eisf

# Crisis Management of Critical Incidents

EISF Briefing Paper

## Disclaimer

# Contents

# Foreword

The two EISF Briefing Papers entitled *Crisis Management of Critical Incidents* (April 2010) and *Abduction Management* (May 2010) should serve as reference documents for reflection on how to improve the prevention and management of critical incidents within the humanitarian sector. They benefit from the knowledge and experience of a wide range of organisations, experts and victims.

The papers are intended for those responsible for and involved in the management of critical incident and crisis management mechanisms within humanitarian agencies. However, all organisations deploying and contracting employees in environments where the infrastructure to deal with critical incidents is limited or unreliable, should find them valuable.

Prevention is key. By establishing robust crisis management mechanisms you can optimise preparation and reduce the risk of an incident occurring, or diminish its impact.

Crisis management is both an art and a science. Best practice is constantly evolving in response to the changing humanitarian environment. We would therefore be grateful to receive your comments and feedback, to ensure the Briefings are kept up-to-date and improved on where we can.

Every success,

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# Introduction

Safety and security incidents are a daily reality for aid and development workers. By default, deployment of staff to remote and often insecure areas lacking basic infrastructure, implies acceptance by humanitarian organisations that incidents may occur. Instances in which staff are threatened or experience serious harm are commonly referred to as critical incidents. A small percentage of critical incidents may become crises: those requiring an immediate, dedicated organisational response beyond the scope of in-country contingency planning and management structures.

Such crisis situations fortunately remain rare, yet instances are rising, particularly in an expanding group of contexts including Afghanistan, Pakistan, Sudan and Somalia, among others.[1] Establishing and maintaining capacity to adequately respond to incidents is thus increasingly a priority for aid organisations.

This EISF Briefing Paper focuses on preparation for **responses to critical incidents constituting crises**. As is the case for all risk management mechanisms, a one-size-fits-all template for incident response does not exist: crisis plans must be tailored to organisational structures and capacities. The purpose of this document is thus not to prescribe a blueprint for crisis planning, but to emphasise the importance of robust crisis response capacity as part of a comprehensive security risk management system. The essential facets and mechanisms required in designing such a plan are also outlined here.

Abduction is by far the most complex type of critical incident an agency may be confronted with. Whilst the essential pillars of effective crisis response apply to abduction management, its complexities require a more specialised response and thus warrant specific consideration and preparation within an overall crisis response plan (training, expertise, protocols, etc.). Characteristics of abduction incidents and tenets of abduction management are addressed in a separate EISF Briefing Paper on *Abduction Management*.[2]

**The contents of this document are intended to serve as general guidelines only. They are not prescriptive, nor do they set any standard or norm required for the successful resolution of crisis situations.**

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**1** Abby Stoddard, Adele Harmer and Victoria DiDomenico, 2009. *Providing aid in insecure environments: 2009 Update.* HPG Policy Brief 34 (April).
**2** To be published in May 2010.

# 2 Definitions

A standard lexicon for incidents requiring a specific organisational response, the management of this response, and appropriate plans and protocols, has not been agreed amongst humanitarian NGOs. Irrespective of the varied terminology in use across the sector, such a vocabulary should be well defined and consistently applied throughout an individual organisation's crisis response documentation and management.

Definitions of the terms used in this Briefing Paper are as follows:

A **crisis** is an event that significantly disrupts normal operations, has caused or is likely to cause severe distress or have severe consequences for individual staff or organisations, and requires out of ordinary measures to restore order and normality, thus demanding immediate action from senior management. Crises can come in various forms, and include events threatening an organisation's reputation, image, programmes, assets, financial stability or the safety and security of its staff. In this last case, a crisis may be precipitated by a critical incident.

A **critical incident (CI)** is an event or series of events that seriously threatens the welfare of personnel, potentially resulting in death, life-threatening injury or illness. Most critical incidents – although they may have potentially severe impacts on individual staff and programmes – do not have wider implications for the organisation as a whole and are thus managed by regular management structures, with additional support from headquarters if required.

**A critical incident or series of such incidents becomes a crisis when its nature, severity or broader consequences for an organisation warrant a response beyond the capacity of routine programme management mechanisms, i.e. requiring leadership and coordination from senior management level.**

Critical incidents frequently constituting crises include but are not limited to:[3]

- Abduction, kidnap or hostage-taking

- Murder or death in suspicious circumstances

- Incidents causing multiple casualties and requiring urgent response (medical, operational, psycho-social)

- Arrest or detention

- Other security situations or events causing a high degree of threat to staff

- Complicated or large-scale evacuation, or medical evacuation ("medevac")

When such incidents occur, special structures and policies may be activated to supplement regular management capacities.

A **Crisis Management Team (CMT)** manages a crisis situation at headquarter (or regional) level. A CMT is activated when a critical incident or any other situation is determined to be a crisis by senior management. The composition and role of a CMT differs according to the type of crisis.

An **Incident Management Team (IMT)** manages a critical incident at country level. In the case of a critical incident constituting a crisis this will occur under the direction of the CMT. IMTs may also be formed in cases of incidents not constituting crises, where they will operate under regular management structures.

A **Crisis Management Plan** describes mechanisms, responsibilities and protocols to be activated by an organisation in the event of a crisis.

This Briefing Paper focuses upon the management of crises precipitated by critical incidents. Crises can be caused by other events – for instance, an NGO may experience a financial crisis due to its major donor countries suffering economic recessions – but these are beyond the scope of this paper.

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3   Note that the types of incident listed here do not automatically constitute crises. For example, the abduction of a national staff member may be managed within the regular management line (with additional support from headquarters) if all stakeholders are present in the area of operation and wider implications for the organisation are minimal.

# 3 Rationale and Objectives

The objective of crisis preparedness is to mitigate the impact of an incident. Since the quality of crisis response has potentially significant influence over an incident's outcome, it should be regarded as fundamental to the humanitarian risk management system. Strong capacity for crisis response and preparedness is necessary in order to:

1. **Prevent (further) harm and ensure the health and/or safety of victim(s) and other staff affected by the crisis.**

   The first hours following (the onset of) a crisis are often the most crucial, rendering instant reporting, a clear division of roles and responsibilities, and fast decision-making an absolute necessity.[4] This requires **comprehensive preparedness**: protocols and flowcharts in place, and relevant staff trained and available.

2. **Assure families of victims and agency staff of a responsible and effective response.**

   Obtaining and maintaining the confidence of families of victims is important in terms of establishing good relations and making sure all stakeholders are "on board" during and after the incident. This naturally also applies to agency staff.

3. **Ensure continued organisational management and output during the crisis.**

   Crisis management, especially for enduring incidents (for example, abductions), is resource-intensive. Crisis planning and preparedness will mitigate the risk of unnecessary distraction of senior management, thus contributing to the ability of agencies to continue functioning.

4. **Ensure programme continuity.**

   In addition to mitigating the impact of a crisis on organisational management, good crisis preparedness contributes to the ability of agencies to continue programme activities during a crisis and/or re-start operations in its aftermath.

5. **Fulfill organisational responsibilities and reduce the risk of litigation/liability claims.**

   Contractual obligations and related litigation risks vary by country, since they are subject to national legislation. Agencies must ensure that they are fully aware of relevant legal labour frameworks, including those for national staff in each country of operation.

6. **Safeguard organisational image and reputation.**

   Inadequate crisis response, or perceived mishandling of a crisis (in the eyes of media and/or family), can negatively affect organisational image, with myriad consequences in countries of operation and at the international level (fundraising, recruitment, etc.). Again, a strong and professional crisis response will help to mitigate this risk.

A **caveat**: safeguarding organisational reputation, while an important consideration, should never take precedence over the safety and well-being of staff, which remains the primary objective of crisis management within humanitarian agencies.

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4    For example, in urgent medical emergencies, or when the security situation requires immediate evacuation of staff.

# 4 Crisis Management Planning

As explained in Section 2, not all critical incidents require a formal crisis response. At country level, critical incident preparedness is part of the Country Security Management Plan.[5] At headquarter level – which will be activated when a critical incident is determined to constitute a crisis – critical incident response planning forms part of the organisational Crisis Management Plan. This section outlines the dimensions of such crisis management planning.

## 4.1 Organisational Responsibility

Agencies must determine the level of responsibility they are prepared to accept for all categories of staff: contracted staff, seconded staff, volunteers, consultants, staff of partner organisations, national and international staff.

First and foremost, organisational responsibility with regard to crisis response is determined by the relevant contractual and labour law frameworks, which outline legal responsibilities carried by the employer. These vary by country. In addition, agencies should be explicit about whether and to what extent they will accept security responsibility (including crisis response) for individuals for whom they have no legal responsibility but may have a moral duty.[6] Lastly, agencies should ensure that these responsibilities are communicated to relevant staff and partners, to curb unrealistic expectations and potential liability issues. This can be achieved by including discussion of crisis response in pre-deployment briefings, security workshops in the field, contracts, and other relevant formal agreements (for example, a Memorandum of Understanding with partners).

## Insurance

Adequate insurance policies (health, medevac, life, disability, etc.) are a key component of critical incident response preparedness. The main purpose of such policies is to:

- Fulfill legal and contractual obligations carried by the employer
- Manage organisational financial risk
- Provide clarity for victims, families and managers during crisis response[7]

## 4.2 Crisis Management Plan

The purpose of crisis response preparedness is to create and maintain organisational ability to adequately respond to and manage a crisis. Whilst every incident is unique and will require a tailored response, it is paramount that essential capacities are in place before an incident occurs, to enable an agency to adequately manage the situation in real-time.

These capacities are stipulated in Crisis Management Plans, which specify:

- Definitions of various types of crisis
- Decision-making structures for activating (and terminating) formal crisis response mechanisms, illustrated by flowcharts for communication and decision-making
- Roles and responsibilities of the key actors (senior management, CMT, IMT)
- Protocols and formats (medevac protocol, abduction protocol, attainability protocol, incident reporting format, logbook format, checklists, etc.)

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5   Critical incident response planning and management at country level fall outside the scope of this Briefing Paper.
6   For example, if an INGO considers an area too insecure for its own staff and hence chooses to fund/support another agency willing to accept a higher level of risk.
7   For instance, to avoid discussions about the costs of a charter plane delaying an urgent medical evacuation.

As Crisis management plans are (hopefully) rarely used, particular attention should be paid to enforcing maintenance of the plans, and interactive testing at frequent intervals. This would normally include:

- Regular training (including simulation exercises) for relevant staff on their roles and responsibilities. **Practising crisis response at regular intervals is strongly recommended** in order to familiarise CMT members with crisis plans, enhance CMT team dynamics, allow disagreements amongst team members to surface within a safe environment[8], and identify weaknesses in crisis plans.

- Reviews carried out after each crisis (i.e. internal lessons-learnt workshops, or external evaluations)

- Regular updates of protocols, flowcharts, checklists and phone numbers as required (see **Annex** for more details)

### 4.2.1 Key Pillars of Crisis Response

For appropriate response to and management of a crisis, it is essential that a number of key facets are in place and managed professionally:

- Communications and Reporting

- Crisis Management Team (CMT)

  - Management of the crisis and relevant operations as required

  - HR and family support

  - Media management

- Post-Incident Follow-Up

### 4.2.1.1 Communications and Reporting

Time is of the essence in crisis response. Since timely and appropriate decision-making and reaction often impact on the development or outcome of a crisis, it is essential that reliable means of communication (hardware) are in place. Robust communications protocols, including a "24/7 HQ On-Call Protocol", are also key to ensuring that the occurrence of an incident is communicated to relevant managers without delay.

The quality of information shared is as significant as the speed of information flows. In the wake of an incident, information may be sketchy, and facts may mingle with unconfirmed information or speculation. Incident reporting formats aid the collection and reporting of information in a systematic fashion. Detailed record-keeping, to allow thorough analysis during and after the incident, is also essential (see **Annex**).

### 4.2.1.2 Crisis Management Team (CMT)

CMTs form the core of Crisis Management Plans. A CMT is automatically activated when a critical incident is classified as a crisis by senior management (see Section 2). CMTs are exclusively dedicated to the successful resolution of crises, and usually operate outside of regular management structures: the Head of a CMT reports directly to senior organisational management[9]; CMT members report to the Head of a CMT rather than their regular line managers.

The composition and functioning of a CMT should be defined by the following key characteristics:

- As small as possible yet including as many areas of expertise as is necessary to allow for fast decision-making and information flows, and efficient information management

- Diverse expertise, namely: Operations (context and incident management), HR (including psycho-social support), and Communications/Media. Input from other disciplines should be sought as required, although these are not normally permanent CMT members

- Ability to implement decisions; a problem-solving, "can-do" attitude

- All members are able to fulfil their respective roles and responsibilities (experienced, fully-trained and available[10]), which are clearly delineated

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8   Disagreements may result from confusion or disagreement about the decision-making process within the CMT, the level of information to be shared within the Team or the wider organisation, or from personal rivalries.
9   CEO, Senior Management Team, Board, etc.
10  Availability refers to being present at headquarters as required, including after office hours and at short notice.

## Responsibilities

The scope of CMT responsibility should be clearly defined in Crisis Management Plans. Agencies should determine the extent of CMT authority in accordance with their respective management structures and philosophies. It is, however, strongly advised that capacity for fast decision-making is in no way compromised. Since managing a crisis may conflict with operational objectives and activities in a context/country, CMTs should also be given authority over regular in-country management structures.[11]

Key responsibilities of CMTs include:

- Operational decision-making concerning the crisis and the affected mission

- Defining and implementing a crisis response strategy in consultation with senior organisational management

- Authority to ensure implementation of defined strategy, including staffing and directing the IMT

- Defining and implementing a media strategy

- Managing family support and liaison

- Managing the internal information policy

- Consulting with all relevant internal and external stakeholders

- Managing crisis information (collation, analysis, distribution, storage)

- Defining the moment that the crisis ends, dismantling the CMT, and handing-over to regular management structures (in consultation with senior organisational management)

## Composition

CMT members are pre-identified based on their disciplines and competencies, and should receive relevant crisis management training. Every CMT member should have at least one shadow/replacement to ensure presence at headquarters when the primary CMT member is unavailable due to leave, illness, field visits, etc. Replacements are also crucial for operating rotation systems during long-term crises such as kidnaps. Replacements must also be pre-identified for the regular roles of CMT members, to guarantee continued functionality of the organisation during a crisis.

The composition of a CMT may vary depending on the type of crisis, but should always include:

- **CMT leader**: In charge of crisis management and accountable to senior management

- **Human Resources**: HR issues, family liaison and support

- **Media and Communications**: Implementation of media strategy

- **Assistant**: Minute taking, logbook keeping and other tasks

Depending on the type of crisis, input and expertise may be sought from:

- Head of operations in the country concerned

- Context specialists

- Security specialists

- Medical specialists

- Legal specialists

- Logistics specialists

- IT specialists

## Location

For many organisations, the most obvious and suitable location for a CMT is the head office. However, agencies with a decentralised structure may choose to establish CMTs in regional offices, or alternatively to include regional staff in a head office-based CMT by virtual means. Decisions about where to create CMT capacity will be based on the following criteria:

- Regular working locations of CMT staff

- Length of communication lines (between head office and the field)

- Proximity to senior management and other key stakeholders (family, media, national governments) for communication and coordination purposes

- Infrastructure (office space, reliability of means of communication)

- Time difference between the CMT and the incident location

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**11**   For example, when incidents involving the detention of staff require strong advocacy that could strain long-term relations with national governments.

**4.2.1.3 Incident Management Team (IMT)**

Composition of an IMT is case-specific, but members are usually drawn from existing coordination teams. Depending on the scale, severity and complexity of an incident, as well as management capacity at field level, CMTs may opt to deploy additional crisis management staff to support or coordinate.[12] The potential psycho-social impact exerted on team members by incidents should also be taken into account when assessing field incident management capacity.

Common tasks undertaken by an IMT include:

- (Temporary) suspension of activities

- (Medical) evacuation of staff and repatriation of deceased persons

- Liaison with local and national authorities, embassies, aid agencies, and other relevant actors

- Support to families of national staff victims

- Management of local media

- Support to affected project and mission staff (including psycho-social support)

- Immediate revision of risk analysis in light of the incident.

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**12** For countries with long visa processes, agencies may consider ensuring that crisis support staff are always in possession of a valid visa, to allow for rapid deployment.

# 5 Crisis Management

Crisis response should be guided by a comprehensive set of flowcharts and protocols, which guarantee that the appropriate mechanisms are activated in a timely fashion.[13] The severity and type of incident will determine the shape of the response, specifically: whether the crisis management mechanism is to be activated, or alternatively the incident can be managed through regular line management structures; and which set of protocols are to be applied. These decisions must be taken immediately after an incident is reported.

## 5.1. Operational Response

Due to the nature of crises, their management usually requires a more centralised decision-making structure than regular operations. Thus, in accordance with the mandate issued by senior management, a CMT is responsible for directing operational response and strategy. The role of an IMT – whilst it will of course participate in decision-making due to its detailed knowledge of context, incident details and other practical issues – is therefore primarily an implementing one.

The type of incident – medical evacuation, abduction, repatriation of deceased persons, traumatic events, general crisis response – will dictate which protocol is to be applied. The CMT leader, who manages and coordinates the incident response, should ensure that decisions and directives are communicated in an unambiguous and timely fashion, and oversee the implementation of decisions as well as adherence to the relevant protocol(s). Taking control and responsibility, rationalising the incident, and providing a "structure" for the incident response, the CMT leader may also have a calming influence on the affected team in-country, enabling them to better fulfil their respective roles. Amongst the skills, abilities and traits associated with crisis management and leadership, are perspective-taking and the promotion of a mindset of resilience within staff.[14]

During the first hours after the onset of an incident, the focus is on preventing further harm for victims and other affected staff, obtaining and confirming essential facts, establishing internal information flows (phone numbers and frequency of contact), setting in motion procedures to inform next of kin and other relevant actors, carrying out a stakeholder analysis and, if warranted, agreeing on a media strategy.

The duration of a crisis may influence, but is not equal to, the length of the actual event. The event of an accident or violent robbery ends even before the incident is reported, but the impact may warrant a lengthy crisis management response, such as emergency medical assistance, psycho-social support, evacuation or repatriation. Detention/arrest and abduction are "live", ongoing events, the duration of which is unknown. Outcome scenarios should be contemplated from the beginning of an incident. As crisis response at field level is resource-intensive, it may be necessary to temporarily downscale or suspend other in-country activities to avoid over-stretching field management capacity, and ensure that a thorough review of the risk assessment is conducted before full programme activities are resumed.

Other actors may be part of, or leading, an operational crisis response, as is the case in large-scale evacuations organised by the UN, embassies or the military. This should not induce a passive, reactive approach: agencies should ensure that they retain an appropriate level of decision-making, influence and access to information. Thus, strong coordination and communication channels to relevant actors must be established immediately.

Decisions about when to formally declare an end to a crisis, dismantle a CMT and revert to normal management structures are dependent upon circumstances as well as the capacity of regular structures. For example, a CMT may retain responsibility for arranging a safe and comfortable return home for victims and staff involved, especially if media attention is anticipated and/or active media work planned.

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13 Separate protocols should be designed for medevac and abduction, as these incidents require very specific procedures.
14 See Lynn Perry Wooten and Erika Hayes James, 2008. Linking Crisis Management and Leadership Competencies: The Role of Human Resource Development. *Advances in Developing Human Resources*, 10 (3/June), pp.352-79.

### 5.2. Human Resources Management

Human Resources management responsibilities can be grouped into three categories:

- Administration
- Family support (liaison and psycho-social support)
- Staff support (psycho-social support for incident managers and other affected staff)

Each of the above categories plays an important role throughout the entirety of crisis management, and during the post-crisis follow-up.

### 5.2.1. Administration

Robust administrative support is required in crisis response and during the aftermath. As soon as a crisis is reported, administrators should retrieve files related to personnel, provide details of named emergency contact persons, and relevant details of victims (for example, passport details). Insurance and contract details should also be checked. Depending on the type of incident, administrators may also be required to liaise with insurance companies, support international (medical) evacuations or repatriation of deceased persons, and compile lists of (ex-)colleagues to be informed of the incident.

### 5.2.2. Family Support

How swiftly and through which means named contact persons of victims (most often, but not always, family members) should be informed, depends largely on the severity of the incident and whether it is likely to be reported in the media.[15] It may not be necessary to immediately communicate a late night incident that does not make news headlines, and does not result in severe physical harm to victims; less stress may be caused if contact persons are informed by victims themselves on the following morning.

If an incident causes significant harm to staff, a face-to-face meeting will be the preferred method of communicating difficult news clearly and compassionately. However, the benefits of this must be weighed against the implications, i.e. potential delay due to geographical distance. A situation in which next of kin/contact persons hear bad news via the media first should be avoided in all cases.[16]

With respect to delivering difficult news, the organisation itself is deemed the most appropriate messenger in many cases. However, social, cultural and personal circumstances may dictate that police, community elders, religious leaders and other authorities should be included in the process. Ideally, the bearer of bad news should be experienced in this or appropriately trained. If from the organisation itself, he/she should be a senior staff member.

Designated family liaison officers (FLOs) must be introduced to families as soon as possible. The type and frequency of contact between the FLOs and families will depend on the type of incident and the degree of uncertainty about the outcome, as well as personal preferences on the part of families.

Aspects to consider in family support include:

- Psycho-social support from the beginning of an incident
- Assistance in finding support for day-to-day practicalities (child care, shopping, etc.)
- Advice on information sharing (with media and other third parties)

Family attitudes and (re)actions are not static. Approaches may change during and after incidents as families experience changing emotions over time. The longer a crisis lasts, the greater the risk that an affected family will lose faith in an organisation's ability to adequately manage the crisis, and seek alternative options for resolution.

If an incident involves multiple victims, it is important to provide the same information to all families simultaneously, and to facilitate contact between families according to their wishes. Further, a good understanding of family dynamics and tensions should be built, so that any buffers to equitable information-sharing within the family unit are identified and, if necessary, multiple contacts (always sharing the same information) are made.

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15  In instances such as large-scale bombings and earthquakes that are rapidly reported in the media, it is wise to get in touch with named contact persons even if no member of staff has been affected. Reassuring family members of the well-being of the agency's staff will help to prevent unnecessary distress.
16  Regardless of how families/contact persons are initially informed, a visit should be arranged as soon as possible.

### 5.2.3. Staff Support

Staff witnesses to an event, staff who are close to victims or who are otherwise affected by an incident, as well as members of IMTs, may require psycho-social support during or after the incident. Additionally CMTs should have access to professional psycho-social support structures offered by the organisation. If such structures do not exist internally the identification of external support should be a part of crisis preparedness planning.

### 5.3. Media Management

Media reporting can have a significant impact on how a crisis develops (particularly in abduction and detention cases), and therefore on (often enduring) perceptions of an agency. Hence, media management is a key priority in "high profile" crises that are likely to trigger media interest at national and/or international level.

A media strategy cannot be defined in isolation, since it must support the operational strategy of a CMT. In the majority of cases, a low-key approach will be adopted. The incident circumstances will determine whether, how fast, and which information about the incident will be accessible to the press. However, from a crisis management perspective it is generally advisable to keep the media at arm's length to contain the situation effectively, and to protect victims and their families. This can be achieved through reactive Q&A sessions, or brief press statements simply acknowledging that an incident has happened. Agencies are advised to develop a set of general "off the shelf" media lines as part of their crisis response planning.[17] If warranted by media interest and an agency's media strategy, designated spokespersons should be appointed to whom all media enquiries can be referred.

The following measures are sensible during most crises (regardless of the level of media interest):

- Instruct field staff not to speak to the media

- Contain "info-leakage" by briefing staff on what information they can and cannot share with friends, families and colleagues

- Monitor (national and international) media reporting on the incident

- Remain acutely aware of, and try to influence, relationships between the various stakeholders and the media

### 5.4. Information Sharing with Other Stakeholders

Aside from families and the media, meticulous management of the identification (and potentially the control) of information flows to other stakeholders is essential. There is an inherent tension between demands for updates made by stakeholders, and the general principle of "inform on a need to know-basis".

The timing of initial notification, identification of focal points, frequency of contact and level of detail of the information to be shared, must be carefully balanced in order to prevent unnecessary delays, unhelpful speculations and frustrations. Grouping stakeholders into concentric "information circles" can be a useful tool: those who require full knowledge will be at the centre of this diagram, with stakeholders requiring less and less information in circles in increasing distance from the centre, and those requiring the least information (for example, the press) at the circle's outer edge.

Common stakeholders include:

- Families and the media (see above)

- Staff in the affected mission

- Friends and ex-colleagues of victims

- Employees (senior management and support staff in the affected programme area)

- Senior organisational management

- Relevant local and national authorities

- Community leaders and beneficiaries

- Relevant embassies

- Other aid agencies

- Insurance companies

- Home governments of victims

- Institutional donors

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**17**   Proactive media strategies may be chosen when public pressure and advocacy are considered instrumental to the successful resolution of an incident.

# Post-Crisis Follow-Up

Although the extent is dependent on incident type, all crises require some degree of follow-up.

## Aftercare

Agencies should ensure that victims, family members, colleagues who are witnesses to a critical incident, others who may be psychologically affected by the incident, and crisis managers, receive appropriate aftercare. This entails psycho-social and practical support (i.e. additional paid leave, or special considerations during the next deployment), and administrative follow-up (insurance, contractual issues). The appointment of a case manager may facilitate and streamline coordination of the aftercare process.

## Debrief and Evaluation

A thorough operational debrief is necessary for crisis managers and incident victims. This facilitates proper analysis of the incident, and a review of quality in the crisis management, thus fostering good institutional memory. Debriefing should be well-documented, and lessons learnt should feed into a review of crisis response planning.

## Information Management

Documents and electronic data related to the incident must be filed systematically and stored in a central location. All duplicates should be destroyed to avoid leakage and inconsistency at a later stage.

## Operational Implications

Crises are likely to alter organisational risk profiles in the contexts in which they occur. Perceptions, organisational image, relations with key stakeholders, and potentially organisational risk thresholds in particular contexts, may have shifted. Thus, a review of the risk analysis may be necessary.

## Follow-Up with External Stakeholders

It is vital that organisations make provisions for the extension of gratitude to all relevant actors for their efforts in helping to resolve incidents.

# Checklist

## General

✔ Crisis response plan updated and distributed to relevant players

✔ CMT members, including shadows/replacements, identified

✔ CMT training/workshops conducted at regular intervals and roles and responsibilities of CMT members clearly delineated and well understood

✔ Mechanism in place to ensure presence at headquarters of at least one CMT member of each discipline at all times

✔ 24 hr access to office possible

✔ Office space and equipment (computers, printers, phones, video conference, etc.) available

## Protocols, Flowcharts, Formats

✔ 24/7 On-Call protocol

✔ Decision-making flowchart

✔ Crisis response Protocol for Operations, Human Resources, Communications/Media

✔ Specific protocols for:
  • Medical Evacuation (medevac)
  • Repatriation of Deceased
  • Abduction Management
  • Sexual Gender-Based Violence incidents
  • Traumatic events

✔ Logbook format

✔ Incident report format

## Human Resources Management

### Personnel file

✔ Contact details of next of kin and emergency contact persons

✔ Contracts and insurance policies

✔ Health Information Form (including blood type, chronic illnesses, allergies, medications, etc.)

✔ Proof of Life (abduction-specific)

✔ Access to passwords for online social networking sites

### Other

✔ Staff available to act as family contact person

✔ Psycho-social capacity available at short notice

✔ Specific briefings for staff deployed to high risk countries

# Decision-making flowchart

Flowcharts must be tailored to an organisation's management structure. The model below is therefore simplified, reflecting only major steps in the initial decision-making process.

**1. Field reports critical incident to HQ** (describe reporting chain in the field)

**2. HQ** (describe who receives incident report, whom the recipient must inform, and who decides whether incident constitutes a crisis)

**3. Decision on whether to activate the Crisis Management mechanism**

**YES**

Activate:

- **CMT**
- **IMT**
- **Relevant protocol**
- **Logbook**

**NO**

**Regular line management retains responsibility for incident management. Activate:**

- **Relevant protocol**

**Consider activating (incident-dependent):**

- **IMT**
- **Additional CI management support**
- **Logbook**

# 1st Critical Incident Report

| REPORTED BY | | | |
|---|---|---|---|
| COUNTRY | | | |
| PROJECT | | | |
| DATE | | | |
| EXACT LOCATION OF INCIDENT | | | |
| TIME OF INCIDENT | | | |
| CURRENT LOCATION OF VICTIMS | | | |
| IDENTITY OF DECEASED STAFF<br><br>NAME<br><br>NATIONALITY | 1 | 2 | 3 |
| IDENTITY OF WOUNDED STAFF<br><br>NAME<br><br>NATIONALITY | 1 | 2 | 3 |
| MEDICAL CONDITION OF WOUNDED | 1 | 2 | 3 |

## Incident Description

Describe incident details, including who reported the incident, witnesses and perpetrators, current security situation if applicable. Stick to facts (what you know at this moment).

## Decisions Taken

What action has been taken/is in process to prevent further harm to victims and other staff?

## Actions Proposed

Which steps need to be taken to prevent further harm to victims and other staff (medevac, evac, etc.)?

## Contact Details

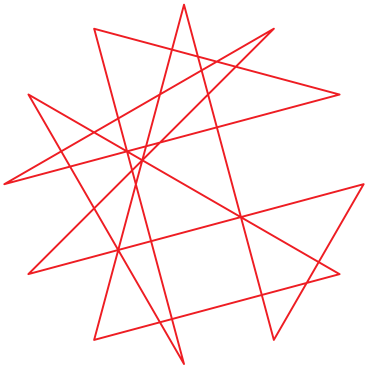List contact details (phone numbers, email addresses, locations) of key players (Country Rep, Field Coordinator, etc.)

## List of other staff in project location

# Logbook

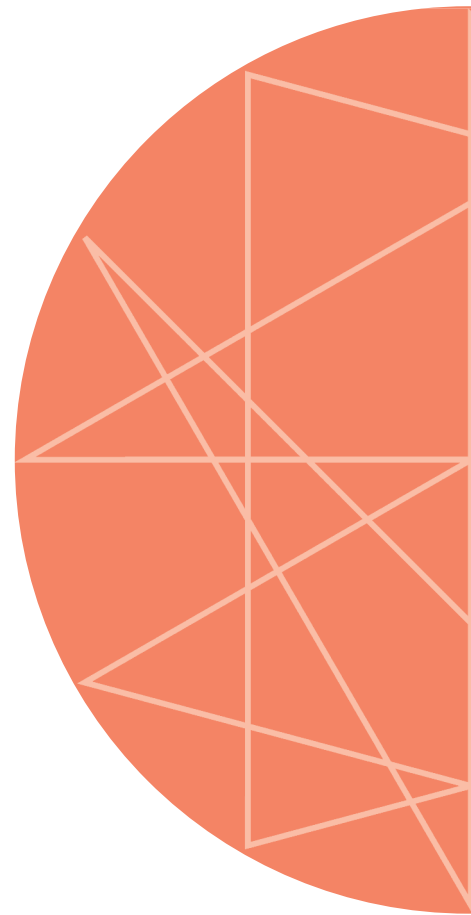| NO | DATE | TIME | EVENT (Meeting, Phone, etc.) | PARTICIPANTS | CONTENT | DECISIONS |
|----|------|------|------------------------------|--------------|---------|-----------|
|    |      |      |                              |              |         |           |

# eisf

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