

INTER-AGENCY STANDING COMMITTEE  
PRINCIPALS MEETING

**How the system responds to L3 emergencies<sup>1</sup>**

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**HQ level - Step 1: Initial Analysis & Decision**

1. Large-scale, sudden-onset crisis occurs.
2. ERC receives from OCHA , within 18 hours, an initial assessment of the situation based on:
  - (a) Review of secondary sources (media, web-based situational data, etc);
  - (b) Initial status report from Humanitarian Coordinator & Humanitarian Country Team<sup>2</sup>;
  - (c) Consultation with affected state, including National Disaster Management Authority;
  - (d) Bilateral ad hoc consultation with IASC partners at HQ level; and
  - (e) Review of pre-existing contingency plan & national preparedness plan (where applicable)<sup>3</sup>.
3. Inter-Agency Emergency Directors' network is activated and meets to
  - (a) discuss the context, response capacity, status of humanitarian coordination structures, priority needs, gap analysis, lessons learned from past emergencies, and advocacy priorities; and
  - (b) develop a set of shared recommendations to propose to the IASC Principals
4. ERC convenes an IASC Principals meeting within 48 hours of event<sup>4</sup>, to consider
  - (a) Initial situation assessment received
  - (b) Emergency Directors' analysis and recommendations
  - (c) Analysis of 5 agreed criteria (scale, complexity, urgency, capacity, and reputational risk)
5. IASC Principals decide whether to designate a Humanitarian System-Wide Emergency ('L3') and agree on the activation period<sup>5</sup>.

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<sup>1</sup> Based on the IASC agreement to strengthen the system's readiness to respond to L3 emergencies, while recognizing the complementarity of humanitarian systems

<sup>2</sup> If no HC/HCT exists, then from the Resident Coordinator/UN Country Team, with consultation with non-UN actors

<sup>3</sup> To the extent possible, OCHA's assessment should also be based on available initial outputs from the ongoing Preliminary Scenario Definition (PSD), as part of phase 1 of the Multi-Cluster Initial Rapid Assessment (MIRA)

<sup>4</sup> Any of the IASC Principals may also request to the ERC that such a meeting be convened.

6. ERC informs IASC system, other relevant entities (UNSG, UNDG, DPKO/DPA), the RC/HC and HCT, and the authorities of the affected state, explaining the implications of the activation<sup>6</sup>.

### HQ level - Step 2: System Activation

1. Once L3 activation is decided, the IASC Principals determine (at the same meeting) whether existing leadership arrangements at country level are adequate or whether to deploy a Senior/Emergency HC within 72 hours for a 3-month period<sup>7</sup>. Identifying an appropriate candidate from the L3 HC roster, the ToRs, reporting lines, and deployment modalities for the position are agreed<sup>8</sup>. The deployee may be a. senior to the RC/HC, b. deputy to the RC/HC, c. parallel to the RC in-country (as a separate HC)<sup>9</sup>. Other alternatives include the deployment of a Special Envoy or the nomination of a Head of Agency *in situ* to serve as deputy HC *ad interim*, pending the deployment of a Senior/Emergency HC or Deputy from the L3 HC roster
2. The empowered leadership model is automatically applied, allowing the HC to take decisions on behalf of the HCT where there is no consensus, to have quick access to all information on the nature of the crisis, the needs, and the response, and to better support the accountability of all partners for the response, including for results, performance and to affected populations.<sup>10</sup>
3. The L3 activation also triggers the deployment of the Inter-Agency Rapid Response Mechanism (IARRM) within 72 hours, to support/augment in-country capacity and fulfil key coordination functions<sup>11</sup>. Specific decisions on IARRM deployments take into account existing capacities on the ground, and the core team is activated on a ‘no regrets’ basis<sup>12</sup>.
4. The core coordination functions to be filled/augmented through the IARRM include<sup>13</sup>:
  - (a) Senior OCHA staff to provide dedicated coordination support to the office of the HC
  - (b) ‘L3 capable’ senior Cluster Coordinators of all clusters, and corresponding support staff

<sup>5</sup> Every effort will be made to reach consensus on activation but the ERC will have the final decision. The activation period will vary but should not exceed 3 months initially.

<sup>6</sup> While this decision commits each organisation to agreed procedures, and to deploying the resources and capacity required, it does not prejudice their decision to activate *internal* agency-specific procedures.

<sup>7</sup> Using a checklist developed by OCHA to facilitate decision-making and deployment

<sup>8</sup> If the person is senior to the RC/HC, or a UN DPKO/DPA mission exists, the UNDG Chair and SG are consulted.

<sup>9</sup> All costs related to the initial 3-month deployment of the Senior/Emergency HC will be borne by OCHA., including salary costs (and related entitlements), travel costs to/from the location of the assignment and other support costs

<sup>10</sup> The empowered leadership model applies to anyone holding HC responsibilities during the initial 3-month response period, whether an existing RC who has been temporarily assigned HC responsibilities, a new HC who has been deployed in parallel to an RC, a Head of Agency *in situ* as deputy HC a.i., or an L3 roster deployee

<sup>11</sup> Noting that agency-specific and UNDAC team deployments may have already commenced.

<sup>12</sup> Agencies deploy experienced staff to fulfil core coordination functions immediately, without waiting for details on exact needs and response plans, and decide at a later date to withdraw surplus staff as required.

<sup>13</sup> Where this capacity is not already in place

- (c) 'L3 capable' senior coordinators for logistics and other common humanitarian services
  - (d) 'L3 capable' senior NGO personnel to mobilize civil society
  - (e) Coordination support capacity for up to 5 major sub-national hub/sub-office(s)
  - (f) Needs assessment capacity to support the initial strategic plan and the Flash Appeal
  - (g) Dedicated support for information management within OCHA and clusters.
5. The L3 activation commits the Principals to agree on common advocacy priorities for the humanitarian system and common messages for the ERC's communication strategy.

The ERC approves an initial CERF allocation of between \$10-20 million.

### **Field Level - Step 1: Immediate Response**

1. HCT is convened or (if none exists) is automatically established, under the leadership of the HC, with the existing RC re-hatted as HC a.i. pending HQ decision on the most appropriate leadership model.
2. The first phase of the MIRA (Multi-Cluster Initial Rapid Needs Assessment) is immediately implemented (if necessary remotely), to collect initial data for the PSD, which forms the basis of the strategic framework for the overall response.
3. The HC, with OCHA support, and in coordination with the HCT, assumes responsibility for:
  - (a) assessing the situation, identifying the scale and nature of the priority needs, analyzing the capacity of national authorities and civil society to respond;
  - (b) ensuring as a priority that lives are saved and life-saving assistance/protection is provided;
  - (c) establishing appropriate coordination mechanisms - with the HCT, deciding which clusters to establish and which organisations have the capacity and expertise to lead them<sup>14</sup>;
  - (d) informing the ERC of the proposed coordination arrangements;
  - (e) mobilizing the humanitarian community to deliver an effective response to identified priority needs, incorporating early recovery elements from an early stage;
  - (f) leading the elaboration and implementation of a common strategy to secure access to enable the delivery of humanitarian assistance
  - (g) agreeing on the regularity and content of initial information updates; and
  - (h) determining common advocacy messages for national authorities, donors, & media.
4. The HC leads the strategic planning process with the HCT, producing within 5 days an initial strategic plan which<sup>15</sup>:

<sup>14</sup> In accordance with guidance on cluster activation, noting that coordination mechanisms should take into account the specific field context and pre-existing coordination mechanisms

<sup>15</sup> If a Senior/Emergency HC is being deployed, the existing leadership (ex. RC) leads the initial strategic planning process, handing over to the Emergency HC on his/her arrival.

- (a) indicates the overall strategic direction and scope of the response, based on the outputs of the PSD and pre-existing analysis, in consultation with national authorities;
- (b) prioritizes strategic objectives for the first 3 months of the response; and
- (c) identifies limitations of the response (capacity and resources), and strategies to mitigate key challenges (access, security, capacity gaps).

### **Field Level - Step 2: Ongoing Response**

1. The HC leads the development of more detailed, operational level joint planning, expanding the initial strategic plan and developing the Flash Appeal within 7-10 days<sup>16</sup>. The process includes:
  - (a) outlining priorities across sectors, specifying caseloads, needs identified, interventions required, and roles and responsibilities, in consultation with national authorities;
  - (b) approving cluster strategies and objectives, and based on recommendations by the clusters and HCT, approving or rejecting projects proposed for incorporation in the Flash Appeal;
  - (c) defining key performance indicators against which the HC, the HCT, clusters, and operational partners are held accountable; and
  - (d) developing a common monitoring framework, including core cluster indicators.
2. The HC, in close collaboration with the HCT, is subsequently responsible for:
  - (a) monitoring the achievement of strategic plan targets, maintaining the Humanitarian Dashboard, and revising the Flash Appeal after 30 days;
  - (b) taking steps to address non-performance (at HCT, CLA, and cluster levels);
  - (c) ensuring the coherence of information, establishing appropriate information management mechanisms to systematically inform HC/HCT decision-making;
  - (d) ensuring adherence to common reporting formats, including situation reports;
  - (e) and leading the process of analysis and information dissemination to target audiences, and developing common advocacy strategy and key messaging.
3. The HC is also responsible for ensuring that resources are used efficiently, and leads the resource mobilization and allocation process in line with the strategic plan. The HC:
  - (a) approves projects to be funded by the immediate L3 CERF allocation by the ERC (within 72 hours), in line with the initial PSD outputs and initial strategic plan priorities;

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<sup>16</sup>If the sudden-onset L3 emergency is a sharp deterioration of a pre-existing chronic crisis, then the existing strategic plan (as incorporated in the CAP) is revised accordingly. If the L3 emergency is a discrete new sudden-onset, unrelated to the ongoing chronic crisis in the country, the CAP will eventually be revised to incorporate the key strategic elements of the response, but in the interim, two separate strategic plans (and a CAP and Flash Appeal) may co-exist. If the new L3 emergency is *not* preceded by a pre-existing chronic crisis, but the response is likely to continue for more than one year, then the strategic plan will eventually be transformed into a CAP

- (b) determines funding priorities for subsequent CERF request(s) and ensures an inclusive and transparent process with clusters to review critical needs and implementation capacity;
  - (c) decides which activities to prioritize for pooled fund allocations, how to re-allocate unutilized funds, and whether to suspend allocations to non-critical activities; and
  - (d) based on agreed priorities, leads advocacy with donors to mobilize resources
4. To function effectively as ‘empowered leader’ during the L3 activation period, the HC:
- (a) has full HCT and OCHA support, with clearly defined accountabilities, including CLAs reporting on progress towards cluster objectives and strategic plan commitments<sup>17</sup>; and
  - (b) is accountable to the ERC, and reports against one compact covering all responsibilities.

### HQ level - Step 3: Follow-Up/Support

1. ERC convenes an IASC Principals meeting within 7-10 days to review mechanisms at country level, in consultation with the field, and to decide whether adjustments are required<sup>18</sup>
2. Based on the defined duration of L3 activation (as per the IASC Principals’ decision), an exit strategy is developed in the 3 weeks following activation<sup>19</sup>.
3. IASC agencies constantly monitor field level response, offering additional support (technical expertise, supplementary coordination capacity, etc) as required, in consultation with the HCT.
4. IASC Principals expedite relevant procedures at HQ level to facilitate field response (including cluster activation, CERF allocations, Flash Appeal launch, replacement of non-performers, etc).
5. A Real-Time Evaluation is automatically triggered once an L3 emergency is declared, and an evaluation team is deployed to complete this process no later than 90 days after the declaration.

IASC Principals meet after 3 months to decide if the situation warrants further extension of the L3 response

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<sup>17</sup> While continuing to report directly to their own agency HQs, including on agency-specific issues.

<sup>18</sup> In terms of Level 3 activation, HC leadership, coordination structures, and strategic/operational issues.

<sup>19</sup> The strategy should include whether leadership arrangements will continue and/or transition, a strategy to mobilize and deploy the required capacity to take over core coordination functions from the IARRM, and an agreement on how reporting lines, roles and responsibilities will be defined at the end of the activation period.