to on the role of Red Cross, the support being provided and beneficiary selection criteria to be clearly communicated.
- Regular briefings will be organized to remind volunteers and staff on their behaviour and Safer Access.

- Coordination will be maintained between the NS and IFRC to ensure that all security measures are adhered to.
- Constant communications check-in measures with base by all operation staff members will be sustained.
- Regular security updates will be organized, and information disseminated.
- Real time monitoring of field activities through the SLRCS information management system.
- The use of other IT means of contact system to ensure communications during follow-up missions.

All staff and volunteers must have undergone the Stay Safe security course and abide by the Code of conduct.

2- COVID-19 Pandemic

This DREF operation and its operational strategy considers the risks related to the current COVID-19 pandemic and is aligned with the IFRC global emergency appeal that supports NSs to deliver assistance and support to communities affected or at risk of being affected by the COVID-19 pandemic. According to [Africa CDC](#) as of 06 November 2021, the country has recorded a total 6,399 cases of which 1,883 are active. To date, the following measures have been taken to curb the spread of the disease: mandatory mask wearing, set up of proximity screening sites and obligation for every building to have a screening station, set up of treatment centres, and risk communication, providing updated information on the COVID-19 situation.

NSs responses to COVID-19 are supported through the IFRC [global appeal](#) which is facilitating and supporting them to maintain critical service provision, while adapting to COVID-19. This DREF operation is aligned with and will contribute to the current global strategy and regional Emergency Plan of Action for COVID-19 developed by the IFRC Africa Regional Office, in coordination with global and regional partners. This means that the NS will ensure, even as it responds to this accident, that COVID-19 prevention measures are adhered to, in line with regional plan of action and its national COVID-19 country plan. IFRC continues to assess how emergency operations in response to disasters and crisis should adapt to this crisis and provide necessary guidance to its membership on the same. The NS will keep monitoring the situation closely and revise the plan accordingly if needed, taking into consideration the evolving COVID-19 situation and the operational risks that might develop, including operational challenges related to access to the affected population, availability of relief items, procurement issues, and movement of National Society volunteers and staff as well as international staff. For more information, please, consult the [Covid-19 operation page](#) on the IFRC Go platform.

3- Ebola Virus Disease

With the recent outbreak in Guinea and Sierra Leone remains at risk of an outbreak, which will impact the implementation of this operation as NS's capacity will be overstretched. Implementation of Preparedness and prevention activities with regards to this potential outbreak are underway through the IFRC [West Africa EVD Emergency Appeal](#), which covers Guinea for response and six other countries for preparedness actions.

B. Operational strategy

Overall Operational objective:

The overall objective of this operation is to provide emergency assistance to at least 1,120 directly affected persons (224 households) by the oil tanker explosion in Wellington area of Freetown. This will be done by immediate provision of first-aid services, supporting restoration of family links, providing psychological first aid to both the affected and volunteers. Hygiene promotion will be ensured by the provision of essential items, and basic needs ensured by supplying affected families with a one-off cash disbursement.

As information is limited for the moment, the SLRCS will conduct an assessment during the next three weeks to determine if an upscale of the response is needed, and of what magnitude. This assessment will also help understand the impact that the explosion has had on the water distribution system of the area, on the sewage and whether water sources may have been contaminated by the mix of water and ashes following the extinguishment of the fire.

Proposed strategy

SLRCS, through its thematic core areas of focus, will ensure collective response to the most urgent needs of the explosion affected population. The strategy will include gender-sensitive and protection in all programming, psychosocial support, community engagement and accountability to affected people.

The DREF operation will provide support in the following sectors:

1. Livelihoods and Basic needs (Target: 1,120 people or 224 HH)

Families that have lost loved ones or have injured relatives admitted at the hospital will surely face extra costs to ensure medical treatment and recovery, or costs associated with burials. Homes and businesses in the area surrounding the explosion have been destroyed and it is likely that affected families are amongst those that have lost (partially or totally) their dwellings and livelihoods and their source of income. As such, the intervention will provide an unconditional cash grant to 224 households to support their livelihoods and cover for medical expenses. This will be based on the food basket in Sierra Leone which is pegged at 425,000 Sierra Leonean Leones (SLL) (per last DREF operation implemented [MDRSL010](#)). SLRCS estimates that 1,250,000 SLL would be an acceptable contribution to support both families of the injured and deceased with mortuary costs and medical bills as relevant.

In total, a total of 1,675,000 SLL amount will be disbursed to 224 families to allow them access food and basic needs.

Some 15 volunteers will be allocated to support cash activities. They will sensitize targeted families on the use of the cash following IFRC guidelines for medical assistance and basic needs, support them in accessing their cash grants as they are stationed at the Financial Service Provider (FSP) cashing points. Volunteers will also conduct post distribution monitoring for one day, a few weeks after the distribution. Overall, volunteers will work for a total of seven days in this sector, supporting targeting as well.

2. Health (1,120 people or 224 HH)

SLRC will be providing first aid (FA) and supporting authorities with family tracing. This will go on for next ten days, to ensure no one is left behind. Psychological first aid (PFA) will be provided to families affected by the disaster and to volunteers. This is with the aim to ease stress experienced from the tragedy. These volunteers will be holding Psychosocial Support (PSS) sessions in affected communities and conducting health talks on key health messages relating to COVID-19 and Ebola virus disease. Facemasks will also be distributed by volunteers during their community engagement activities to both promote adherence to COVID-19 regulations and protect them from contracting the virus. An initial 100 volunteers will be engaged in the activities that will include:

- Provision of first aid
- Conduct search and rescue
- Provide PFA to targeted community and volunteers, once a week in group session (4 sessions) throughout the first month of operation. All cases requiring professional support will be referred to appropriate service at the local health care centers
- Health promotion, including Covid-19 and EVD awareness (to be budgeted and conducted together with hygiene promotion under WASH)
- Regular assessment on capacity of health facilities to deal with medical and surgical emergencies (including obstetric and pediatric emergencies)
- CBHFA within affected communities to provide community health support, recommend continuation of accessing to essential RMNCAH services and referral of urgent cases (including for obstetric / pediatric emergencies) to health facilities, taking into account the impact of the emergencies on health facilities capacities

3. Water, Sanitation and Hygiene – WASH (1,120 people or 224 HH)

Following the explosion, the entire affected area is currently filled with rubbles. There is need to support sanitation of this area. SLRCS will conduct below activities while assessments are completed, to determine specific WASH needs created by the accident.

- Procurement and distribution of hygiene kits for 123 families of injured persons. These kits shall contain bathing soap, toothpaste, toothbrushes, etc. for household personal hygiene. This is intended for the injured still at the hospital and will be useful for their caregivers while hospitalized.
- Provision of dignity kits to 24% of the targeted females, i.e., 175 women and girls of childbearing age, to serve for 02 months. Each kit shall contain sanitary pads, panties and bathing soap for women and girls.
- Conduct hygiene and sanitation campaigns twice a month for 02 months, to clear the rubbles and remove all signs of the traumatic event. This activity will be coupled with health promotion, with emphasis on awareness against Covid and EVD. A total of 15 volunteers will be deployed to conduct these sessions which will aim to clear the rubbles to wipe as much as possible the physical traces of this traumatic event.
- Continued assessments and monitoring are also integrated in the operation to ensure that the operation is in line with the evolving situation on the ground.

Protection, Gender and Inclusion (PGI): Women and children are more vulnerable especially owing to the fact of their homeless condition within the affected community. As such, PGI will be streamlined throughout the intervention, ensuring that volunteers receive adequate briefing during the various refreshers. SLRCS will ensure that protection issues are taken into account and that everyone feels protected despite age, gender and disability status. The NS will conduct

awareness-raising and orientation session on protection. For inclusion of everyone, engagement with people in the centres will be done to ensure that all the assistance is distributed equitably and impartially. Gender roles will be considered when setting up distribution time and dates as well as in hygiene promotion activities. As part of the needs assessment and analysis, a gender and diversity analysis will be included in all sector responses including Shelter, Livelihoods, Health and WASH, to understand how different groups have been affected, which will inform any revision of the operational strategy. All sectors will seek to meet the [IFRC minimum standards for protection, gender and inclusion in emergencies](#)

Community Engagement and Accountability (CEA): Community Engagement and Accountability (CEA) will be mainstreamed throughout the intervention to guarantee meaningful participation of the affected communities. An effective complaints and feedback mechanism will be set up to ensure community feedback is taken into account in the implementation of this EPoA. This will also help in the event the situation changes, to ensure that the community is listened to with regards to any change of strategy. Hygiene and health promotion sessions will also be instrumental in collecting feedback and respond to community concerns. In addition, SLRCS will inform community members that they can use the 300 Hotline service to ask questions, make complaints or provide feedback.

- Conduct orientation of 25 volunteers in CEA to ensure they can clearly convey to communities the objectives of the operation, ensure a good flow of information and clear roles and responsibilities between representatives, community leaders and committees
- Hold meetings with affected communities
- Set up feedback system and ensure to process the complaints received. Feedback will also be provided to the community to ensure they are aware their feedback had been considered.
- The different response sectors will incorporate the main practical tools of the [CEA in Emergencies Toolkit](#), in particular to ensure that assessments are well integrated and capture key community demands as well as the most appropriate communication channels to be established with affected communities.

Operational support services

Human Resources: Overall, 100 volunteers will be engaged in this operation to support the various sectors. Some of the volunteers will be selected amongst the National Disaster Response Team members and will support in assessments, coordination and response. This will ensure that effective response preparedness and NS surge capacity mechanism is maintained. Insurance for volunteers is covered in this operation and their per diem for each deployment. The deployed NS staff cost is also included in the operation. Some four NS staff members will also be on the field to provide support. This includes, the Disaster management coordinator, the logistics manager, the cash focal point, the Director of programmes and the Secretary General. Their costs are imputed to this operation.

The NS Cash focal point will provide technical guidance on Cash and Voucher Assistance (CVA) activities. The overall operation will be led by National Society Director of Programmes and Operations.

Planning, Monitoring, Evaluation and Reporting (PMER)

SLRCS will oversee all operational, implementation, monitoring and evaluation, and reporting aspects of the DREF implementation. The Planning, Monitoring, Evaluation, and Reporting (PMER) unit of SLRCS will work closely with IFRC Country Cluster Delegation and will be responsible for performance-based management systems and the overall quality and effectiveness of the operation. The performance of the operation will be monitored through a robust system of accountability and reporting, with emphasis placed on tracking the progress of outputs to inform operational planning and decision making. The PMER unit will develop a monitoring schedule and appropriate tools to collect data on key performance indicators to ensure accountability, transparency, and financial management of the operation.

SLRCS staff in the Operations, Disaster Management, Health, WASH and CEA units will conduct monitoring and supervision visits to the branch and affected community to provide technical support and ensure that activities are implemented according to agreed standards. For quality assurance, regular monitoring of the planned activities will be carried out by the DREF implementation team, while scheduled monitoring visits will be made jointly by the SLRCS team and IFRC. Findings from these monitoring visits will be analyzed for reporting and decision-making purposes.

Apart from scheduled monitoring, the day-to-day monitoring on the progress of the operation will be the responsibility of the PMER unit and the coordinating team based on the DREF plan of action and outputs indicators. They will advise on any delay or difficulties faced during implementation so that appropriate support or corrective measures can be adopted in a timely and appropriate manner. Reporting on the DREF will be done per the IFRC minimum reporting standards, there will be series of reports to monitor performance including activity reports, monitoring reports, internal tracking tool to compare the approved plan of action with actual performance and identify constraints and recommended remedial actions as required. One-day lesson learned workshop will be conducted at the end of the operation, and final narrative

report will be produced 03 months after the end of the DREF implementation, that will outline key achievements, best practices, challenges, and lessons learned that will be referenced when responding to future fire disaster of such nature.

Logistics

All procurement relating to this operation will follow the regulations of the Sierra Leone government (NPPA) and the IFRC standard procurement systems and procedures to ensure transparency and accountability. Quality inspection will be undertaken at the end of all procurement process before items are accepted and goods received notes signed. SLRCS will use its warehouse in Waterloo to store items temporarily before distribution to the affected community.

SLRCS has identified cash disbursement as the preferred response mechanism under this sector because it currently has an existing agreement with a financial service provider (FSPs) (Africell and Orange Money). Recently, with the COVID-19 Response and Susan's Bay Fire DREF, SLRCS used agreement with Orange to provide unconditional cash transfer and cash for Housing to target beneficiaries. However, with few challenges reporting during the process of cash-out, SLRCS will used agreement with Africell to provide the unconditional cash to the 224 households. This will enable them to ascertain the FSP to deploy in future cash transfer programming.

Communication

A communication pillar established by the National Disaster Management Agency, of which Red Cross is part, was set up at the Office of National Security (ONS) with request for partners to provide support in communication activities around response to this disaster. SLRCS will document its response actions and their impact in a documentary which will be funded through this operation.

Security Situation Review

To reduce the risk of Red Cross Red Crescent personnel falling victim to crime or violence, active risk mitigation measures have been communicated with staff and volunteers through induction or briefing exercise. The briefing exercise including putting out some potential security issues and how they can mitigate, report or manage those issues. Relating to safer access concern, one of the main benefits of the SLRCS is the nationwide recognition of the NS. This has rendered ease and facilitation with affected community head and most importantly the community people themselves. The SLRCS is well accepted and trusted by the community. SLRCS is presently reviewing the existing risk matrix to inform all staff and volunteers about some of the risks and how this could be handled or mitigated. The SLRC has been also advised to either recruit or appoint a skilled security focal point to raise the standards and extend professional security support to volunteers operating under insecure, remote and high-risk operating environments.

IFRC Cluster Security has been extending direct support to the SLRC.

The IFRC security plans will apply to all IFRC staff throughout. Area specific Security Risk Assessment will be conducted for any operational area should any IFRC personnel deploy there; risk mitigation measures will be identified and implemented. All IFRC must, and RC/RC staff and volunteers are encouraged, to complete the IFRC Stay Safe e-learning courses, i.e., Stay Safe Personal Security, Stay Safe Security Management and Stay Safe Volunteer Security online training. Minimum Security Requirements (MSR) are in place for Sierra Leone.

The Regional Security Unit has been encouraging National Staff Volunteers to complete the New Stay Safe 2.0 Global Edition:

- Stay Safe 2.0 Global Edition: Level 1- Fundamentals: <https://ifrc.csod.com/ui/lms-learning-details/app/curriculum/fd082aef-a477-427b-9ace-8c5f2a13b935>
- Stay Safe 2.0 Global Edition: Level 2- Personal and Volunteer Security in Emergencies: <https://ifrc.csod.com/ui/lms-learning-details/app/curriculum/a88a5612-4347-447b-95b1-2dbb468d987c>
- Stay Safe 2.0 Global Edition: Level 3- Security for Managers: <https://ifrc.csod.com/ui/lms-learning-details/app/curriculum/c38f447b-3655-4867-b2bc-695f5f8c4b9e>

C. Detailed Operational Plan



Livelihoods and basic needs

People targeted: 1,120

Male: 392

Female: 728

Requirements (CHF): 34,404

Population to be assisted: 1,120 people (224 HH) will be targeted with basic needs assistance (cash)

Programme standards/benchmarks: Government agreed Monthly Expenditure Basket or other approved assistance value

P&B Output Code	Livelihoods and basic needs Outcome 1: Communities, especially in disaster and crisis affected areas, restore and strengthen their livelihoods	% of targeted households reached with multipurpose cash to support basic needs (100% or 224 HH)															
	Livelihoods and basic needs Output 1.5: Households are provided with unconditional/multipurpose cash grants to address their basic needs	<ul style="list-style-type: none"> - # of people reached with one-off multipurpose cash support (Target: 1,120 people) - # Volunteers supporting cash activities (Target: 15 volunteers) - # of PDM conducted (Target: 1 PDM covering all HHs) 															
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP081	Identification of caseloads and verification of household beneficiaries																
AP081	Update FSP contract with Africell Money																
AP081	Conduct Information session for volunteers to be engaged in cash distribution																
AP081	Deployment of 15 volunteers to sensitize targeted families on the details of Mobile money transactions																
AP081	Distribution of one-off cash instalment to 224HH																
AP081	Conduct post distribution monitoring (PDM) for 2 days after cash disbursement																



Health

People targeted: 1,120

Male: 392

Female: 728

Requirements (CHF): 6,702

Population to be assisted: 1,120 people (224 HH) will be targeted with health care and PSS.

Programme standards/benchmarks: MoHS and WHO standards.

P&B Output Code	Health Outcome 2: The immediate risks to the health of the affected populations are reduced through improved access to medical treatment	% of people provided with emergency health care (Target: 100% or 1,120 persons)															
	Health Output 2.3: Target population is reached with Search and Rescue activities	# of volunteers supporting emergency health care and rescue activities (Target: 50 volunteers)															
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP082	Deploy 50 volunteers to support search, rescue and contact tracing and provide feedback to relatives of injured persons on their status																
AP022	Deploy 50 volunteers to provide first aid and referral of injured persons																
P&B Output Code	Health Outcome 6: The psychosocial impacts of the emergency are lessened	% of people provided with PSS services (Target: 100% or 1,120 people/224 HH)															
	Health Output 6.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff	# of volunteers supporting PSS provision (Target: 25 volunteers)															
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP023	Conduct a refresher session of 100 volunteers on PFA to conduct psychological support for affected people																
AP023	Provision of PSS support to community and volunteers as needed.																



Water, sanitation and hygiene

People targeted: 1,120

Male: 392

Female: 728

Requirements (CHF): 5,862

Population to be assisted: SLRCS aims to assist 1,120 people (224 HH) will be targeted with WASH support.

Programme standards/benchmarks: This operation will seek to meet Sphere standards.

P&B Output Code P&B Output Code	WASH Outcome1: Immediate reduction in risk of waterborne and water related diseases in targeted communities	% of target population supported with sanitation of affected area (100%)															
	WASH Output 2.4: Hygiene promotion activities are provided to the entire affected population.	<ul style="list-style-type: none"> • # of families receiving personal hygiene kits (Target: 123 HH) • # of women and girls receiving dignity kits for 2 months (Target: 175 women) • # of Hygiene Promotion sessions conducted (Target: 4 sessions) • # of people reached with hygiene promotion activities (Target: 1,120 people) • # of volunteers supporting HP (Target: 50 volunteers) 															
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
AP030	Procurement and distribution of hygiene kits for 123 families, in accordance with the CEA and PGI minimum guidelines for relief distribution .																
AP030	Provision of dignity kits to 175 of the targeted women and girls to serve for 2 months, in accordance with the CEA and PGI minimum guidelines for relief distribution .																
AP030	Conduct hygiene and sanitation campaigns twice a month for 2 months by 50 volunteers																
AP030	Continued assessments and monitoring are integrated in the operation to ensure that the operation is in line with the evolving situation on the ground.																

Strategies for Implementation

Requirements (CHF): 14,648

P&B Output Code	S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform	# of volunteers involved in the response (Target: 100 volunteers)															
	Output S1.1.4: National Societies have effective and motivated volunteers who are protected	<ul style="list-style-type: none"> • # of volunteers insured (Target: 100 volunteers) • # volunteers provided with visibility material and protective clothing for their safety (Target: 100 volunteers) 															
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

AP042	Provide complete briefings on volunteers' roles and the risks they face amidst COVID-19																	
AP042	Provide psychosocial First Aid to volunteers and community as needed																	
AP042	Ensure volunteers are aware of their rights and responsibilities																	
AP042	Provide insurance cover for volunteers involved in the response																	
AP042	Ensure volunteers receive proper orientation on food distribution, CEA, health and WASH before deployment																	
P&B Output Code	Outcome S2.1: Effective and coordinated international disaster response is ensured	# of monitoring visits conducted by Country delegation (Target: 3 visits)																
	Output S2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved	<ul style="list-style-type: none"> - # of CEA orientation conducted (Target: 1) - # of feedback mechanisms setup (Target: 1) - # of feedback responded to (Target: N/A) - # of documentaries produced (Target: 1) - # of Lessons learned workshops held (Target 1) 																
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
AP084	Methods are put in place to ensure communities can participate in the response and influence decision-making																	
AP084	Community communication activities ensure people are kept informed of operational plans and progress and they have information they need about the response																	
AP084	Community feedback systems (including rumour and/or perception tracking) are established, and feedback acted upon and used to improve the operation																	
AP084	Collect case studies and develop short documentary to profile SLRCS response and beneficiary feedback																	
AP084	Conduct lessons learned workshop																	

Funding Requirements

The overall amount required for this operation is CHF 61,614 as detailed in attached budget.

International Federation of Red Cross and Red Crescent Societies

*all amounts in Swiss Francs
(CHF)*

DREF OPERATION

MDRSL011 - SIERRA LEONE - OIL TANKER EXPLOSION

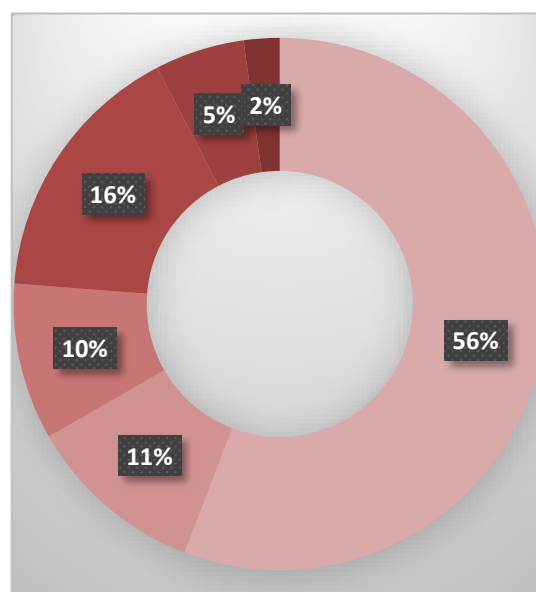
07/11/2021

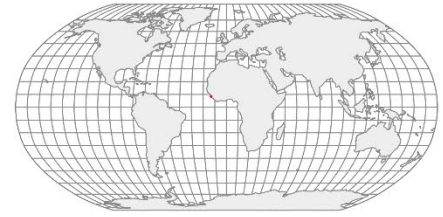
Budget by Resource

Budget Group	Budget
Water, Sanitation & Hygiene	5,302
Medical & First Aid	1,678
Cash Disbursement	31,951
Relief items, Construction, Supplies	38,932
Transport & Vehicles Costs	1,259
Logistics Services	0
Logistics, Transport & Storage	1,259
International Staff	0
National Staff	1,259
National Society Staff	839
Volunteers	6,059
Personnel	8,157
Workshops & Training	4,069
Workshops & Training	4,069
Travel	0
Information & Public Relations	420
Office Costs	0
Financial Charges	1,259
Other General Expenses	3,759
General Expenditure	5,437
DIRECT COSTS	57,854
INDIRECT COSTS	3,761
TOTAL BUDGET	61,614

Budget by Area of Intervention

AOF		
3	Livelihoods and Basic Needs	34,404
AOF		
4	Health	6,702
AOF		
5	Water, Sanitation and Hygiene	5,862
SFI1	Strengthen National Societies	9,957
SFI2	Effective International Disaster Management	3,351
SFI4	Ensure a strong IFRC	1,340
TOTAL		61,614





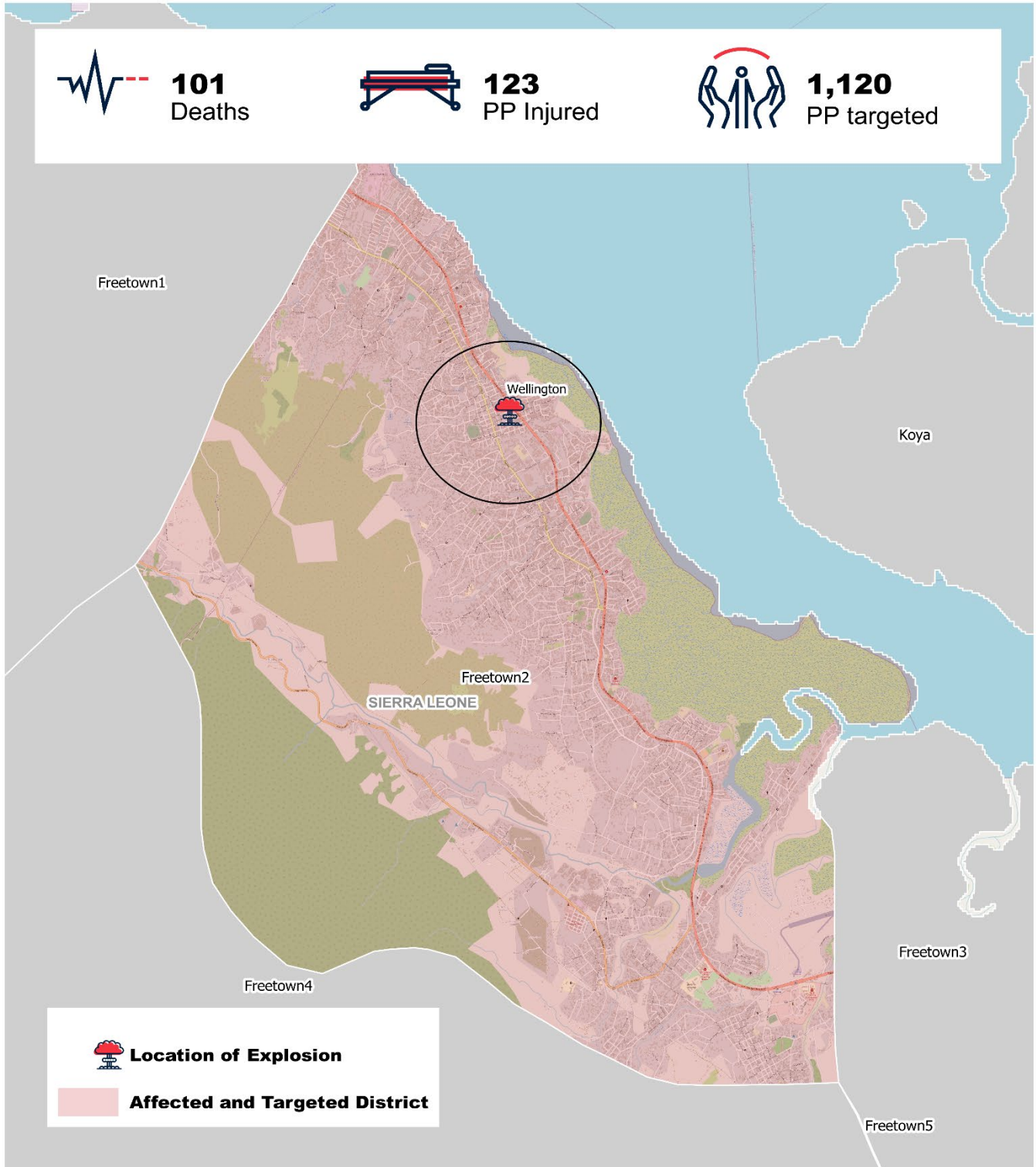
Sierra Leone : Oil Tanker Explosion

7 November 2021 • MDRSL011 • MDRSL011

 **101**
Deaths

 **123**
PP Injured

 **1,120**
PP targeted



The maps used do not imply the expression of any opinion on the part of the International Federation of the Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities.
Map data sources: GADM, Sierra Leone RC, IFRC. Map produced by: IFRC Africa Regional Office, Nairobi

0 20 40 m



Reference documents



Click here for:

- Previous Appeals and updates
- Emergency Plan of Action (EPoA)

For further information, specifically related to this operation please contact:

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How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.