IRAQ DREF
(MDRIQ012-Hospital Fire incident)

Lessons Learned Workshop Report

Lina Harbieh, Operational Planning, Monitoring, Evaluation and Reporting Officer (Facilitator) - IFRC MENA Regional Office

November 2021

Disclaimer: The views and opinions expressed in this article are those of the authors and do not necessarily reflect the official policy or position of the authors’ organizations.
Contents

Contents ....................................................................................................................................................... 0
Acronyms and Abbreviations.................................................................................................................. 1
Purpose of the Lessons Learned Report ............................................................................................ 2
Introduction ................................................................................................................................................. 3
Methodology ................................................................................................................................................ 4
Strengths and opportunities .................................................................................................................... 5
Positive Factors ............................................................................................................................................ 6
Challenges .................................................................................................................................................... 7
Top Challenges, Mitigation Actions, Suggested Solutions, and Recommendations ...................... 8
Relationship with Stakeholders ............................................................................................................... 9
Captured Lessons from the DREF Operation ...................................................................................... 10
Workshop Photos ...................................................................................................................................... 11
Annex .......................................................................................................................................................... 15
<table>
<thead>
<tr>
<th>Acronyms and Abbreviations</th>
</tr>
</thead>
<tbody>
<tr>
<td>DM</td>
</tr>
<tr>
<td>DREF</td>
</tr>
<tr>
<td>HHs</td>
</tr>
<tr>
<td>HQs</td>
</tr>
<tr>
<td>ICRC</td>
</tr>
<tr>
<td>IFRC</td>
</tr>
<tr>
<td>IRCS</td>
</tr>
<tr>
<td>LLW</td>
</tr>
<tr>
<td>NS</td>
</tr>
<tr>
<td>PSS</td>
</tr>
</tbody>
</table>
Purpose of the Lessons Learned Report

This report summarizes the key learnings and recommendations generated from the discussions in the lessons learned workshop (LLW) held with the DREF operation stakeholders.

The data for this report was gathered during the virtual LLW using the Microsoft Teams platform.

The objective of this report is to gather all relevant information for better planning for future projects or similar events, improving implementation of new projects, and preventing or minimizing risks for future similar projects.

The lessons learned workshop was one of the key activities planned to be held upon completion of the DREF interventions in order to identify best practices, challenges and draw lessons and recommendations for the operation team for future similar interventions.

Throughout each project life cycle, lessons are learned and opportunities for improvement are identified as part of a continuous improvement process. Documenting lessons learned helps project teams identify the root causes of problems and bottlenecks that occurred and mitigate their occurrence in later project stages or future projects. The ultimate purpose of documented lessons learned is i) to provide future project teams with information that can increase effectiveness and efficiency and ii) to build on the experience that has been earned by each completed project.

Ultimately, the goals of the lessons learned report are:

- Listing successes to document what went right
- Documenting what can be improved upon
- Streamlining processes based on this information
- Avoiding making the same erroneous actions
- Improving on current delivery standards by adopting proven good practice
- Contributing to organizational growth and maturity by effecting long term improvements in the way an organization embeds and shares Project Management best practices
- Communicating this information to project management and appropriate stakeholders.
Introduction

In response to the hospital fire incident that occurred on 13 July 2021, in the coronavirus ward of a hospital in southern Iraq, killing 62 people, injuring more than 110, and affecting around 270 others, the Iraqi Red Crescent (IRCS) in coordination with the International Committee of the Red Cross (ICRC) and the International Federation of Red Cross and Red Crescent (IFRC), as well as the Movement and non-Movement Partners, has decided to assist 202 affected households (HHs).

Consequently, a Disaster Relief Emergency Fund (DREF) has been launched to cover the immediate needs of those affected families (202 HHs).

Following the incident, and as the first responder, the IRCS immediately went into action to provide life-saving care and deployed its emergency teams of staff and volunteers, and carried out the following activities:

- Collaborated with the hospital management, government relevant authorities and collected the information from family members of victims.
- Mobilized its Headquarters (HQs) and branch level teams and collaborated with the relevant government authorities.
- Evacuated more than 20 wounded patients, who were shifted to the safe places in ambulances directly after the fire broke out.
- Treated several cases and provided first aid, before transferring them to other hospitals and transferred more than twenty-one charred bodies of the victims from the hospital to their homes.
- Retrieved the bodies of the victims from the rubbles.
- Distributed the available medicines and supported 54 families of deceased patients with cash assistance.

The Lessons Learned Workshop has been conducted with the presence and participation of IRCS staff and volunteers from three levels: field, branches, and HQs.

It intended to assess key achievements and challenges and provide an opportunity to capture the lessons learned surrounding the operation from the involved staff and volunteers of the IRCS.
This workshop was also an opportunity to provide recommendations for future DREF operations and contribute information to the DREF final report.

In this context, the main objectives are to provide qualitative recommendations based on the DREF operation previous experience on:

- **How to improve future programming in terms of preparedness or for other future similar events.**
- **The actions that should be avoided if the initiative were to be replicated.**

## Methodology

**Desk review:** A document review was conducted to better understand the overall DREF operation and related documents, as well as the background and logistics required for this virtual lessons learned workshop.

**Capacity-building:** Participants in the workshop received remote refresher training on DREF processes and procedures. The goal of this refresher was to provide useful information to participants who were unfamiliar with those processes. A follow-up training could be held if the national society requests it.

**Data collection:** For this exercise, the participants were divided into four groups. Five sessions were held to identify learning elements related to strengths and opportunities, positive factors, challenges, and coordination, as well as make recommendations.

All relevant project participants were brought together to review the development process of the DREF operation together in the form of a virtual workshop.

The exercise included 21 participants from various departments at the field, branch, and HQs levels (disaster management, distribution committee, organizational development, health, construction and sanitation, operations, logistics, and one representative from the IFRC).
Strengths and opportunities

During this session, the four groups presented the DREF operation's strengths and opportunities in several areas, which were highlighted by the majority of the group members, as follows:

Logistics

- The availability of well-equipped ambulances with medical equipment,
- The availability of a pre-positioned stock of relief items, and
- The facilitation and distribution of cash assistance to the targeted households.

Coordination

- The implementation of IRCS policy in terms of internal coordination between headquarters and branches, as well as external coordination with government authorities,
- The activation of the emergency operations room allowing for effective coordination with governmental authorities and the local police department,
- The support provided by the IFRC through its management and staff as well as from the Movement Partners, and
- Good community relations and widespread acceptance of the IRCS.

Human Resources

- The availability of a well-trained national disaster response team and a fully equipped emergency team, in accordance with the IRCS contingency plan,
- The availability of skilled human resources/responders from the local community, and
- Strong and experienced Disaster Management (DM) team with prior experience.

The IRCS's resources and capacity were critical to the National Society's ability to respond effectively and efficiently to the event and achieve the DREF operation objectives.

Coordination with authorities at all levels was deemed extremely successful. Learning about how relationships with local government authorities were built and maintained over time, in particular, should be well documented for future replication.

The capacity of the trained IRCS volunteers involved in the emergency, as well as the trust and acceptance of the National Society, were critical factors in the success of the DREF interventions.
Engagement with local authorities at the national and district levels aided in enhancing the National Society's image and public perception. Another key success factor is the IRCS' image, preparedness, and response capacity.

Positive Factors

The "Key Factors for Successful DREF Implementation" are not intended to be a comprehensive list of factors that will have a positive impact on the operational plan, nor are they intended to be a "Silver Bullet" that, if implemented, will guarantee the success of a DREF. However, the following positive factors, which were implemented during project planning, development, and implementation, reduced risks and increased the likelihood of achieving successful DREF objectives.

Among other things, the four groups identified the following positive factors that aided in effectively and efficiently implementing and carrying out the DREF operation planned activities.

- Alleviating the suffering of the families of those who have been injured or killed as well as mitigating the effects of the disaster by distributing cash assistance in a highly streamlined manner and by providing psychosocial support,
- Improving the field experiences of branch staff and volunteers through the response operation and encouraging and building the capacity of other branches to deal with similar events,
- Ensuring a smooth flow of information and coordination among the response teams members,
- Providing on-site first aid in the field to reduce the number of fatalities,
- Increasing the national society's credibility in the eyes of the local communities,
- Coordinating with the governmental and local authorities to ensure disaster preparedness in the event of a disaster,
- Reaching the greatest number of beneficiaries in the shortest amount of time due to the presence of volunteers from various segments of society and various locations,
- Pre-allocated amount from the NS's resources for disaster response,
- Carrying out diverse response activities (psychosocial support - first aid – etc.), and
- Distributing tasks evenly among the disaster response team members.
The following are the top five positive factors highlighted and agreed upon by the participants: 1) Trained personnel in first aid, psychosocial support, and evacuation enabled an effective and quick response to a large number of victims. 2) Increased credibility of the national society in the eyes of the local communities. 3) Coordination with the governmental and local authorities and police department. 4) Knowledge and skills of Red Crescent coordinators and volunteers. 5) Facilitation of cash assistance from donors to affected families in a timely manner.

Those mentioned above were considered as positive factors in the success of the IRCS-led operation in response to the Hospital fire incident.

**Challenges**

The workshop participants were able to identify key challenges from various perspectives throughout the exercise and process, viewing it as an opportunity for the IRCS to concretely plan for areas for strengthening their National Society more broadly.

Participants stated that despite the challenges encountered in implementing the DREF, the IRCS assumed its role and undertook a humanitarian range of activities.

Some of these challenges have been highlighted by the participants, converged towards different areas, namely logistics and context at the field, and were due to:

- People gathering in large numbers near the hospital, obstructing access to the injured,
- COVID-19 implications and widespread concern in the community about an increase in corona cases,
- Many organizations made false promises, causing some families to take a backseat,
- The actual number of casualties was not made available upon request from IRCS,
- Logistics support and financial risks during the operation (internal financial reconciliation),
- The amount allocated for distribution was insufficient for some of the injured people's families,
- Financial resources were not made available to branches from headquarters,
- The absence of operating first aid personnel from the Health Department, and
- Late arrival of Civil Defense officers.
The following table highlights the top five challenges agreed upon by the group and recommendations shared by the various group representatives involved in the MDRIR012 DREF Operation. Please note that ranking has not been carried out by order of importance, as all of these recommendations are important for the working groups.

<table>
<thead>
<tr>
<th>TOP 5 Challenges</th>
<th>Mitigation Actions</th>
<th>Suggested Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>False promises made by some organizations</td>
<td>Rapid response/cash distribution to the affected families.</td>
<td>It is strongly advised that the IRCS and external donors do not make any promises.</td>
</tr>
<tr>
<td>COVID-19 pandemic implications and the fear of an increased number in cases.</td>
<td>Wearing masks and providing protective items to communities.</td>
<td>To apply social distancing and follow preventive measures.</td>
</tr>
<tr>
<td>The presence of a large number of members of the local community at the accident scene</td>
<td>Providing on-site community-based psychosocial support through the presence of volunteers across a wide geographical area</td>
<td>To provide psychosocial support to the affected communities while maintaining NS acceptance in the local communities.</td>
</tr>
<tr>
<td>The actual number of victims associated with the hospital fire, (dead, injured, and missing persons)</td>
<td>Collaboration with the appropriate authorities, particularly the ministry of health.</td>
<td>Collaboration with the appropriate authorities, particularly the ministry of health.</td>
</tr>
<tr>
<td>Working advance and financial settlement</td>
<td>Advising the financial department to take the appropriate action(s) and using the available resources (cash)</td>
<td>Internal policies and procedures must be established (in discussion with the president to facilitate CASH distribution to the branches)</td>
</tr>
</tbody>
</table>

**Recommendations**

- Increasing the training of Iraqi Red Crescent staff and volunteers in the areas of safer access, cash transfers, psychosocial support, and first aid.
- Respecting and applying the principles of beneficiary safety, dignity, and rights.
- Enabling logistics planning and increasing the funds allocated for logistics for an effective response.
- Advising the financial department in the event of any financial issues.
The stakeholders are crucial to the successful delivery of any organizational activity. Successful activities are those whose important stakeholders perceive them to be successful. The identification of the right stakeholders and the development of targeted communication to meet the needs of the activity and the expectations of stakeholders, will lead to a higher level of commitment and support from these stakeholders.

Therefore, it is essential to build and maintain robust relationships and maintain an appropriate level of communication with stakeholders.

Few stakeholders were identified during the stakeholder exercise. The participants were instructed to place the stakeholders in the circles depicted in the graph below. They consider those near the centre to be those with whom they have a strong relationship.

In conclusion, if stakeholders are more engaged, and the roles and responsibilities are well defined, there is less chance that some related issues will negatively impact the progress of the activity. Delays to the work will incur additional expenditure and impact the budget.
# Captured Lessons from the DREF Operation

<table>
<thead>
<tr>
<th><strong>Successful aspects to replicate</strong></th>
<th><strong>Challenges to avoid</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Internal coordination among all the departments and external coordination with the IFRC</td>
<td>COVID-19 implications on both the community and staff levels and an increased number in the cases</td>
</tr>
<tr>
<td>The availability of trained personnel and volunteers who can be quickly deployed in an emergency</td>
<td>The amount allotted for distribution was insufficient to meet the immediate needs of some injured people's families</td>
</tr>
<tr>
<td>Coordination of preparedness and response planning with the government and local authorities</td>
<td>Lack of information regarding the actual number of casualties</td>
</tr>
<tr>
<td>Maintaining the good image of the NS, well-positioned as the first responder</td>
<td>The absence of operational first aid personnel from the Health Department as well as the late arrival of Civil Defense officers at the fire scene</td>
</tr>
<tr>
<td>Community acceptance and trust in the Iraqi Red Crescent</td>
<td>The presence of a large number of local community members at the fire scene</td>
</tr>
<tr>
<td>Facilitation of cash assistance from donors to affected families</td>
<td>The risks and challenges associated with money transfer to the branches from headquarters</td>
</tr>
</tbody>
</table>
## Annex

### List of IRCS Participants

**IRAQ DREF (MDRIR012- Hospital Fire incident)**

**Lessons Learned Workshop**

<table>
<thead>
<tr>
<th>No</th>
<th>Participant Name</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Ahmed Abdul Ameer</td>
<td>Head Of DM department</td>
</tr>
<tr>
<td>2</td>
<td>Amer Hameed Abd</td>
<td>Head of Nasiryah IRCS Branch</td>
</tr>
<tr>
<td>3</td>
<td>Hayder Kathem abd ali</td>
<td>Official in Operations office</td>
</tr>
<tr>
<td>4</td>
<td>Noor ALdine Ahmed Ragab</td>
<td>Official in Technical Affairs office</td>
</tr>
<tr>
<td>5</td>
<td>Khaled Said Abdel Emam</td>
<td>Security follow-up unit / member of the distribution committee</td>
</tr>
<tr>
<td>6</td>
<td>Youssef Bandar Hussain</td>
<td>Assistant storekeeper / member of the distribution committee</td>
</tr>
<tr>
<td>7</td>
<td>Saba Abdul-Jabbar Saleh</td>
<td>Disaster management employee</td>
</tr>
<tr>
<td>8</td>
<td>Esraa Jawad Kazem</td>
<td>Disaster management employee</td>
</tr>
<tr>
<td>9</td>
<td>Sarab Imaad</td>
<td>Disaster management employee</td>
</tr>
<tr>
<td>10</td>
<td>Noor Khairy</td>
<td>Disaster management employee</td>
</tr>
<tr>
<td>11</td>
<td>Basma Mohy Nagy</td>
<td>Disaster management employee</td>
</tr>
<tr>
<td>12</td>
<td>Hassan Haider</td>
<td>Disaster management employee</td>
</tr>
<tr>
<td>13</td>
<td>Zainab Abdul Razzaq</td>
<td>Disaster management employee</td>
</tr>
<tr>
<td>14</td>
<td>Batoul Muhammad Utbah</td>
<td>Acting Head of Programs Department / Development section Officer</td>
</tr>
<tr>
<td>15</td>
<td>Mariam Majid</td>
<td>Organizational development department employee</td>
</tr>
<tr>
<td>16</td>
<td>Inaam Harrat Ali</td>
<td>Construction and sanitation department employee</td>
</tr>
<tr>
<td>17</td>
<td>Emad Hadi Sabah</td>
<td>Baghdad Branch - Health department</td>
</tr>
<tr>
<td>18</td>
<td>Tamara Abdul Razzaq</td>
<td>Operations office employee</td>
</tr>
<tr>
<td>19</td>
<td>Hawraa Saleh</td>
<td>Operations office employee</td>
</tr>
<tr>
<td>20</td>
<td>Shaima Fadel</td>
<td>Logistics Department</td>
</tr>
<tr>
<td>21</td>
<td>Maysoon Alwan</td>
<td>Logistics Department</td>
</tr>
</tbody>
</table>
Looking at the various recommendations proposed by the participants, interestingly show the desire for improvement for better response to future events.

The challenges identified from this paper will be of value to those involved in developing response measures and to strategic responses to man-made or natural disasters, or to meet unforeseen events.

By offering insight into the controlling stage in the disaster response in particularly in the Middle East and North Africa region, a real-world example is unravelled from which other countries and disaster management professionals can take advantage.