



CONTINGENCY PLAN

Nepal : Monsoon flooding

May 2019



STRATEGIC SUMMARY

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1.26 million people

Affected population in 2019 based on historic trend analysis

Every year, during the monsoon period of June to September, communities in the Terai face heightened risk of flooding. This can lead to humanitarian suffering, exacerbate pre-crisis vulnerabilities and erode development gains.

This Humanitarian Country Team Contingency Plan is based on historical trend analysis which estimates that should flooding occur under the current forecast conditions, the total affected population will be 1.26 million. This represents the total population in the areas at risk of flooding. Each cluster has articulated their cluster specific population in need, targeted and priority for their interventions as shown in table below.

Cluster	In need	Target	Priority
Shelter	189,000	81,900	40,000
Health	1260000 <i>+ host community</i>	781,621	404,808
Food	900,000	550,000	300,000
WASH	450,000	350,000	200,000
Protection	580,000	488,873	106,266
Nutrition	255,000	126,236	100,988
Education	200,000	100,000	40,000
Early Recovery	63,000	35,000	15,000

The aim of this document is to strengthen preparedness planning in seven provinces with a focus on highly flood prone areas in the Terai.

This year, a 'normal' monsoon has been predicated for Nepal by the Department of Hydrology and Meteorology. Monsoon rainfall in 2019 in eastern Nepal is estimated to be below normal while western Nepal, it is likely to be normal. These average forecasts do not predict flooding, likely heavy rainfall or landslide possibility. This contingency plan is based on the responses should flooding occur under these conditions, revisions may be necessary as the forecast is updated.

To optimize the speed and volume of critical assistance in the aftermath of a flood the HCT has developed this document to:

- Reach a common understanding of flood risk and how to monitor potential flooding in the Terai to ensure early action is taken;
- Establish a minimum level of flood preparedness across eight core Clusters (Protection, Food Security, Nutrition, Health, Shelter, Water, Sanitation and Hygiene (WASH), Education and Early Recovery). Noting the significance of inter-Cluster support provided by the Logistics Cluster.
- Establish the parameters for a joint HCT response strategy. This aims to meet the needs of people in need of assistance in the first 30 days of a humanitarian emergency in support of the Government of Nepal;

SITUATION AND RISK ANALYSIS

1. Country Information and Context Analysis

Nepal is at high risk from multiple natural hazards. Analysis of past disaster events (covering the period 1971-2018) shows the principle hazards include earthquakes, floods, landslides and fires.

In April and May 2015 Nepal experienced two significant earthquakes of 7.8M and 7.3M which caused major loss of life and damage across central and western regions of the country. The HCT has developed a separate contingency planning document to support earthquake preparedness.

Since 1971 monsoon related hazards, principally floods and landslides, have caused on average 200 deaths per year. Economic losses during the monsoon period have averaged US\$10 million on an annual basis over the last 47 years. Most floods in Nepal occur during the monsoon season, between June and September when 80 per cent of the annual precipitation falls, coinciding with snowmelt in the mountains. Flash floods and the breaking of natural dams caused by landslides are common in the mountains. River flooding occurs when streams augmented by monsoon rains overflow in the Terai plains in the south of the country. These floods can go on to impact Uttar Pradesh, Bihar and West Bengal states in India as well as Bangladesh.

Nepal is generally categorized into three geographical zones – the Terai, Hill and Mountain areas. The Hills and Mountains are highly susceptible to landslides and debris flows, including those caused by landslide damming, excessive erosion of hill slopes and rock falls. The monsoon season leads to a spike in landslides and related mortality and morbidity in Hill and Mountain areas. The flat plains of the Terai are at high risk of flooding, which can be exacerbated by large disposition of debris in riverbeds and by the construction of embankments across rivers.

Some years are worse than others. In 2017 approximately 1.7 million people across the Terai were affected by monsoon floods including 169 deaths and 460,000 people temporarily displaced from their homes. Economic

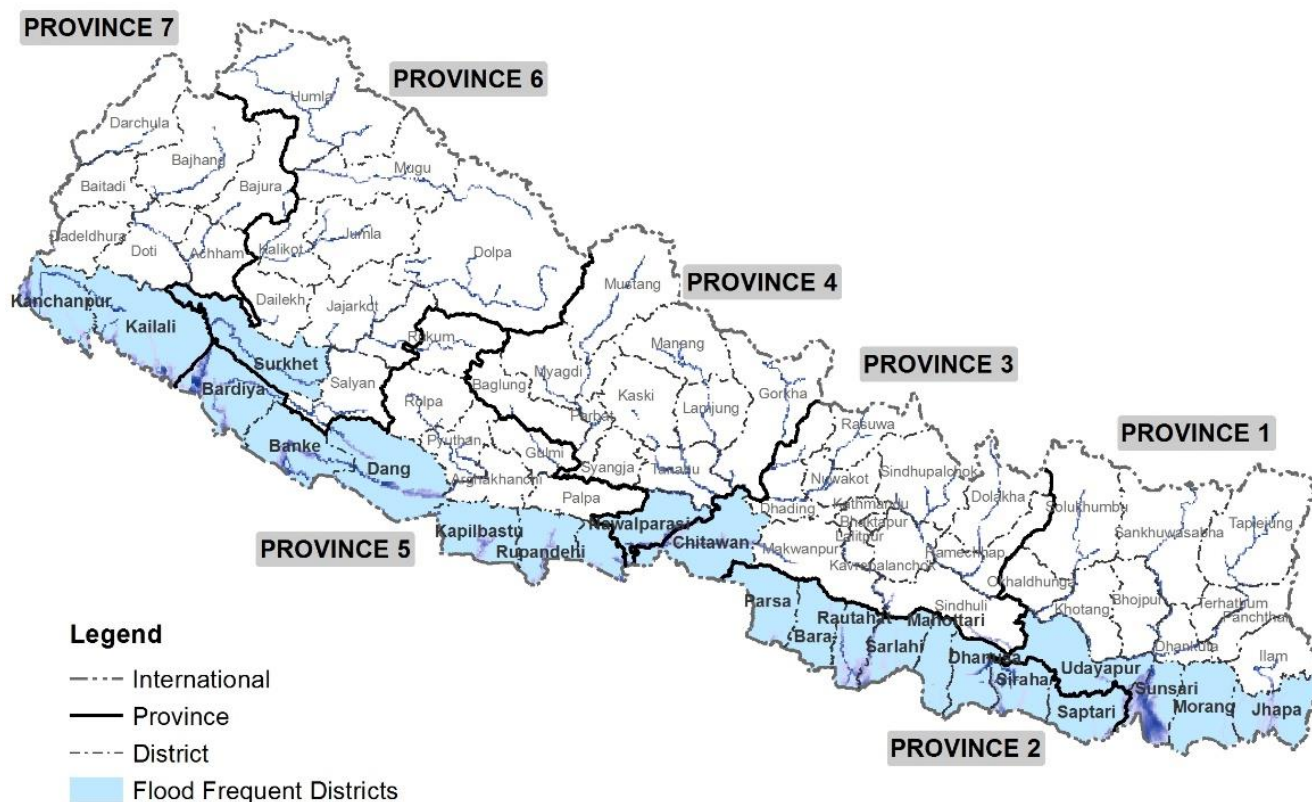
losses were significant and amounted to US\$705 million – greatly exceeding the annual average losses highlighted above. Areas of the Terai impacted by annual monsoon related hazards include some of the lowest performing areas of Nepal in development terms such as Saptari, Rautahat, Mahottari, Dhanusa and Siraha districts in Province 2.

The Ministry of Home Affairs (MoHA) is the focal lead agency for the Government of Nepal (GoN) in coordinating disaster preparedness and response. Through MoHA, particularly the National Emergency Operations Centre (NEOC), international and national organizations coordinate response efforts.

2. Summary of Risk

The HCT’s contingency planning efforts focuses on the annual hazard of flooding in seven provinces with a specific focus on highly flood prone municipalities, rural municipalities and metropolitan locations in the Terai. The HCT’s planning assumptions for 2019, which are based on a trend analysis of previous flood events, include:

Areas affected: Provinces 1,2,3,4,5,6 and 7 (Banke, Bara, Bardiya, Chitwan, Dang, Dhanusha, Jhapa, Kailali, Kanchanpur, Kapilbastu, Mohattari, Morang, Nawalparasi, Parsa, Rautahat, Rupendhi, Saptari, Sarlahi, Siraha, Sunsari, Surkhet and Udayapur).



Affected population: Approximately 1.26 million people.

'Worst-case' scenario disaster impacts:

- Houses destroyed and/or submerged under flood waters causing displacement both short and long-term. Schools and health facilities damaged and destroyed and related service provision impeded.
- Water and sanitation facilities destroyed leading to an increased risk of disease outbreaks both water and vector borne.
- Heightened exposure to protection risks for vulnerable groups including women, children, elderly and physically disabled persons. Specific social and disadvantaged groups are also exposed to increased protection risks during times of crisis.
- Agricultural livelihoods adversely affected as large areas of standing crops are flooded and destroyed. Significant numbers of livestock and poultry killed by flood waters in addition to fish ponds destroyed. This has knock-on consequences for food security and nutrition.
- Critical infrastructure including bridges, roads, airports and electricity and communication networks sustain major damage and in some cases are inoperable.
- Road links to India and specific sections of the Strategic Road Network in Nepal are rendered impassable.

3. Response & Operational Capacity

In September 2017 Nepal's parliament enacted the 'Disaster Risk Reduction and Management Act' no. 2074, which was amended on 3rd of March 2019. This establishes a National Disaster Risk Reduction Management Authority (NDRRMA) and sets out the nature of disaster risk management (DRM) in a federal context. The Act and the NDRRMA represent major developments in DRM in Nepal. Work is ongoing, led by the MoHA to operationalize the NDRRMA Act.

The MoHA is responsible for coordinating preparedness and response actions across Government ministries, with the security forces and humanitarian partners both domestic and international. Local governments and provincial governments all play highly important roles in preparedness and response. In addition, Chief District Officers (CDOs) retain the ability to mobilize the security forces for the purposes of preparedness and response actions.

In support of a GoN-led response, the HCT Principals is the strategic decision making and oversight forum and is led by the Resident Coordinator (RC). It includes Cluster co-leads, representatives from the Red Cross and international NGOs (INGOs) and donors. The MoHA will be invited to attend HCT meetings in 2019 should this contingency plan be triggered.

The HCT Principals is supported by the HCT Operational Group. The Operational Group, chaired by the head of the UN Resident Coordinator's Office (UNRCO), also includes donors, NGO and Red Cross representatives. As its name implies its focus is on issues of an operational nature.

The Association of I/NGOs (AIN) also provides a forum for INGO partners to coordinate and align response efforts.

In 2012, UNOCHA reduced its presence in Nepal, while remaining actively supportive through the Regional Office for Asia and the Pacific, based in Bangkok. The Resident Coordinator's Office has retained humanitarian coordination capacity with a small team based in the UN. At the same time, 11 Clusters transitioned to GoN leadership with support from cluster co-leads. These clusters are considered deactivated though they meet irregularly to undertake contingency planning. The clusters are activated by the GoN in the event of a crisis.

As agreed by the HCT Principals, immediate disaster response efforts will be supported by an Initial Rapid Assessment (IRA), conducted by the local governments, District Disaster Management Committee (DDMC), and the Nepal Red Cross Society (NRCS)

4. Gaps and constraints

Key identified gaps and constraints include:

Coordination

The new structures and administrative entities are likely to bring some coordination-related challenges.

Government ministries act as overall Cluster leads with UN and INGOs providing operational support in their respective Clusters. Cluster co-lead agencies continue to play a fundamental role in preparedness and it is expected they will play major roles in responses, particularly if international assistance is required.

Information Management

There is an abundance of disaster related data in Nepal which can be used to support rapid and informed humanitarian responses.

Information management in Nepal is streamlined through the Information Management Working Group (IMWG). This Group is responsible for compiling key datasets, agreeing to common sharing platforms and supporting the HCT groups on information management.

5. Triggers

The aim of this plan is to complement the role of the GoN as the overall lead on emergency response in Nepal. In the event of a disaster event the decision to trigger and initiate use of this contingency plan by the HCT Principals will be taken in close consultation with, and usually at the request of, MoHA. Any decision to trigger this plan must consider the primacy of the GoN as lead response actor.

The KINWG will support the HCT in deciding to trigger the ERP. The UNRCO will convene a meeting of the KINWG to assess rainfall and inundation data plus other information including from humanitarian partners and will make a recommendation to the HCT, Principals regarding mobilizing the ERP. Throughout the monsoon the UNRCO will regularly assess rainfall data and river monitoring information from the Department of Hydrology and Meteorology and other regional forecasts¹. Use of early warning data might enable this plan to be initiated ahead of a flood event occurring as a preparedness measure.

6. Planning figures for humanitarian assistance

The caseload for the 2019 monsoon season was calculated based on the Disaster Impact Model (DIM). The monsoon forecasts from a number of sources (DHM/GoN, RIMES) were used as a basis for developing the monsoon scenario. The flood inundation analysis and historical casualties' data (1971 to 2018) from different

¹ This includes the South Asian Climate Outlook Forum, the Regional Integrated Multi-Hazard early Warning System for Africa and Asia, the Global Flood Awareness System, among others.

sources were then analyzed using spatial and mathematical model to estimate the potential exposure risk population.

This analysis suggests an estimated caseload of approximately 1.26 million people across provinces 1,2,3,4,5,6 and 7 (with a focus on Banke, Bara, Bardiya, Chitwan, Dang, Dhanusha, Jhapa, Kailali, Kanchanpur, Kapilbastu, Mohattari, Morang, Nawalparasi, Parsa, Rautahat, Rupendhi, Saptari, Sarlahi, Siraha, Sunsari, Surkhet and Udaypur districts).

RESPONSE STRATEGY

The Contingency Plan is designed to support the Government of Nepal’s response to the immediate humanitarian needs of the people affected by floods.

Principal objectives for this initial 30-day plan are:

SO1	Affected people are protected and have equal access to assistance, services, and rights without discrimination.
SO2	The immediate food requirements of people in need are met to avoid nutritional deterioration.
SO3	Prevent increases in mortality and morbidity and the outbreak of communicable diseases through immediate access to basic water, sanitation, hygiene health services and safe disposal of disaster waste.
SO4	Families with destroyed or damaged homes, including the displaced population, attain basic and protective shelter solutions.
SO5	Early Recovery needs are addressed specifically those related to livelihoods and access to education facilities

Addressing cross-cutting and context-specific issues

Cash-based humanitarian programming

In an emergency response, humanitarian cash transfers are an effective tool to support people affected by disasters to meet their immediate needs in a way that maintains dignity and stimulates the local economy and markets.

The United Nations, including its member agencies and a broad range of partners, have committed to increase the use and coordination of cash-based programming, when feasible, to improve humanitarian efficiency and effectiveness, as well as to build on national mechanisms such as social protection systems in line with the 2016 World Humanitarian Summit and the Grand Bargain commitments.

Social protection and safety nets can play a key role in reducing the risks households face, not only to poverty but also to a range of natural disasters. Nepal has a well-established social security system targeting social and economically.

Vulnerable groups which can be mobilized to enable humanitarian cash transfers in times of crisis, as part of emergency response and recovery efforts.

Cash transfer programming, as part of an overall humanitarian response, needs to be well coordinated to help alleviate human needs, ensure that resources are used effectively and avoid duplication. To this end, Nepal Cash Coordination Group (CCG) has been formed to strengthen collaboration and coordination on the preparation and implementation of cash related activities.

The main objective of the CCG is to support the Government of Nepal (GoN), the UN, donors, NGO partners and clusters in the preparation, coordination, design and implementation of cash-based assistance to support disaster affected people in a timely and systematic manner.

The Cash Coordination Group's contingency plan is annexed to this document. The Group will undertake the following priority activities:

- Coordinate assessments required to inform decisions on using unconditional cash transfers
- Support clusters in planning, designing and implementing cash-based assistance
- Explore options to mobilize parts of the social protection system for disaster response

Accountability to affected people (AAP) / communicating with communities (CwC) is critical

In an emergency, it is critical that effective two-way communication mechanisms are put in place to communicate, support and coordinate with affected people. Community engagement and accountability is the process of and commitment to providing timely, relevant and actionable lifesaving and life-enhancing information to the affected communities. The community engagement approach uses the most appropriate communication tools and techniques with active participation from the communities to listen to communities' needs, feedback and complaints along with creating the feedback loop for taking the corrective and timely actions.

The HCT will therefore activate the **Community Engagement Working Group (CEWG)** in the first 24 hours to agree on and implement the coordinated community engagement response action plan across clusters/partners). The CEWGG will coordinate and support the clusters to adopt the innovative and appropriate localized approaches (radio/television, survey, IVR system, ICT technology) to better understand the needs of communities with the active engagement of affected people in particularly the most vulnerable groups along lines of sex, age, ethnicity, caste, physical ability and other diversities.

The overall aim will be to ensure that the provision of information, community feedback and participation are effectively implemented. Specifically, the Working Group will seek to achieve the following:

- Humanitarian response is informed by the views of affected populations (regularly collect sex, age, ethnicity, caste, physical ability and age disaggregated feedback on community needs, broad perceptions and narrow complaints, ensuring inclusion of vulnerable groups).
- Humanitarian responders are encouraged to act on the feedback and report about progress in HCT meeting.
- Communities have the information and communications capacity they need to make informed decisions and stay safe: Providing affected populations with needed information, including progress report on responder's feedback (if any), messaging to support psychosocial counselling and use of various communication channels and approaches to reach out communities about the available services and available mechanisms to address their concerns.

- Community responders and volunteer groups are mobilized and connected with the international response –

Undertake preparedness actions including trainings for both broadcasters, humanitarian workers and positioning of technology

To implement these critical goals, the Community Engagement Working Group, led by UNICEF is supported by the RCO. In the event of a crisis it is likely that UNICEF and/or the RCO would seek surge support to enable scale-up. The **Inter-Agency Common Feedback Project** (or other common services mechanism) will also be activated. This has proved a valuable tool in the past to ensure coordinated feedback on community needs and programme implementation. Sub-working groups on 1) Radio and Communication Technology; 2) Community mobilization; 3) Communications with Communities; and 4) Feedback, Monitoring and Evaluation, will be activated as needed.

Institutional mechanisms shall be established to ensure regular communication between the clusters and the CEWG to ensure that the needs and concerns of the communities collected through common feedback mechanisms are fed to the clusters and in turn, the information on how the clusters are addressing the needs are fed back to communities through the CEWG.

Promoting gender equality and social inclusion (GESI) in humanitarian responses

Natural disasters do not affect everyone in the same way. In every humanitarian crisis, we know that women and girls are affected differently than men and boys, and that vulnerabilities are often exacerbated by other factors such as age, disability, sexual orientation and gender identity, caste, ethnicity or religion. Pre-existing societal structures, social norms, discriminatory practices and gender roles create or contribute to heightened risks for some members of the community[1]-such as children, persons with disabilities, sexual and gender minorities, people living with HIV-AIDS, adolescent girls, single women, female headed household, pregnant and lactating mothers, senior citizens, Dalit women, women from religious and ethnic minorities and indigenous women.

Humanitarian response must ensure that the different needs, priorities, and capacities of all persons irrespective of their gender are addressed when designing, planning, implementing, monitoring and evaluating humanitarian response efforts. Particular attention must be given to women and girls especially from marginalized groups. All genders are exposed to differential risks and vulnerabilities but also play unique and important roles in responding to emergencies within their respective communities. Notably, opportunities to transform gender relations through empowerment are often missed elements in humanitarian response, despite it being key to effective response and longer-term resilience of communities[2].

Refer to Gender Equality and Social Inclusion (GESI) Guideline for identifying and prioritizing vulnerable and marginalized populations for humanitarian response, recovery, preparedness and disaster risk reduction in Nepal: Focus on women and girls, LGBTI, persons with disabilities, children, senior citizens, ethnic/caste based minorities. <http://un.org.np/headlines/gender-equality-and-social-inclusion-guideline-identifying-and-prioritising-vulnerable-and>

Refer to a Common Framework for Gender Equality & Social Inclusion (2017). The framework was developed to help build a common understanding between Development Partners (DPs) regarding gender equality and social

^[1] Inter-Agency Standing Committee Policy on Gender Equality and the Empowerment of Women and Girls in Humanitarian Action, 3 Nov 2017.

^[2] IASC (2017), The Gender Handbook for Humanitarian Action, page 75

inclusion. Nepal has achieved significant progress in addressing these issues, supported by positive national and international commitments. However, a large proportion of Nepal's population continues to be affected by discrimination. A more coherent approach among DPs will ensure further coordinated collective support to the Government of Nepal. <http://asiapacific.unwomen.org/en/digital-library/publications/2017/04/gesi-framework>

The HCT may assign the UN Gender Theme Group (GTG) with responsibility of mainstreaming and integrating gender equality and the empowerment of women in the humanitarian response. Further it will request Cluster Leads and Co-leads to assign Gender Focal Points to join the GTG. The GTG is currently co-chaired by UN Women and UNDP. A GESI Checklist, prepared by the Ministry of Women, Children and Senior Citizens and Women Friendly Disaster Management Group with inputs from UN and in line with Inter Agency Standing Committee is attached to this contingency plan.

Logistics

Destruction and blockage of key infrastructure, roads, and tracks caused by floods and landslides creates logistical challenges especially during the initial response phase of the operations and hampers transport and distribution of relief supplies into the affected areas. Rugged terrain and road access constraints remain a challenge directly after flooding, and, in some instances, transport of relief supplies can take several days to reach affected population. Poor visibility and bad weather conditions may also restrict transport by air.

The key to overcoming such logistical challenges is capacity identification and planning. Potential delays in delivering relief supplies can be reduced by pre-positioning relief stocks closer to areas at-risk, identification of local transport and storage capacities (particularly for remote areas) through inter-agency Logistics Capacity Assessments and contingency planning. Through the contingency planning process, Clusters collect and analyze relief stockpile quantities, determine logistics challenges and identify strategies to ensure that the required relief items can reach affected communities on time.

The Logistics Cluster has completed a detailed Logistics Capacity Assessment of national logistics infrastructure which is available at: <https://dlca.logcluster.org/display/public/DLCA/Nepal>. This logistics tool can support humanitarian agencies to plan responses in an informed manner by providing information on roads, infrastructure, transport, storage, telecommunications and additional logistics services.

The National Logistics Cluster will support a response operation by filling logistics gaps faced by the Government of Nepal and the humanitarian community, through the provision of the following services, as needed:

- Assistance with national and local logistics coordination and information management: Provide updated operational information such as access constraint maps, local transport and storage capacity, sources for logistics services and coordination meeting minutes.
- Establish and maintain a dedicated information sharing platform (<https://logcluster.org/countries/NPL>).
- Logistics common services to the humanitarian community, such as common transport or storage services, can be activated if required. In this case, WFP and/or the RCO would seek surge support to enable activation.
- Provision of inflatable boats (with outboard engines) for light Search and Rescue, to Ministry of Home Affairs, as part of the project "Augmentation of national and local-level emergency logistics preparedness".

An updated relief supply stockpile list is attached in Annex to this document.

COORDINATION & MANAGEMENT ARRANGEMENTS

1. HCT

The RC would immediately convene an HCT Principals meeting should this plan be activated. It is anticipated that the HCT Operational would meet on weekly basis during the monsoon period following an HCT response based on a normal monsoon scenario, with the HCT Principals convened as required. The MoHA would be invited to attend the HCT Principals meeting as required, should the plan be triggered. The NEOC and the HCT Principals would be in constant communication to ensure optimal results during any response. The HCT Principals through the NEOC would coordinate international response and relief efforts for Nepal, in coordination with the GoN.

Immediately following the onset of flooding, the primary focus will be on coordination with the 'core group' which comprises of the following agreed priority sectors / Clusters in addition to Logistics:

- Food Security;
- Nutrition;
- Health;
- WASH
- Protection;
- Shelter (including non-food relief items);
- Education;
- Early Recovery;

2. Coordination with Government/ and Private Sector

The private sector plays a critical role in emergency response. Clusters retain the responsibility for pulling in relevant private sector capacity into humanitarian coordination arrangements as necessary – the RCO can support as necessary.

3. Public Outreach and Advocacy

A smooth and continuous flow of information is vital. In response to a humanitarian emergency the communications priorities of the HCT should be to; ensure timely, clear and effective messaging to the public especially disaster affected communities; and to ensure consistency of messaging by the HCT and its members. It is crucial for the HCT to agree common messages in the event of an international response.

OPERATIONAL SUPPORT ARRANGEMENTS

1. Needs Assessments

Much of the information required for immediate response exists within baseline data. Within Nepal's 7 provinces a number of specific locations are identified as highly flood prone. Detailed profiles for highly flood prone rural and urban municipalities plus metropolitan locations have been developed by the UNRCO. These profiles can support responding organizations to take 'low-regrets' initial response actions (and to prioritize preparedness investments).

As noted above, the KINWG will meet if this contingency plan is triggered. As an initial task (to be completed within a period of 24 hours) the KINWG will agree on an immediate scenario definition including an overall target caseload. This information will then be used by Clusters to determine sectoral responses.

Building on baseline data, the Inter-Agency Rapid Assessment will provide data on casualties and initial damages. The IRA will be launched by the local government along with NRCS, and DDMCs will take a leading role in the first days of the disaster. The IRA form/template has been agreed and accepted by all HCT, Principals partners.

Given the availability of pre-crisis secondary data the HCT, Principals should initiate a response on a no-regrets basis ahead of an IRA being finalized.

Supplementary assessments to the IRA will only be completed following joint agreement of agencies at the district level. Obtaining joint agreement is critical to ensure validation of data and gaps are covered. Donor partners will not accept assessments that have not been completed through a coordinated approach. In-depth sectoral information that is not available via other sources can be collected during/after week three of the disaster.

The Multi-Cluster Initial Rapid Assessment (MIRA) is a coordinated assessment methodology that has been agreed by the RC and the Government but will only be activated for large-scale disasters which require international assistance. The IRA will be the primary needs assessment process in Nepal, activated in the first instance.

Existing, well-established and nationwide multi-sectoral monitoring systems, such as the Nepal food security monitoring system (NeKSAP), will provide additional information on the extent and impact of the disaster(s) to guide relief and recovery efforts.

2. Information Management

The IMWG which will have the following key responsibilities:

- Compiling key baseline datasets
- Agreeing/supporting common data-sharing platforms
- Supporting the RC in the management of information and spatial analysis to enhance coordination

As agreed by the HCT, immediate response planning will utilize pre-existing baseline data which will be supplemented with the IRA. The baseline data will provide key datasets in profiles in-line with Nepal's new federal structure. These profiles can be accessed at <http://un.org.np/thematicareas/disasterpreparedness/erp>

The following table outlines key information types and sources that can be accessed for preparedness and response efforts:

	TYPE	Source
Pre-Crisis data	Administrative boundary	DoS
	Historical Flood inundation data	DOI/DWIDM/WFP
	Land Cover	ICIMOD
	Landslide susceptibility	ICIMOD
	Demographic Information	Central Bureau of Statistics;
	Dependency ratio	UNFPA
	Differently abled Population	Central Bureau of Statistics
	Neonatal Population	DOHS (2016/17)
	Lactating Population	DOHS (2016/17)
	Pregnant Women	DOHS (2016/17)
	WASH	Central Bureau of Statistics
	Financial Services	NRB, UNCDF
	Health Infrastructure	WHO, HMIS
	Security Situation	UN Department for Safety and Security (UNDSS); MoHA
	Open Spaces	IOM; Satellite Images i.e. http://www.copernicus.eu/ ; https://unitar.org/unosat/ ; DPRP
	Transportation and Infrastructure	Open Street Map
	Remoteness	World Bank
	Food Security	WFP
	Disadvantage Group	LGCDP
	Social Security	Department of civil registration
Education	EMIS	
Post Crisis data	Causalities	DRR Portal, IRA; District Disaster Relief Committees (DDRC); Red Cross
	# and location of displaced	DRR Portal, IRA, Red Cross,
	Homes Destroyed	DRR Portal, IRA, Red Cross,
	Loss of Livestock / Livelihoods	DRR Portal, Line ministries and sectoral agencies, http://www.neksap.org.np/
	SADD Population	DRR Portal, IRA, Red Cross,
	Location of Impact	DRR Portal, IRA, Red Cross,
	Status of Basic Services	MoHA and other line Ministries; telecommunications companies
	Logistics	MoHA, Police; Nepalese Army, Ministry of Physical Infrastructure and Transport
	Security Situation	MoHA; UNDSS
	Organizational Mapping	3W
	Priority Needs	MoHA/DDMC ; IRA; sectoral assessments; MIRA

3. Common Service Areas

Security

UNDSS plays a crucial role in providing information and advising relief workers in advance of deployment to the areas affected by natural and/or man-made disasters. The UNDSS Security Advisor (SA) would also be able to make assessments in the field should there be a requirement to clear/approve an area for humanitarian operations.

In response to a humanitarian emergency UNDSS would lead the development of a specific security plan and standard operating procedures.

Communications

Communication on security matters will generally be transmitted via the existing telecommunications network (primarily by telephone and email) within Nepal and to/from UN HQ. Anticipating possible breakdowns in emergencies, alternative means of communication (radio/satellite, etc.) will be used when required. All UN country offices are adequately equipped with communication equipment (g. HF/VHF Radios, satellite phones etc) and most project offices/ field officers are equipped with landline and cellular telephones or both.

The Emergency Telecommunications Cluster (ETC) headed by WFP will support the HCT by liaising with the telecommunication services providers regarding mobile network and voice/data coverage in the affected areas during responses to flooding or landslides.

As per Nepal-specific MOSS, the Interagency Radio Room will be operational on a 24/7 basis and the Designated Official, Senior Management Team members, SA, Agency Security Focal Points, Wardens, all international staff and key national staff have handheld radio sets. As part of MOSS requirements, all heads of agencies and district offices also have satellite phones for emergency communications.

Humanitarian agencies are also advised to consult social media including Twitter (e.g. <https://twitter.com/UNICKathmandu>, https://twitter.com/UN_Nepal, <https://twitter.com/UNDPNepal>, https://twitter.com/unicef_nepal etc.) and Facebook (<https://www.facebook.com/unct.nepal.3>) to obtain information regarding the prevailing in-country context.

PREPAREDNESS GAPS & ACTIONS

1. Gaps

Coordination

Action: Clarify the key interlocutors at provincial and municipal level in target locations for coordination of preparedness and response activities.

Information Management

Action 1: Ensure that information central to effective preparedness and response including '3W' datasets, contingency stocks of relief supplies etc. are kept up-to-date. Clusters should also ensure that partner agencies are supported to feed information in to the Key immediate Needs Working Group in the event of flooding.

Assessments

Action 1: Ensure the availability and accessibility of relevant baseline data. The KINWG will combine baseline data and IRA data where available to support HCT decision-making. This plan calls for clusters to maximize the use of pre-existing baseline data, augment that with data from the IRA, engage in sector-specific assessments when needed, and resist agency-specific assessments, which are not part of a coordinated effort.

Humanitarian Principles and Operational Standards

Action: Lead outreach and familiarization of this ERP with key partners, including Government officials at the provincial and local levels. Ensure that clusters are updating partner's awareness of common humanitarian standards where relevant, including SPHERE.

ANNEX I:

CLUSTER OPERATIONAL DELIVERY PLANS

Shelter Cluster



International Federation of the Red Cross (IFRC)

Contact information: Juja Kim (juja.kim@ifrc.org)

Herve Gazeau (herve.gazeau@ifrc.org)

In-country response capacity (confirmed) as of April 2019

- 46,000 shelter/NFRI kits (Each set consists of 2 Tarpaulins, 2 blanket, 1 kg rope, and additional clothing, utensils).

Targeting strategy

Against a caseload of 1.26 million people affected by floods, it is estimated that shelter support may be required for 189,000 households which includes full support for 63,000 HHs (fully damaged houses) and partial support for 126,000 HHS (partially damaged houses). Out of total needs, the Shelter Cluster will target to 81,900 households as given below.

- 63,000 households whose homes have sustained complete destruction. Among them, initial priority will be to assist 40,00 households by mobilizing existing stocks and additional resources may be needed for additional 23,000 households which may not be covered by existing stock of NFRI.
- 18,900 most vulnerable households whose homes have sustained partial damage.
- 12,000 households (out of fully displaced households- 63,000) who are in need for transitional shelter

Note that blanket assistance will be provided to those households whose homes have sustained complete destruction. Female and child headed households and those with a with vulnerable person, specifically an elderly family member or a pregnant and lactating woman will be provided with support to address partial damage of dwellings.

Persons assisted by the Shelter Cluster will receive in-kind support (specifications to be determined by the Cluster) or a cash grant equivalent to US\$ 100.

A total of US\$ 6.79 million is required to meet the needs of 63,000 households whose homes have sustained complete destruction, out of them, 40,000 households will be covered from existing stock of NFRI and additional resources will be required to meet the needs of remaining 23,000 households. In addition, 18,900 most vulnerable households have been targeted for shelter repair by providing toolkit or cash grant equivalent to US\$ 100. As of April 2019, the stock situation consolidated by Shelter Cluster shows that relief commodities are available for 40,000 households in stock in Nepal that equivalent to US\$ 2.18 million leaving a response gap of US\$ 4.6 million.

Objectives and activities

The principal objective of the Shelter Cluster is to put in place the preparedness measures so that Cluster can respond to a disaster event in a rapid, appropriate and effective manner for an initial period of 30 days.

Other specific objectives are;

- To support the GoN in minimizing flood impacts through effective and timely coordinated responses;
- To promote cooperation and co-ordination amongst relevant organizations, as well as inter-cluster coordination in order to meet the emergency shelter and NFIs requirements of flood affected households;
- To strengthen accountability to disaster affected people;

Shelter cluster aims to strengthen effective and efficient response services to the affected families by providing shelter support to meet their immediate needs and protecting them from any adverse situation in case of flooding.

In operational terms following activities will be undertaken by the Cluster;

Key priority preparedness activities:

- Regular update of relief items, trained HR and existing capacities in country
- Regular coordination with shelter cluster lead, member organizations and support to make alert provincial and local level authorities for shelter related preparedness activities
- Regular coordination with other cluster leads/co-leads (specially with logistics) to ensure better preparedness
- Keep human resources trained on shelter on standby position
- Support to provide orientation/training on shelter for national, provincial and local level stakeholders as and when needed

Main Activities to respond the situation:

- Shelter Cluster partners provide immediate life-saving emergency shelter solutions with cash-based support or through in-kind allocations of tarpaulins, tents, plastic sheets, shelter kits and NFI for the most vulnerable flood affected households who are unable to return to their homes:
- Distribute emergency shelter item/ NFRI to 40,000 households from existing stocks
- Manage/distribute additional resources for emergency shelter item/NFRI for remaining 23,000 households
- Distribute emergency shelter kits or cash grant equivalent to US\$ 100 to repair damaged houses for 18,900 most vulnerable households;
- Provide transitional shelter item or cash grant equivalent to US\$ 140 for 12,000 most vulnerable families who are fully displaced and have no capacity to manage their shelter.
- Shelter Cluster partners provide immediate life-saving emergency shelter solutions via community shelters in areas assessed as safe by the GoN:
- Displaced families accommodated in community centers that are identified as safe;
- NFIs provided to displaced families accommodated in community centers to enable them to undertake essential household chores (bathing, cleaning, food preparation);
- Displaced families assisted to return to their homes assuming conditions permit safe and dignified returns;
- Via effective coordination (including through 3W matrixes and regular meetings) Shelter Cluster partners are able to plug critical gaps:

- Information and coordination tools maintained and shared e.g. 3W matrixes and mapping products;
- The Shelter Cluster can prioritize and identify key gaps;
- Effective inter-Cluster coordination facilitates effective and synergetic responses like WASH, Protection, health, logistics, along with cross cutting areas such as community engagement, cash/livelihood, gender and inclusion etc.
- Provide technical support to cluster members, local authorities in case of need to conduct assessment, identifying needs for shelter and render relief services
- Coordinate with shelter cluster members, mapping of situation and gaps in regular basis.

Supports objective SO4		
Activities	Indicators	Target
Provide immediate life-saving emergency shelter solutions with cash-based support or through in-kind support for the most vulnerable flood affected households who are unable to return to their homes	<p># most vulnerable households identified and targeted</p> <p># of most vulnerable households received immediate life-saving emergency shelter solutions, cash and kind support.</p> <p># of households received cash support to repair their houses</p>	<p>Support emergency shelter items (Tarpaulin/NFRI) to 63,000 households (40,000 from existing stocks+ 23,000 from other sources) affected by floods within 2-3 weeks</p> <p>Support cash or kind to 18,900 households to repair their houses within one months</p> <p>Support cash or kind to 12,000 households to construct transitional shelter within 1-2 months</p>
Provide immediate life-saving emergency shelter solutions via community shelters in areas assessed as safe by the GoN	<p># most vulnerable households identified and targeted</p> <p># of most vulnerable households supported with community emergency shelter.</p>	<p>Support # households by providing community emergency shelter within 1-3 weeks</p>
Strengthen effective coordination Shelter Cluster partners are able to plug critical gaps	<p># of shelter cluster meetings are held at district, provincial and national levels.</p> <p># of orientations/trainings on emergency shelter and construction is held.</p> <p>Capacities of shelter cluster members are assessed regularly</p> <p>Needs and gaps of shelter needs are assessed immediately after any disasters.</p> <p># of organizations actively engaged in shelter cluster activities.</p>	<p>Organize shelter cluster meeting in monthly basis in time of disaster</p> <p>Update capacity of cluster members in monthly basis</p> <p>Conduct orientation/ training in 7 provinces/ 10-20 districts</p> <p>Engage partners from various sectors, including government, I/NGOs, private sectors and academic institutions.</p>

Health Cluster



World Health Organization (WHO)

Contact information: Damodar Adhikari (adhikarid@who.int)

In-country response capacity (confirmed) as of April 2019

Needs and gap analysis

Finances:

US\$ 660,000 (available on request from partners and depending on scale of response required) of a requirement of US\$ 2,540,427 for health cluster response. The gap to identified by the cluster is US\$ 1,880,427 to complete the health sector response.

Targeting strategy

- Against a caseload of 1.26 million people affected by monsoon flood and the host communities if organized camps are not established.
- It is estimated that health sector can provide priority response to 404,808 population from its in-country capacity for a month.
- Response priority will be given to the most vulnerable population (under 5 children, elderly persons, pregnant and lactating women, disabled and displaced populations requiring continued medication).
- Number of health responses need to target the entire affected population including host communities to prevent them on possible diseases outbreak e.g. hygiene promotion and awareness raising activities, diseases surveillance, comprehensive health campaigns.
- Against the overall caseload of 1.26 million people an estimated 315,592 will be women and girls of reproductive age of whom 6,312 will be at risk of sexual GBV.
- Of the 315,592 will be women and girls of reproductive age, 31,500 / 10% of the caseload will require life-saving sexual reproductive health services as will an estimated 3,156 survivors of sexual GBV.
- Of the 1.26 million population, the cluster identified gap of 781,621 population to cover the health sector response.

Objectives and activities

The primary objective of health cluster is - to ensure that human survival and well-being – particularly the health needs of the most vulnerable groups - is assured.

Specific objectives are:

- To prevent the outbreak of communicable diseases through immediate access to basic water, sanitation, hygiene health services and safe disposal of disaster waste.
- To organize comprehensive health response camps to address the health issues.
- To ensure timely deployment of Rapid Response Team and Emergency Medical Team for response.
- To ensure appropriate medicine and medical logistics delivered.
- To ensure the mental health and psychosocial interventions took place

In addition, Health Cluster partners must also undertake preparedness planning to ensure the provision of services in remote areas of Nepal where access might be problematic owing to floods or landslides. The cluster response will be handled by four sub-Clusters (Injury Rehabilitation, Reproductive Health (RH), Tuberculosis (TB) and Mental Health) to manage effective response coordination.

Key priority actions:

- Conduct rapid health (risk) assessment (as a part of outbreak prevention) in the affected areas
- Deployment of central (risk) assessment team for coordination and monitoring the response operation
- Health sector/cluster coordination meeting at different levels.
- Deployment of Rapid Response Team (RRT)
- Establish and ensure proper diseases surveillance system and monitoring of epidemic prone diseases
- Deployment of mobile clinics for onsite treatment and referrals
- Ensure support of essential medicines and supplies for flood response including diarrhoeal disease kits, LLIN and water purification tablets
- Prevent increases in mortality and morbidity and diseases outbreaks through immediate health sector response interventions ensuring access to safe drinking water, sanitation, hygiene and safe disposal of health care waste in coordination with WASH cluster
- Ensure the hygiene promotion and awareness raising campaign organized with WASH cluster and regular media brief
- Support to implement minimum initial service package (MISP) for sexual and reproductive health, mental health & psychosocial support and immunization services
- Support to health response to gender-based violence (GBV) in coordination with protection cluster.
- Provide support on appropriate and cultural accepted procedures for the management of dead bodies in coordination with Ministry of Home Affairs.
- Support to strengthen primary health care services including for the management of non-communicable diseases, disabilities, mental health and injury rehabilitation through the provision of essential medicines and supplies, and recovery of damaged health facilities;
- Ensure continuation of vital social services - health including comprehensive sexual and reproductive health, nutrition, WASH, education, mental health services – are restored with a view to integrating disaster risk reduction and improving resilience.

Key priority Preparedness actions: Government lead: Ministry of Health and Population; IASC Lead: WHO

- Priority Preparedness Activities
- Updated contact details of cluster partners, EDPs, GON counterparts
- Circulate necessary tools, templates, guidelines, SOPs for risk assessment, risk and media communication
- Capacity mapping (4W)
- Stock-pilling of emergency medical supplies and logistics including Medical Camp Kits (MCK) in strategic locations
- Orientation/Training on Public Health interventions especially on Post-disaster syndromic diseases surveillance, Risk communication, Media communication, surveillance, sample collection, MH/Psychosocial counselling etc.
- Prepare/update emergency preparedness and disaster response plan targeting Provincial Health Directorate Office (main coordination hub for response operation)
- Build capacity of Rapid Response Team (RRT), Emergency Medical Deployment Teams (EMDT)

- Inter/Intra cluster coordination meetings to avoid duplication in the preparedness actions
- Roll out cluster coordination at the provinces
- Strengthen the Incident Command System (ICS) at Provincial Health Emergency Operation Centre (HEOC)

Supports objective SO3		
Activities	Indicators	Target
Coordination meetings	# of coordination meeting with MOHP # of health cluster coordination meeting # of sub cluster/technical working group meeting # of intra cluster coordination meeting	
Organization of health camp	# of comprehensive health campaigns conducted in affected area # of people treated in camp # of families received water purification measures # of team mobilized for response # of field medical unit set up for response	Affected population.
Logistics support for the response to MOHP	# of health logistics distributed for response <input type="checkbox"/> # of international kits (IEHK, DDK, Hygiene Kit, RH Kit provided) <input type="checkbox"/> # of medical camp kits installed <input type="checkbox"/> # of LLIN distributed	All population in need.
Enhanced public health interventions: o Post-disaster syndromic diseases surveillance, o Risk communication, o Media communication	# of hygiene promotion and awareness raising teams mobilized % of displaced population received the risk communication interventions # of media conveyed risk communication message # of Rapid Response Team (RRT) mobilized # of people received awareness raising and hygiene promotion messages	Affected population.
Implement Minimum Initial Service Package (MISP) for Sexual Health) including safe delivery, new born care, emergency obstetric care, availability of FP methods and supporting maternity facilities in health facilities	# clean delivery kits distributed to visible pregnant women # maternity/transitional homes established and functional # affected women and adolescents received SRH services through mobile RH camps # affected women and adolescent girls received contraception including emergency contraception # male condoms and contraceptive distributed # Coordination meetings for RH services and GBV prevention and response	7,089 pregnant women need clean delivery kits for first three months Approximately 31,500 (10% of WRA) received the services through mobilize RH camps 33,862 women use contraception in three months 50,400 sexual active men use the condoms in three months Conducted RH sub-cluster meetings

Supports objective SO3		
Activities	Indicators	Target
Provision of Health services for clinical management of rape survivors	# of rape survivors received health services in the health facilities # Safe access to health facilities is in place	6300 case of SGBV receive the CMR services.
Established and functional of BEOC and CEOC services	% of skilled birth attendants attended deliveries as % of expected pregnancy	Currently pregnant women who will have access and be able to give birth in a health center and also deliveries requiring a C- section 354 deliveries requiring C-section in one month
Management of chronic diseases	# of people with HIV treated # of people with TB treated # of people malaria treated # of people with COPD, Diabetics treated Proportion of the disable population received health services/assistive devices	Continuation of medication to the existing cases
Support mental health and emergency psychosocial services	# of team deployed for psychosocial counselling # of MH cases treated	Families who lost their home Families who lost their family members

Protection



United Nations Children's Fund (UNICEF) &

United Nations Population Fund (UNFPA)

Contact information: Hari Karki (hkarki@unfpa.org) &

Radha Gurung (rgurung@unicef.org)

In-country response capacity (confirmed) as of May

Finances:

US\$ 125,000 via UNFPA HQ following declaration of an L3 emergency or disaster event of significant scale plus an additional US\$60,000 from partners in-country.

Targeting strategy

Target population are vulnerable groups (women and girls of reproductive age, adolescents, children, women headed households) who will be supported through the provision of dignity kits, clothes, GBV prevention messaging, appropriate shelter and site management and psychosocial services

Against the overall caseload of people, the total need is estimated as 580,000; out of which target people is 488,873 and 106,266 people shall be the first priority.

In total the Protection Cluster will require US\$ 1.209 million in order to provide support to its target caseload.

Objectives and activities

The overall objective of the protection cluster is to ensure the protection of rights guaranteed by International Human Rights Law, International Humanitarian Law and National Laws during emergencies, in particular for marginalized and vulnerable groups such as caste, ethnic, cultural and religious minorities; children; adolescent girls and boys, pregnant women and lactating mothers; female headed households; elderly, people with disabilities and displaced persons; and to protect civilian populations affected by hazards from risks of violence, exploitation, abuse, discrimination and neglect arising from emergency situations.

To achieve this objective, major activities in the affected districts are as follows:

- Support safe and non-discriminatory access to assistance and protection services: Non-discriminatory access to humanitarian assistance and targeted support for people with specific concerns, including female headed households, children, people with disabilities, the elderly, caste-based and ethnic minorities, and indigenous communities, are priority concerns in emergencies. For all affected people, loss of civil documentation poses an obstacle to access essential services; hence, facilitating for obtaining copies of such documentation will be a priority.
- Prevent and respond to GBV: The incidents of GBV often increase during an emergency period. Humanitarian agencies will particularly consider measures that reduce possible risks, including trafficking, forced prostitution, rape or domestic violence and implement standards and instruments that prevent and eradicate the practice of sexual exploitation and abuse. The prevention of and response to GBV will include the establishment of a multi-sectoral working group to enable a collaborative, multi-functional, inter-agency and community-based approach.

- Trafficking: Anecdotal evidence shows that during the on-set of emergencies, trafficking in person both inside the country, mostly from rural to urban areas, as well as outside the country mainly to India and increasingly to Gulf countries increase. The main purpose of trafficking is for commercial sexual exploitation, bonded and worst forms of child labour (working in mines, factories, as domestic servants, circus entertainers, beggars etc.), unnecessary institutionalization, illegal intercountry adoption, forced marriage and organ removal. Increased vigilance, awareness raising and reintegration of the survivors will be the priority of the protection cluster.
- Psychosocial support: Disasters cause significant psychological and social suffering to affected populations. The psychological and social impacts of emergencies may be acute in the short term, but they can also undermine the long-term mental health and psychosocial well-being of the affected population. These impacts may threaten peace, human rights and development. One of the priorities in emergencies is thus to protect and improve people's mental health and psychosocial well-being.
- Family tracing and reunification: People, particularly women, children, people with disabilities and elderly separated from their families due to disasters are among the most vulnerable. Separated from those closest to them, these people will lose the care and protection of families in the turmoil, just when they most need them. They face abuse and exploitation and even their very survival may be threatened. In case of children they may assume adult responsibilities like protecting and caring for younger siblings.
- Distribution of relief materials: During emergencies, disaster affected people may lose or be unable to access their personal belongings. Consequently, the Protection Cluster will advocate with other clusters to provide to the identified vulnerable groups and provide relief items including clothing, dignity kits for women of reproductive age which includes pregnant and lactating mothers and other items such as torches and solar-powered chargers to reduce exposure to specific risks.

Prevention and response to GBV, psychosocial support, family tracing and reunification and distribution of protection materials will be the immediate response. This will fulfil the protection principles of 1. Avoid exposing people to further harm; 2. Ensure people's access to impartial assistance; 3. Protect people from physical and psychological harm arising from violence, abuse and exploitation; 4. Assist people to claim their rights, access available remedies and recover from the effects of abuse.

Key priority actions

- Conduct protection cluster/working group coordination meeting at federal, provincial and local levels.
- Advocate for ensuring that affected population are protected against violence, abuse and exploitation and have equitable access to assistance, services, and rights without discrimination
- Conduct protection needs assessment and develop plan to address the needs
- Ensure protection concerns are well reflected in initial assessments
- Coordinate and ensure that people with protection concerns are included by the services from other clusters
- Establish women friendly and child friendly spaces
- Conduct awareness raising interventions to prevent violence, abuse and exploitation against the affected people
- Coordinate with health cluster to implement minimum initial service package (MISP) for sexual and reproductive health especially for mental health & psychosocial support and health response to gender-based violence.
- Ensure support of essential lifesaving relief materials and supplies for flood response including dignity kits, kishori (adolescent) kits, clothes for children and elderly people etc.
- Initiate the tracing and reunification process of missing people (including families of people who require care including children).
- Provide psychosocial support to the vulnerable people.

- Facilitate the process to obtain legal documents.

Key Priority Preparedness Actions for the monsoon

- Update the protection cluster member organizations capacity through 5Ws matrix.
- Organize the orientation programme on protection issues and role of protection cluster members and stakeholders at provincial level (e.g. province 1,2, 5 and Sudur Pakshim).
- Coordination with Ministry of Women, Children and Senior Citizens (MoWCSC) and Ministry of Social Development for establishment of protection cluster/working group at provincial level.
- Finalize the relevant guideline, SOP and manual.

Supports Objective O1, O2 and O3

Activities	Indicator	Target
Prevent and respond to gender-based violence	# of GBV cases reported	Proportion of reported cases referred and managed within 72 hours
	# of cases referred for appropriate multi-sectoral services	100% referred
	# of security personnel including women deployed in the camp/affected areas	Women security personnel per affected location
	# of women and children prevented from being trafficked	# of women and children intercepted
	# of community-based mechanism activated and mobilized for prevent and response to GBV	At least one per affected location
	# of Women and Adolescent girls involved in camp/shelter management committee and relief materials distribution	% of women and adolescent girls involved in the committee and distributions
	# Female friendly spaces (FFS) established/operational and psychosocial support, case management, outreach and other services integrated	# of FFS established and operational as per requirement
	# of dignity kits distributed to WRA including pregnant and lactating with GBV prevention and referral messages	# dignity kits distributed
Psychosocial support, including child friendly spaces	# of psychological first aid provided to the affected population by community psychosocial workers	10% in second week
	# of focused psychosocial care provided by the counselors	20% of the identified cases
	# of cases referred for specialized care (psychiatric treatment, mental health treatment)	

	<p># child friendly spaces (CFS) established/operational and psychosocial support is integrated in the CFS</p> <p># of IEC materials distributed and messages disseminated on psychosocial support</p>	<p>100% in camp settings</p>
<p>Family tracing and reunification</p>	<p># of Information desks and free phone service in camps and affected areas established to help families make contact</p> <p># of missing and separated people, including children identified</p> <p># of separated people, including children, reunified</p> <p># of IEC materials distributed and messages disseminated on unaccompanied and separated children</p>	<p>100% of the identified cases</p>

Nutrition Cluster



United Nations Children's Fund (UNICEF)

Contact information: Anirudra Sharma (ansharma@unicef.org)

In-country response capacity (confirmed) as of May 2019

Finances:

UNICEF can access US\$200,000 internally within 72 hours including supplies although such funds must be repaid. This support will be available to provide immediate life-saving interventions.

Relief Supplies: The in-country stocks of nutrition supplies are attached to this ERP.

Targeting strategy

Out of a total caseload of 1.26 million people 255,000 people will be the population in need in 22 flood affected districts. However, 126,236 will be the priority population (under five children, pregnant and lactating women). Among the priority, the population targeted will be as; (i) Blanket supplementary feeding for children aged 6-59 months: 50,494, (ii) Blanket supplementary feeding for the pregnant and lactating women: 25,247, (iii) targeted supplementary feeding programme for the 6-59 months children affected from moderate acute malnutrition: 17,673, and (iv) therapeutic feeding programme for the children affected from severe acute malnutrition: 7,574; and (v) MNPs for the children 6-59 months: 25,248.

An additional US\$4.8 million is required to deliver preventative and treatment activities for moderate and severe acute malnutrition targeting 255,000 children <5 years and PLW.

Objectives, Strategy and activities

The overall objective of the Nutrition Cluster is "to meet the immediate nutrition requirements of flood affected people especially under five years children, pregnant and lactating women in the 22 focus districts". The Nutrition Cluster will prioritize the provision of assistance to highly vulnerable groups such as children aged <5 years and PLW. To achieve its objective the Nutrition Cluster will work under the guidance and leadership of the Ministry of Health of the GoN to assess the nutrition context in the event of a disaster event.

Targeting strategy

Target population are vulnerable groups (under five years girls and boys, pregnant and lactating women) who will be supported through the provision of blanket supplementary feeding and micronutrients supplements as preventive approach; and targeted supplementary feeding for the treatment of moderate acute malnutrition (MAM) and therapeutic feeding for the treatment of severe acute malnutrition (SAM).

Against the overall caseload of targeted priority population, the total need is estimated as; US\$ 4.8 million.

The Nutrition Cluster will undertake the following key priority activities:

Preventive approach: To protect the nutritional status of disaster affected persons blanket supplementary feeding will be prioritized for vulnerable groups such as pregnant and lactating women and children aged 6-59 months. Access to food and the maintenance nutritional status are critical determinants of people's survival in a disaster. Undernutrition is a public health problem and among the leading causes of death, whether directly or indirectly, during times of crisis. The protection, promotion and support of breastfeeding and infant and young child feeding, through the creation of breastfeeding spaces, provision of skilled counselling, and proper management of breastmilk substitutes in accordance with the International Code of Marketing of Breastmilk Substitutes, is lifesaving and helps to protect the nutritional status of breastfeeding children in an emergency setting. Therefore, the following activities will be initiated immediate after flood to the people in need of nutrition services:

- Blanket supplementary feeding for children aged 6-59 months: 50,494 persons,
- Blanket supplementary feeding of c pregnant and lactating women: 25,247 persons
- MNPs for 6-59 months children: 25,248 persons

Treatment approach: In order to provide treatment services to the children with moderate acute malnutrition (MAM) and severe acute malnutrition (SAM) of children <5 years and to prevent and manage micro-nutrients deficiency disorders the following activities will be implemented:

- Management of severe acute malnutrition (SAM) of children aged <5 years; 17,673 persons
- Treatment of moderate acute malnutrition of the children 6-59 months: 7,574 persons

All children whoever will be participate in the services will have infant and young child feeding counselling services including maternal nutrition counselling, and counselling on the complementary feeding also.

Apart from the above-mentioned prioritized activities and population in need, distribution of multiple micro-nutrient powder for home fortification to the children 6-59 months; and distribution of vitamin A capsules to 6-59 months children and supplementation of Iron and Folic Acid (IFA) to pregnant and postnatal women. Community mobilization will be an integral part of all the above activities to help ensure increased uptake of services, community awareness, participation and ownership.

Operational Plan for Emergency Nutrition Response

Support of nutritional needs in emergencies is lifesaving. Key actions will include protecting nutritional status of vulnerable groups through the provision of supplementary feeding, protecting, promoting and supporting breastfeeding, prevention and management of micro-nutrient deficiency disorders, and management of severe and moderate acute malnutrition.

Immediately following the request for assistance from the GoN, Nutrition Cluster members responsible for supplementary and therapeutic feeding will assess availability of stocks and procure food for distribution among identified vulnerable groups (WFP for supplementary feeding to prevent and/or treat moderate acute malnutrition (MAM); UNICEF for therapeutic feeding to treat severe acute malnutrition (SAM), IYCF, micro-nutrient supplementation, vitamin A, iron, and folic acid tablet distribution).

Regarding management of acute malnutrition, there are 19 Nutrition Rehabilitation Homes (NRH) in Nepal, with locations in ten of the priority districts (Jhapa, Morang, Saptari, Dhanusha, Parsa, Banke, Dang, Surkhet, Kailali and Kanchanpur), which are run jointly by the GoN and Nepal Youth Foundation. UNICEF currently provides F100,

F75 and anthropometric equipment to the GoN to utilize in the NRHs. In a disaster, approximately 15-20 children with severe acute malnutrition can be managed at the NRH at a time in each district. In total, more than 200 SAM children can be managed at a time in all ten districts in the NRH.

Out of the 22 priority districts, 15 have ongoing integrated management of acute malnutrition (IMAM) programmes with the support of UNICEF and GoN. The districts are Saptari, Siraha, Dhanusha, Mahottari, Sarlahi, Rautahat, Bara, Parsa, Nawalparasi, Kapilvastu, Dang, Banke, Bardiya, Kailali and Kanchanpur. In these districts, all support has been provided by UNICEF including RUTF, anthropometric equipment, training/capacity building and other necessary support for the IMAM programme. In these districts, all health workers and female community health volunteers (FCHVs) are trained on IMAM activities, as well as protecting, promoting and supporting of breast feeding, infant and young children feeding (IYCF), management of SAM, and management of acute malnutrition with medical complications. However, refresher training needs to be provided to those health workers and FCHVs to upgrade their knowledge and skills to address the issues on nutrition in emergencies. With this, micronutrient supplementation can also be managed easily in these districts.

UNICEF has prepositioned stocks of emergency nutrition supplies such as RUTF for up to 1,500 severe acutely malnourished children, micronutrient powder (MNP) for up to 20,000 children ages 6-59 months, F75, F100, and ReSoMal, as well as anthropometric equipment. Immediately following a disaster, these materials can be utilized. Stocks will need to be replenished as soon as possible for use in the ongoing IMAM programmes. The above items are prepositioned in five different strategic locations: Pathalैया, Butwal, Nepalgunj, Dhangadhi and Kathmandu warehouses of Ministry of Health and Population of Government of Nepal. Nutrition cluster will have following priority preparedness actions:

- Preparation of flood response contingency plan for nutrition cluster
- Prepositioning of supplies in the said location
- 3W Mapping
- HR training and HR roster
- TORs of nutrition cluster and technical working groups
- Nutrition cluster operating guideline
- Simulation exercise among the cluster members

Supports Objective O1, O2 and O3		
Activities	Indicator	Target
Strengthen coordination mechanism	Establish and strengthen effective nutrition cluster coordination mechanism link with other clusters/sectors	All nutrition partners/actors working at national levels lead by MoHP co-leading by UNICEF
Nutrition assessment and surveillance	Proportion of children age 6-59 months who are screened by using MUAC tape	All children age 6-59 months in the affected districts
Promote, protect and support for early initiation, exclusive breast feeding targeting to all 0-6 months children	# of organizations providing unsolicited donations, distribution and use of breast milk substitutes or milk powder	0 (immediately after disaster onwards)
	Proportion of affected mothers and children requiring support received counselling services	# dependent on caseload/assessment (100% coverage of all lactating women requiring support) – however, it should be initiated as early as possible
Support for on time and appropriate complementary feeding targeting to 6-23 months children with continuation of breast feeding	Proportion of affected mothers and children requiring support received counselling services on complementary feeding with continuation of breast feeding	# dependent on caseload/assessment (100% coverage of all lactating women requiring support) – however, it should be initiated as early as possible
Provide blanket supplementary food for vulnerable groups (pregnant and lactating women, children 6-59 months, persons living with HIV/TB)	Proportion of people who meet the criteria for blanket supplementary feeding who receive supplementary feeding rations	90% in camp setting; 75% in urban area 50% in rural area
Treat moderate acute malnutrition of children 6-59 months, pregnant and lactating women	Proportion of children 6-59 months with moderate acute malnutrition who are treated moderate acute malnutrition	90% in camp setting; 75% in urban area 50% in rural area
	Proportion of acute malnutrition of pregnant and lactating women who are treated acute malnutrition	
Treat Severe Acute Malnutrition of children 6-59 months	Proportion of children 6-59 months with severe acute malnutrition children who are treated moderate acute malnutrition	90% in camp setting; 75% in urban area 50% in rural area

Micronutrient for children and women	Proportion of children age 6-59 months who receive multiple micro-nutrient powder for home fortification of nutritious food	90% in camps and urban areas, >80% in rural areas
	Proportion of children age 6-59 months who are supplemented Vitamin A capsules	
	Proportion of pregnant and postnatal women who receive Iron and Folic Acid tablets as per rules	
	Proportion of children suffering from diarrhea who receive zinc tablets with enough ORS	
	Proportion of pregnant and lactating women who are screened by using MUAC tape	All pregnant and lactating women in the affected areas

Food Security Cluster



World Food Programme (WFP)

Contact information: Naoki Maegawa (naoki.maegawa@wfp.org)

In-country response capacity (confirmed) as of April 2019

Finances:

WFP can access US\$500,000 internally within 72 hours although such funds must be repaid. This support will be available to provide immediate life-saving in-kind food and/or cash assistance to around 25% of affected people estimated to be critically food insecure people during monsoon floods. Through this immediate response mechanism, WFP can procure the required food commodities immediately from local suppliers and/or distribute cash given the availability, functionality, accessibility and capacity of the nearby market upon GoN request. WFP warehouses are in Nepalgunj, Dhangadhi and Kathmandu for food storage.

Relief supplies:

The Food Security Cluster will assess in-country food stocks, including those managed by the Nepal Food Corporation, in the event of a disaster event. WFP has an agreement with Nepal Food Corporation (NFC) to immediately supply the emergency food from NFC stocks. Through this agreement, WFP will procure up to 1,000 MT of raw rice and 200 MT pulses/beans from NFC. In addition, WFP has updated short-list of food suppliers who can supply the food required by WFP in emergency.

The assistance can be in-kind or cash based on the assessment of market situation. WFP regularly carries out market situation monitoring. In non-emergency situation, markets are functioning normally. However, the markets may get disrupted/dysfunctional depending on the level of emergency/disaster and geographic location. Normally in the Terai, the disrupted markets resume within a week time. Based on 2017 flood experience, the market was not dysfunctional, so, WFP used both modality – cash and food, considering market functionality, size, availability of food, distance from affected population, beneficiaries' preference etc. WFP follows the post-disaster rapid market assessment to decide the transfer modality in any emergency operation.

Targeting strategy

Out of the overall caseload of 1.26 million people, an estimated 900,000 people in flood affected areas will be food insecure, as per experience of 2017 flood and the 2017 post-flood food security situation assessment carried out by Government and WFP through NeKSAP system. As suggested by the assessment, of this number, around 550,000 is expected to need the food assistance at initial stage. However, only around one third (some 300,000 people) is expected to be critically food insecure requiring life-saving food assistance as an immediate priority.

The Cluster members will agree upon the targeting mechanism and criteria, which may be on a geographic basis using a combination of physical access, resources and other context-specific factors. The Cluster will then

determine an initial coordinated response plan. The specific attention will be given to vulnerable groups with particular needs i.e. disabled people, women, children, marginalized groups, poorest of the poor and severely food insecure people. In close coordination with local government authorities and other stakeholders, the major gaps such as geographical coverage as well as beneficiary category gaps will be identified and adjustment be made. The response strategy will be revised when new information such as IRA data is gathered. The focus will be to deliver the most appropriate targeted response to the right people at the right time, minimize food security gaps and ensure consistency of relief services through effective coordination among the relevant clusters i.e. nutrition, logistics, shelter, WASH, camp coordination and management etc. The cross-cutting issues such as gender and protection will be incorporated throughout the process.

Effective response to humanitarian needs at the onset of a crisis depends on the capacities and resources available with the local-government and humanitarian agencies. The estimated funding requirement to address the critical food needs of severely food insecure people affected by the floods is estimated at US\$6.8 million.

Objectives and activities

The first objective of the coordinated response includes meeting the immediate food needs of flood-affected people in the 36 target districts, as well as avoiding nutritional deterioration among the affected population. To achieve this objective, the food security context will be independently assessed by Cluster the partners under the guidance and leadership of the GoN. The Food Security Cluster will also coordinate with relevant Clusters.

The Food Security Cluster will undertake the following priority activities (food and cash assistance):

- Distribution of ready to eat food;
- General food distribution;
- Unconditional market-based solutions (cash and vouchers);
- Conditional market-based solutions (cash and vouchers, food for assets/training)

Priority preparedness action for the implementation of the above indicated activities:

- Ensuring availability of the funding for immediate response.
- Standby agreement with the partners (Nepal Red Cross Society in case of WFP) and agricultural seed suppliers (FAO).
- Memorandum of Understanding with Nepal Food Cooperation (NFC) for procurement of the food during emergencies.
- Agreement with the financial service providers for cash-based transfers implementation.

Close and effective collaboration with the Nutrition Cluster will also support achievement towards its objective.

In order to meet the immediate food and nutrition needs of flood-affected populations, food and nutrition assistance will be initiated as per the above response activities. Wherever possible, a comprehensive basket of fortified food commodities will be distributed. If markets are functional, food assistance for assets programmes could be delivered as cash and/or voucher, conditional or unconditional. Activity implementation will uphold the core humanitarian principles of independence, humanity, impartiality and neutrality.

Supports Objective O1, O2 and O3		
Activities	Indicator	Target
Distribute ready to eat food, conduct general food distribution, provide unconditional market-based solutions (cash and vouchers), and/or conditional market-based solutions (cash and vouchers, food for assets/training)	Proportion of women, men, boys and girls receiving food assistance, disaggregated by activity, beneficiary category, sex, food, non-food items, cash transfers and vouchers	100% of critically food insecure people. (Around 25% of the affected population)
	Quantity of food assistance distributed, disaggregated by type	Depends on scale of disaster
	Total amount of cash transferred to targeted beneficiaries, disaggregated by sex and beneficiary category, as % of planned	Depends on scale of disaster
	Cross-cutting indicators	
	Proportion of assisted women who make decisions over the use of cash, vouchers or food within the household	25% of assisted women
	Proportion of assisted men who make decisions over the use of cash, vouchers or food within the household	25% of assisted men
	Proportion of assisted women and men who make decisions over the use of cash, vouchers or food within the household	50% of assisted people
	Proportion of assisted people who do not experience safety problems travelling to, from and/or at WFP programme sites	80% of assisted people
Rapid emergency food security and vulnerability assessment	100% of affected people	
Early recovery activities for the disrupted agriculture services (FAO)	Distribution of vegetable seed for most affected farmers (applied in the affected paddy field)	100%
	Distribution of wheat seed for most affected farmers	30%
	Distribution of maize seed for most affected farmers	35%
	Provision of agriculture tools for the most affected farmers	40%
	Rehabilitation of disrupted livelihood infrastructures (irrigation)	50% of those in need.
	Reclamation of the sand casted areas with suitable crop species	40% of those in need.
	Support storage facilities to store immediate crop harvest	20% of those in need.
	Support to rehabilitate the livestock shelters and veterinary services	30% of those in need.
	Rehabilitation of fish ponds and fingerlings	40% of those in need.
	Rehabilitation of agriculture infrastructures facilities such as storage, processing, marketing etc	10% of those in need.

WASH Cluster



United Nations Children's Fund (UNICEF)

Contact information: Surendra Babu Dhakal (sbdhakal@unicef.org)

In-country response capacity (confirmed) as of April 2019

Finances:

UNICEF can mobilize up to US\$60,000 for immediate response actions. Cluster partners can mobilize up to a total of US\$200,000 immediately for emergency response.

Relief supplies:

WASH Cluster partners have the capacity to meet the immediate needs of 37,000 households (200,000 people).

NRCS, Care, Save the Children, and UNICEF jointly have physical prepositioned stocks sufficient for 37,000 households (Nepal Red Cross Society, UNICEF, Care and Save the Children have preposition stocks to cover 12,000; 10,000; 5,000 and 10,000 HHs respectively) and other Cluster partners holding supplies for a further 1,000 households; which will be about 47 per cent of the in-need population. At times of emergency, cluster partners can make further decisions on the additional resources to cover additional 57 per cent of the targeted population (additional 150,000 population).

Targeting strategy

Specific aspects of the WASH's Cluster response will target the about 30 per cent of the most likely affected population, which is about 80 per cent of the in-need population. Special focus will be given to women, adolescent, children and other vulnerable population. Depending upon the status of affected people (in camp setting or in host communities), figure for people in need and target population may vary.

WASH specific immediate lifesaving interventions will reach to 200,000 population which is considered to be the priority population for WASH cluster, which is about 60 per cent of the target population and 16 per cent of the whole affected population.

The WASH Cluster will also target those persons who are unable to access safe drinking water and safe and dignified WASH facilities such as latrines/toilets and bathing spaces. The WASH Cluster will provide support that is appropriate for all affected population and specific needs of children, adolescent, women, people with disability. WASH Cluster address the needs of both displaced persons (including those living in temporary, spontaneous settlements, public spaces and/or camps) and in host communities.

The WASH Cluster will require US\$4 million to meet the immediate WASH needs of flood affected persons for emergency response.

Objectives and activities

The overall aim of the WASH Cluster is to address the immediate WASH needs of disaster affected people and prevent deterioration of life because of limited WASH facilities in humanitarian context. The Cluster will promote effective inter-Cluster coordination to ensure WASH partners are active for providing humanitarian assistance during emergency situations following humanitarian principles and standards.

The immediate response of the WASH Cluster will focus on five priority activities with an emphasis on the avoidance of waterborne risks:

- **Safe Water Supply:** Ensure safe and equitable access to a sufficient quantity of water for drinking, cooking and personal & domestic hygiene.
- **Sanitation:** Establishment of an appropriate number of toilets located near the dwellings of disaster affected persons and/or in camps. Toilets will be established in a manner that enables safe and dignified usage by all members of society i.e. toilets located close to dwellings to allow affected persons to access in a safe manner on a 24/7 basis including at night.
- **Hygiene promotion:** The provision of culturally sensitive and appropriate information to the affected population to promote safe hygiene practices i.e. ensure that affected people have adequate knowledge and skills of managing and maintenance hygiene behaviours and facilities.
- **Solid and liquid waste management:** Ensure that disaster affected communities are not exposed to unnecessary risks associated with solid (including medical) and liquid waste through activities which promote safe, effective and convenient disposal.
- **Vector control:** Ensure that disaster affected communities are not exposed to unnecessary health risks by addressing water-related vector borne disease considerations. i.e. protection of all affected families from nuisance vectors and are living in vector free environment.

Within 24 hours of occurrence of disaster event, the WASH Cluster lead, the Ministry of Water Supply / Department of Water Supply and Sewerage Management, will convene a WASH Cluster meeting. UNICEF will provide coordination support to facilitate effective functioning of the Cluster.

The WASH Cluster will facilitate early responses via two initial activities:

- A preliminary scenario based on existing pre-crisis information. The provincial, districts or municipalities profiles can provide the Cluster with important information to support early and effective responses.
- WASH Cluster partners will support the implementation of IRA (within 48 hours) and cluster specific assessments if the need arise. Detailed assessments will enable the HCT to more accurately appraise humanitarian needs and to design appropriate response strategies.

Based on the request of municipal/district or provincial authorities, the WASH Cluster will assess available capacities including supplies, finances and human resources to determine gaps, and engage in fundraising, including procedures to access emergency response funds.

WASH Cluster partners will use existing propositioning stocks and resources to mobilise for immediate lifesaving response and will closely work with other clusters through HCT for flash appeal for additional support. Cluster partners will also seek support from their own organisational mechanism.

Priority preparedness actions include:

- Cluster partners capacity mapping is updated
- Required assessment tools are readily available

Coordination with respective federal. Provincial and local governments are carried out for any actions to take during monsoon

Supports Objective O1, O2 and O3		
Activities	Indicator	Target
Provision of safe and equitable access to a sufficient quantity of water for drinking, cooking and personal and domestic hygiene. Public water points are sufficiently close to households to enable use of the minimum water requirement.)	Initial Damage assessed /estimated and reported to WASH cluster on the water supply systems/facilities	Assessments undertaken on critical WASH infrastructure
	Strategy for safe water provision developed based on damage assessment, initial information and understanding/agreement of the district-level WASH Cluster	Improvement Plan (Maintenance or reconstruction of the water supply system) developed and approved by the WASH cluster
	Number of water supply systems (hand pumps, dug-wells, piped water supply systems) renovated in the affected area	100% of target households
	Number of HHs receiving water purification solutions for minimum of 30 days	
	Two water storage vessels (Bucket/Jerrycan - for drinking and cleaning) with dispensers(mug/jug) provided to each affected household	
	Number of household drinking water tested for residual chlorine and /or microbial contamination	1% of households
	Number of Volunteers trained for operation and maintenance of water supply systems	Target depending on community or camp setup and the type of water supply needs
	Number of temporary medical camps, temporary learning centers/ ECD sites provided with water supply facilities	Target depending on the need and request from temporary medical camps, temporary learning centers/ ECD sites or providers of it

Education Cluster



United Nations Children's Fund (UNICEF) / Save the Children

Contact information: Sabina Joshi (sajoshi@unicef.org) &

Laxmi Paudyal (laxmi.paudyal@savethechildren.org)

In-country response capacity (confirmed) as of April 2019

Finances:

US\$ 3 million is needed to reach 100,000 targeted flood affected children. The Education Cluster can mobilize prepositioning supplies worth US\$ 500,000 for immediate response actions. This is sufficient to meet 17 % of the financial needs of the overall Cluster response plan.

Targeting strategy

Out of the 1.26 million affected persons, it is estimated that 430,000 will be children of school going age, meaning between 3 and 18 years old. Less than half of these children, roughly 200,000 will be in need of education support. The Education Cluster will target 100,000 of the most disadvantaged students for education response based on an Education Needs Assessment, focusing interventions in economically and socially marginalized geographical areas. Target numbers are further disaggregated into age groups according to pre-primary, primary and secondary education, displayed in the table below.

With the present stock of prepositioned supplies, the Cluster can meet the needs of 40,000 students with standard supplies, reaching nearly all 15,000 pre-primary children, and 25,000 of the primary and secondary students. The priority population for first response is the 40,000 children that can be reached with in-country capacity, targeting children from socially marginalized groups in the most affected schools. The response gap is 60,000 students in need for education supplies, in addition to the need for infrastructural repairs of schools. Non-standard supplies can be used to cover some of this gap.

The Education Cluster response targets children according to schools, meaning that the same schools are targeted for distribution of education supplies, infrastructural repairs and any additional support. Children in targeted schools receive both school kits and individual stationary kits (child and adolescent kit).

Age Group	Cluster target (23% of overall affected caseload)	Prepositioned Capacity/Priority population
3-5 years (Pre-primary/ECD)	15000	14575
6-12 years (Primary)	55000	24 960
13-18 years (Secondary)	30000	
TOTAL	100000	39535

In addition to the above, the Cluster also targets the following interventions in marginalized communities:

- Debris clearance in a total of 200 community schools which will have damaged classrooms (walls and boundary walls) and require support.
- Repair and restoration of a total of 200 community schools which will have damaged WASH facilities and will require support.
- Establishment of 200 Temporary Learning Centres as per need.
- Emergency response and recovery orientation to a total of 2000 teachers and School Management Committee (SMC) members in affected schools.

Other response considerations:

- The local community and local government resources can be mobilized for debris clearance in schools.
- Coordination is needed with local governments and the Shelter Cluster on use of schools as temporary shelters.
- Coordination with Protection Cluster on the potential need for psycho-social support to affected children, particularly for adolescents.
- Coordination is needed with the WASH Cluster and the Food Cluster on WASH in schools and any need for school meals.
- In the case of displaced populations in camp settings, plan for Temporary Learning Centres in coordination with relevant clusters.
- Distribution of textbooks to the affected students is the responsibility of the government.

Objectives and activities

The aims and objectives of the Cluster's contingency plans are to:

- Restore normalcy in the lives of children and teachers especially in the initial first two weeks following a flood event.
- Ensure all girls and boys, especially children with disabilities and children from disadvantaged families have continued access to quality education opportunities in enabling, empowering, and safe school environment.
- continued access to quality education opportunities in enabling, empowering, and safe school environment.
- Through quality, age-appropriate learning, girls and boys acquire lifesaving disaster preparedness and response skills, and benefit from psychosocial support to restore wellbeing and promote long-term resilience.
- Strengthening cluster preparedness through improved coordination and capacity building of schools and local governments by mainstreaming Comprehensive School Safety.

Supports Objective O1 and O5

Activities	Indicator	Target
Distribute ECED supplies to affected schools	Number of floods affected students accessing ECD supplies	15,000 students
Distribute emergency school supplies (school kits, student kits) to the affected schools	Number of floods affected students accessing education supplies in emergencies	85,000 students

Establish safe, temporary classrooms including Early Childhood Centers classes in affected area	Number of students accessing education in emergencies (through accessing temporary learning space construction or rehabilitated classrooms)	As per need assessment
Cleaning, repair and maintenance of classroom and school premises and furniture	Number of schools benefiting from cleaning, repair and maintenance of classrooms (including furniture) and school premises	200 schools
Establish adequate WASH facilities in schools, temporary classrooms and ECD centers.	Number of schools and temporary learning centres supported for functional WASH facilities in emergencies	200 schools/ temporary learning centres
Training of teachers on psychosocial support (PSS) in collaboration with the Protection Cluster and provide PSS to the affected students	Number of students benefiting from PSS	As per need assessment
Orientation for teachers and SMC on disaster recovery	Number of teachers trained on disaster recovery	1000 school teachers and 1000 SMC members

Early Recovery Cluster



UNDP

Contact information: Kedar Babu Dhungana (kedar.dhungana@undp.org)

In-country response capacity (confirmed) as of April 2019

Finances:

UNDP can access a sum of \$ 500,000 internally following declaration of L2 crisis. Likewise, \$ 200,000 will be available with ER cluster member INGOs within a week time after declaration of the crisis.

Total required budget for Early Recovery Cluster is USD 23,000,00. The Early Recovery Cluster members can mobilize about USD 700,000 following declaration of L2 emergency or disaster event of significant scale (following declaration of L2 crisis UNDP 500,000 via HQ; Dan Church Aid via HQ, Red Cross through IFRC, Oxfam, Save the Children, Care, WVI, Tearfund, LWF, LWR and others).

Targeting strategy

Against the overall caseload of 1.26 million people the Early Recovery will target the following:

Out of the affected population of 1.26 million, as per the anticipated scenario, also reflecting learnings from past, some 63,000 households will be in a need of early recovery intervention support with components focused on livelihood and emergency income generation opportunities. Out of 63,000 households most at need will be some 35,000 households of which the ER cluster will prioritize 15,000 households from the worst affected areas. Priority will be given on women headed households, households from marginalized communities with almost no means of livelihood left out and families having old aged and with disability members. Likewise, some 75 community infrastructures will also be targeted for restoration, also directly contributing to relief management, and geographical area specific intervention on safe disposal of disaster waste will be carried out by the ER cluster within the first 30 days of the aftermath.

Response strategy will be updated by the ER Cluster when new data/ IRA data will be available. The Cluster will also look to provide cash-based support in the first instance where it is appropriate to do so.

In meeting above mentioned priority interventions, directly benefiting 15,000 households the Cluster will require a total of US\$ 2.30 million of which a total amount of US\$ 1.60 million will be unmet.

Objectives and activities

The Cluster's overall objective is to ensure that the early recovery needs of affected communities are addressed specifically those related to livelihoods and income generation.

Other specific objectives include:

- To ensure resumption of livelihoods and income
- To rehabilitate essential community infrastructure for access to relief and other basic services
- To prevent public health hazard through safe disposal of disaster waste

Minimum Preparedness Activities for Flood Response 2019 for the cluster are:

- Agree on minimum assessment requirement with MoFAGA, also in coordination with MoHA/NEOC in line with existing assessment tools/templates: by 10th of June 2019, and share with cluster members
- Review financial opportunities for ER intervention with/among cluster members: by 10th June 2019
- Review and update ER cluster ToR in coordination with Cluster Lead, the MoFAGA: by 10th of June 2019
- Coordinate with Cash Working Group for potential cash-based intervention modalities
- Develop/review ER Introductory material/PPT for sharing with provinces and NP/GPs in case of a disaster response: 15th of June 2019

Supports Objective O1 and O5

Activities	Indicator	Target
Resumption of livelihoods and income generation activities	# of flood affected households who have received financial/in-kind assistance to resume cultivation # of flood affected households who have received financial/in-kind assistance to re-stock livestock/poultry/fishery/ # of flood affected households who have received financial assistance to replace productive assets/enterprises affected	
Rehabilitation of essential community infrastructure	# of essential community infrastructure rehabilitated # of people who benefitted from access to relief and other basic services # of flood affected people who benefitted from emergency employment via cash-for-work schemes	75 community infrastructure initiatives in most affected Gaunpalika/ Nagarpalika
Safe disposal of disaster waste to prevent public health hazards	# of dead bodies/livestock/poultry carcasses safely and appropriately disposed # tons/litres of disaster waste safely disposed	Target depending on need

ANNEX II:

KEY CONTACTS

Government of Nepal		
1	MoHA, Disaster and Conflict Management Division Ms. Indu Ghimire, Joint Secretary	Tel: 98511400005 Email: ighimire027@gmail.com
2	Mr. Bamshi Kumar Acharya, Under Secretary	Tel: 9851097651 Email: bamshia18@yahoo.com
3	NATIONAL EMERGENCY OPERATION CENTRE (NEOC) Mr. Bed Nidhi Khanal, Chief, NEOC	Tel: 9851073030 Email: bedkhanal@gmail.com
FOLLOWING A DISASTER IMMEDIATELY CONTACT		
1	OCHA Regional Office for Asia and the Pacific Markus Werne, Head of Office	Tel. +66819178940 Email: werne@un.org
2	If further assistance is needed, OCHA Emergency Relief Coordination Centre (ERCC) 24/7, Geneva	Tel: +41229172010
OTHER KEY CONTACTS		
1	Emergency Relief Coordinator (ERC) – New York Mr. Mark Lowcock	Tel: +1 212 963 2738 Email: lowcock@un.org
2	Head of Operations- OCHA ROAP Bangkok Mr. Kristen Knutson	Tel. +66 2288 2572 Email: knutson@un.org
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7	Representative, UNHCR Bushra Halepota	Email: halepota@unhcr.org
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HCT: Cluster Co-Leads		
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10	EMERGENCY COMMUNICATION Bhawana Upadhyay	Tel: 9851047841 Email: bhawana.upadhyay@wfp.org
11	EARLY RECOVERY Vijaya Singh UNDP Kedar Dhungana UNDP	Tel: 9851041653 Email: vijaya.singh@undp.org Tel: 9851007816 Email: kedar.dhungana@undp.org

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2	USAID Santosh Gyawali	Tel: 9801021657 Email: sagyawali@usaid.gov
3	ECHO Piush Kayastha	Tel: 9851016614 Email: piush.kayastha@echofield.eu
AIN Representatives		
1	Lora Wuennenberg Care Nepal	Tel: 981020290 Email: wuennenberg@care.org

ANNEX III: SOP guidance

THE FIRST 48 hours

PHASE	PROCEDURE	WHO
Early Warning		
HOUR 0*	Contact RCO to inform of the threat and cross-check information at field level	All + RCO
	Alert RC/	RCO
	Contact Government/ MoHA /NEOC to inform/verify threat and assess whether international assistance is required.	RC/HC + RCO
H0 - 3	Alert HCT and Co-clusters leads	RCO
	Convene meeting of the KINWG and provide advice to the HCT, Principals about whether to trigger the monsoon ERP and provide an initial scenario definition.	RCO
	Review Co-cluster operational delivery plans and update stockpiles	RCO + Co- clusters
H6	Send Flash Update (email) to key partners	RCO
	Inform OCHA Regional Office	RC/HC + RCO
	Inform OCHA HQ, including UNDAC as required	OCHA
H12	Analyze possible need for an UNDAC team	HCT
	Review capacity to respond (information on available stocks, personnel Available assessments, staff deployable for a possible response, including capacity of donors/embassies)	HCT and Co-cluster leads
	Share information on NRCS capacity	IFRC
	Share information on UN agencies' capacity	RCO
	Share information on NGO capacity	AIN
H24	Gather relevant data and maps	RCO
	Assign/confirm reporting and information management focal points	Co-clusters + IMWG
	Convene HCT meeting (define inter-agency response plans and additional cluster leads on standby)	HCT
H48	Disseminate early warning messages to potentially affected communities	Comms Group

ANNEX IV

FUNDING REQUIREMENTS

In-country humanitarian financing arrangements

Nepal lacks a pooled humanitarian fund or other coordinated funding mechanism through which response activities are resourced. This contingency plan can be used to support resource mobilization efforts as it conveys the extent of response capacity in-country and relates this to potential humanitarian caseloads illustrating, in financial terms, the extent of response gaps. Such information can provide the GoN and donors with an approximate sense of required finances which can be updated following detailed needs assessments.

Financial requirements

The information presented in the table, below, takes into account confirmed in-country Cluster capacity in terms of access to finances and relief items against an overall caseload of 1.26 million people affected by floods.

Cluster	Funding required /response gap US\$
Protection	1.209 million
Food Security	6.8 million
Nutrition	4.8 million
WASH	4.0 million
Health	1.88 million
Shelter	4.6 million
Education	2.03 million
Early Recovery	1.6 million
Total	US\$26.92 million