Contingency Plan for COVID-19
Metta Development Foundation (Metta)

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Metta’s Contingency Plan for COVID-19
1. INTRODUCTION

The probability of COVID-19 (corona virus disease), affecting Metta staff and partners is there and therefore Metta needs to be prepared for that.

This is a short list of actions and recommendations to be taken into account and prepare.

Some international key preparedness planning principles will be taken into account such as:

- Expect the worst
- Plan simple solutions
- Plan for what you can control
- Communications systems are essential

This Plan focus only on how to maintain a minimal capacity of key services within Metta.

Depending on the different scenarios this plan will be adapted or reviewed by the Crisis Committee.

2. PREVENTIVE MEASURES

All Metta staff must apply the recommendations provided by WHO (https://www.who.int/home) and Myanmar Ministry of Health and Sports, mainly:

✓ washing hands regularly.
✓ avoiding touching your face and particularly the mouth, eyes and nose.
✓ avoid interacting with people that may show any synthon of the disease, particularly coughing and fever and if so, keep a distance of at least 1meter from the person.
✓ Clean surfaces regularly.
3. **CRISIS SCENARIO:**

This scenario is based on the following assumptions:

- WHO announce COVID 19 as pandemic
- Myanmar Government announced stage of emergency.
- Government official announcement of cases identified by Ministry of Health and Sport; spread of affected people in difference places, and presentation of patients’ mortality.
- Some Metta staff are affected by COVID19 and several staff are working on areas with people affected by COVID19.
- Restricted movements are imposed.
- Some limitations on international and national travels are imposed.
- KCA information on COVID19 is very limited.
- Quarantine announcement where Metta’s offices are located.
- Some breakouts of Metta’s on–line communication systems happen.
- Public transportation restrictions and disruption of the economic system.
- Shortage of food and basic commodities in the market.
- Not enough space at Government’s hospitals in Yangon, Mandalay and Naypyitaw that are prepared for COVID-19 patients.
- Not enough and/or shortage of medical supply in hospitals and not enough medical personnel to deal with the cases.
- Government may order to stay inside at home in some areas.
- Disruption of livelihood activities and unemployment increase due to closing down of businesses, factories, companies, etc.
- Disruption of financial services such as banking, ATM machines, mobile money transfer, etc.

4. **CRISIS COMMITTEE:**

This plan and any related decision will be managed by a COVID–19 Crisis Committee, led by Metta’s ED, with the assistance of Naw Ja, Saw Min Naing and Ja Nu. If any of them are affected in a way or another they will be replaced by a Metta SMT member following this list by this order: Nyi Nyi Zaw, Ye Lynn Htoo, San Wai, Awn Ra, Wutyi Soe, Thet Mar Soe and Saw Hsar Htoo and Thet Nwe Soe.
The active members of the SMT will act as the Crisis Committee and will support the ED or the delegated person that will act as the crisis manager. Similar sub committees will be formed at branch level led by the Branch Office Coordinator (BOC).

The Crisis Committee will regularly check and update the risks involved, based on reports available, from WHO, Ministry of Health and Sports, Health Departments of EAOs, and Metta Brach offices.

This contingency plan should be part of the security management protocol, and integrated there.

During the crisis a command management system will be applied. In case of communication breakdown, branch offices have high degree of autonomy. That means: decisions will have a reduce consultation process and should be executed with no or minimal discussion.

It is the responsibility of the crisis manager to declare when this plan should be implemented and when the crisis will be considered as overcome for the purpose of this plan. The committee will provide necessary timely instructions based on the situation.

5. **SPECIFIC ACTIONS:**

5.1 Management:

- As far as possible management areas of responsibility (departments) will be kept as normal, although depending on the context some areas may require de-prioritisation while others should be prioritised.

- As a safety-net the SMT will be organised in three subgroups of four/five members each to ensure that each member will have a couple of peers to delegate the most essential part of her/his work in case she–he is affected by COVID19. This is a proposal:

  - **Group 1:** Gum Sha Awng, Saw Min Naing, Ja Nu and Awn Ra (General Direction, Advocacy, Programmes and Humanitarian response)
o **Group 2:** Ding Rin Naw Ja, Nyi Nyi Zaw, Ye Lynn, Wutyi Soe, Thet Mar Soe, Thet Nwe Soe, Nay Lyin Phyo and Saw Hsar Htoo (Metta’s general management, Finances and funding, Human Resources, internal management, communications, relation with donors)

o **Group 3:** San Wai and Saw Min Naing all BOCs Branch offices coordination, and programme

- Each Manager should develop as soon as possible a simple document (maximum 4 pages) indicating the key priorities of her/his area and share it with the rest of the SMT, with any additional relevant information that may facilitate the handing over of responsibilities in case of emergency.

- In each Branch Office there must be an appointed deputy for the BOC, and a short adaptation of this plan for the Branch office.

- Finance department will articulate on-line banking system with adequate security control measure, in case conventional transferring systems are not available.

- In every change on the regular management system, specific, regular and intense control management measures will be put in place to ensure proper control and accountability. This should be recorded and documented and reported to the Crisis Committee.

**5.2 Working Priorities:**

- Depending on the severity of the crisis, priorities will be decided by the Crisis Committee if feasible, otherwise by the crisis manager.

- In case of severe emergency, the highest priority will be given to:
  1. Communication across Metta BO and HO, and with partners and donors
  2. Support to Metta’s staff working on humanitarian and development programmes resourcing them in order to maintain the most priority programmes (particularly humanitarian programmes)
  3. Keeping donors’ relationship
5.3 Communications:

- Communications is the most fragile area, it must be assumed that travelling will be reduced significantly and communications should be based on regular Skype and phone calls and emails and other on-line messenger options. Metta would limit travelling to risky areas during the crisis and the SMT members should authorize any international trip of her/his staff during the crisis.

- Metta’s Email service and internet server may break down or have frequent interruptions, due to failures in the providers or sickness of technical staff. In this case alternative private emails should be used. All staff to provide personal phone, email addresses, messenger to their respective managers and those to the Crisis Committee in case of emergency.

- SMT will have short weekly updates by phone-skype, during the crisis

5.4 Staff Security and Safety:

- Staff security and safety is a major concern of Metta, the security protocol will be reviewed and disseminated to all staff. The basic guidelines produced by the WHO will be distributed to all Metta staff in a simple format, and posters will be made and post in a visible place in all Metta’s offices and premises.

- Whenever advisable and feasible, staff will be authorised to work from home to reduce exposure of staff. This authorisation must be done by the respective managers for specific periods of time and could be cancelled at any time by the respective manager.

- Metta’s SMT members, or their peer delegates will provide follow up in the implementation of these measures by their staff.

- Depending on the impact of the COVID19 on Metta’s staff and their family members, Metta will articulate different modalities to support those affected and their relatives, using the healthcare pooled fund (of approximately USD 50,000) that Metta currently has. General criteria for the use of this Fund will apply, plus specific rules that the Crisis Committee will approve on due time depending on the context.