



Options for ensuring coverage for uninsured Red Cross and Red Crescent volunteers impacted by COVID-19

Guidance for National Societies

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Introduction

The COVID-19 pandemic is not only threatening communities around the world, it is also having a major impact on the carers and frontline, including volunteers. Some Red Cross and Red Crescent (RCRC) volunteers have contracted the virus and there will likely be many more in the months to come, even as precautions are taken. Sadly, some have already died due to the disease. Consistent with the IFRC Policy on Volunteering, National Societies (NS) have a well-acknowledged duty of care¹ to their volunteers. This includes the responsibility to reduce the risks volunteers face and to find solutions for those who fall ill but lack access to medical care or other critical support. It is essential that the NS leadership champions and strongly advocates for the duty of care toward volunteers, both through implementation of consistent actions and solutions throughout the organization (including HQ and branches) as well as through rallying support from partners, such as government authorities.

In many countries, volunteers are guaranteed coverage through general public health and social protection programmes or through pre-existing insurance arrangements. However, according to a recent survey, a number of NS report that some or all of their volunteers are currently not adequately covered by one of these means.²

The aim of this guidance document is to serve as an initial starting point for NS in that situation, to facilitate their consideration of options as well as to inform them about available avenues of international support. We hope that it will be useful both to NS leaders and volunteer managers.

It is an important responsibility to ensure the maximum possible implementation of the duty of care, reduce the risks volunteers face, and identify solutions to support those who fall ill. Generally, again, success in addressing the gaps will depend on the energy of NS leadership, acting as champions and rallying support, as needed.

In this regard, it is recommended that NS leaders swiftly take two steps:

- (1) Identify who among themselves will drive the process and be responsible for ensuring coverage for uninsured volunteers (for example the Secretary General), and
- (2) Draw a quick roadmap, identifying the steps to be taken at HQ and local branches, including to engage with authorities, and other practical solutions.

This document will certainly not answer every question and the IFRC is committed to providing additional, targeted technical advice as needed. Please contact the Head of IFRC Office or Regional Office if you need any further information. Note that the options presented here are not necessarily mutually exclusive and that international arrangements (for instance, those connected to the IFRC's global COVID appeal) may evolve over time.

¹ The IFRC's 2011 [Volunteering Policy](#), NSs committed to the protection of their volunteers, noting that, "(I)n certain circumstances, volunteers may themselves be vulnerable and National Societies ensure that their needs for assistance and protection are given due attention." They also expressly committed to insuring their volunteers against accidents.

² There are about 20 in this situation, known at the time of writing this Guidance.

1. Obtaining public coverage for volunteers

NSs are auxiliaries to the public authorities in the humanitarian field. Their volunteers are involved in complementing, supplementing and supporting government responses to the COVID-19 pandemic. It is, therefore, reasonable for NSs to request government to ensure access to medical care to RCRC volunteers who have developed COVID-19 as a result of their volunteering activities, and also to provide compensation to the families of RCRC volunteers who have died from COVID-19.

This section provides guidance to National Societies about how to advocate to government on this issue. It outlines three key steps that National Societies should take to prepare to request government for its support: (1) developing the key advocacy messages for government; (2) identifying who to approach; and (3) identifying how to approach them.

National Societies' advocacy efforts can be supported by IFRC or ICRC staff, in the country or the region. In particular, the IFRC Disaster Law Programme's Regional Coordinators are available to assist NS to advocate to government on this issue. Contacts are included in **Annex 1**.

a. Step one: Developing the key advocacy messages for government

The first step is to develop the key advocacy messages for government. An advocacy message has three components: a problem, a solution and a request. National Societies will need to carefully consider how to frame and communicate each of these components.

In the current circumstances, the request will likely be for government to introduce a law, regulation, decree or policy that provides: (a) free medical care for frontline volunteers, in particular RCRC volunteers, who have developed COVID-19; and/or (b) compensation to the families of RCRC volunteers who have died from COVID-19. This request may need to be adapted to be more specific or appropriate to the local context. A further alternative request may be for government to provide funding to the National Society, which the National Society can then use to establish its own funding mechanism for medical care and compensation.

National Societies will need to identify the key points and information that they can use to convince government to accept their request. There are three key arguments that National Societies should consider presenting: (a) the National Society's auxiliary role; (b) the National Society's contribution to the COVID-19 pandemic response; and (c) examples of best practice from other countries.

i. The auxiliary role

National Societies have a unique, legally enshrined role as auxiliary to the public authorities in the humanitarian field. They are responsible for complementing, supporting or supplementing government humanitarian activities.

The auxiliary role means that RCRC volunteers are, or should have the opportunity to be, an integral part of the government's response to COVID-19, working closely with government actors to support or complement their activities. It follows that RCRC volunteers should benefit from the

same or similar coverage as governmental emergency workers. In this respect, RCRC volunteers may be in a different position to volunteers for other civil society organizations.

In order to make this point, National Societies may wish to refer to national laws or policies that enshrine their auxiliary role and establish their mandate, roles and responsibilities. This will be especially important if the laws or policies require the National Societies to provide health or medical services. National Societies may also refer to relevant resolutions of the International Conference of the Red Cross and Red Crescent (which includes the state parties to the Geneva Conventions) including:

- [Resolution 2 of the 30th International Conference](#) of 2007 which recognizes that National Societies as auxiliaries enjoy “a specific and distinctive partnership [with government], entailing mutual responsibilities and benefits”; and
- [Resolution 4 of the 31st International Conference](#) of 2011 which calls on States to “facilitate the voluntary work of their National Society” and encourages relevant government departments to provide National Societies with a “predictable and regular flow of resources adapted to the[ir] operational needs”.

There is a risk that, in exchange for providing coverage to volunteers, government may request a National Society to conduct an activity that would be in conflict with the Fundamental Principles — for example, an activity that would not prioritize the most urgent cases of need. While National Societies do have a duty to consider seriously any request by their public authorities to carry out humanitarian activities with their mandate, they also have a duty to decline any such request and public authorities must respect a decision to decline a request³.

ii. The NS’s contribution to the COVID-19 pandemic response

National Societies should consider supporting their request by outlining the role that their volunteers are currently playing in the COVID-19 response. Some strategies to communicate the importance of their volunteers’ contributions include:

- providing a detailed and comprehensive description of the types of activities or services that volunteers are delivering;
- explaining how volunteers’ activities relate to the government’s own activities, especially if those activities fill a gap in, or enhance, government activities;
- quantifying the volunteer contribution using figures — for example, quantifying the number of volunteers involved or the number of persons who have received assistance;
- providing examples to illustrate how volunteer activities have made a tangible difference to a particular community or medical facility (e.g. a hospital or clinic).

National Societies should also consider referring to [Resolution 3 of the 33rd International Conference](#) of 2019 by which the states party to the Geneva Conventions and the RCRC movement committed to “tackle pandemics and epidemics together”. Resolution 3 specifically invited States “to enable and facilitate Movement components ... to contribute to a predictable and coordinated approach to epidemics and pandemics, including ... engagement with and support to affected communities”. Resolution 3 also recalled the importance of government departments providing National Societies with a predictable and regular flow of resources adapted to their operational needs.

³ Resolution 2 of the 30th International Conference

iii. Examples of best practice

National Societies should consider referring to examples of situations or countries where government has given special recognition to RCRC volunteers and has facilitated their volunteer activities by providing them with certain benefits or protections. The following examples may be helpful.

- In **Colombia**, there is a national law establishing a 'National Subsystem of Volunteer First Responders' comprising volunteers for the Civil Defence, the Fire Department and the Red Cross⁴. The law provides these volunteers with specified benefits in the areas of health, education and housing. In relation to health, volunteers are entitled to priority access to the government's subsidised healthcare schemes⁵.
- In **Vietnam**, the law provides that, if a person who is directly involved in Red Cross activities does not have health insurance, government will provide funding at an equivalent rate to that which would have been provided by health insurance.⁶ Further, if the person sustains an injury that reduces their working capacity by 21% or more, they may be eligible for the same benefits that apply to soldiers wounded in action.⁷
- In **Laos**, the law provides that volunteers are entitled to healthcare services in the event of medical issues arising from their voluntary service to Laos Red Cross.⁸

b. Step two: Identifying whom to approach

The second step that the leadership of a National Societies should take is to identify the person, department or agency that has the power to grant the request. Some National Societies may have access to the President or Prime Minister, in which case this person is likely to be the best person to ask. However, where this is not possible, the National Society may need to identify two people to approach: one in relation to medical care and another in relation to compensation. For example, the Minister for Health may be the appropriate person to approach in relation to free medical care for volunteers, while the Minister for Social Services or the Minister for Internal Affairs may be the appropriate person to approach in relation to compensation for families of volunteers.

c. Step three: Identifying how to approach the authority

The third step that National Societies should take is to identify how to approach the appropriate person or authority. A good starting point is for the President of the National Society (or a senior leader, such as the Director for Disaster Management or Health) to write a letter to the person or authority. The letter should briefly outline the issue and request a meeting, which can be used to

⁴ Ley de Voluntariado (Ley 1505 de 2012).

⁵ Article 9

⁶ Detailed Regulations and Measures to Implement the Law of Red Cross (Decree 03/2011) art 2(4)(a).

⁷ Article 2(3)

⁸ Decree of the President of the Lao People's Democratic Republic On the Promulgation of the Law on Lao Red Cross Activities, art 32.

discuss the National Society's auxiliary role and its key advocacy messages. Where possible, it is best to approach and meet with the person directly. If a direct approach is not possible, National Societies should consider whether there is someone who could either introduce them to the person, or who could advocate to the person on their behalf.

Annex 2 provides a template letter to a minister or other government decision-maker, which National Societies can modify as appropriate.

2. Obtaining private insurance

Where public medical/social protection programmes are not available (and/or where efforts to obtain them through advocacy are deemed likely to take too much time), NS should also consider the possibility of obtaining private insurance for their volunteers. Several years ago, the IFRC negotiated a global insurance policy with a private provider to which NS could subscribe for a small fee for their volunteers, covering accidents and death while on duty. Unfortunately, as discussed further below, that policy does not cover illness or death due to diseases like COVID and it does not appear at the time of issuance of this document that the IFRC will be able to obtain a similar global coverage for this disease.⁹ However, private insurance options may nevertheless be available to NSs at the domestic (or potentially regional) level.

a. Pros and cons of pursuing private insurance

Among the advantages of private insurance would be the ability to leverage modest premiums against a substantial benefit in the case of a volunteer's illness and death, a sense of certainty about who is covered and to what extent over the coverage period, and the fact that the administrative burden of claims management will be mainly undertaken by the insurance provider rather than NS staff.

On the other hand, it is probable that many insurers will consider the risks of extending insurance for COVID to be quite substantial and may consequently either decline to cover them, insist on limitations on coverage (for instance, by excluding persons with pre-existing conditions or of a certain age, or excluding geographical areas) that reduce the value of the policy, and/or set premium prices (and/or deductibles) very high. They may also require detailed information from NS about their volunteers that some may not have fully up to date in their databases.

While projections about the progression of the disease remain approximate, NS should consider WHO and their authorities' data in making an educated guess as to whether they are likely to pay more overall to provide insurance coverage for all volunteers than if they instead directly pay for care or compensation in individual cases as they arise.

b. Considerations on choosing a provider and a policy

In addition to assessing premium amounts, NS should consider (1) the reliability, efficiency and flexibility of any potential provider, (2) the scope of coverage that they need and that can be

⁹ At the time of writing, however, negotiations toward a potential regional policy to be available for African NSs were ongoing, and this may become an avenue in the future.

provided, (3) the caveats and requirements in making claims, and (4) the possibility for negotiation.

Where possible, it is highly recommended that NS employ an insurance broker to assist them in selecting and negotiating policy offers. There are a number of highly reputed global companies as well domestic companies in many countries. An investment in their fees (often a percentage of the premiums) is often a sound investment in ensuring a guide to the complexity of the market. In addition, NSs may consider requesting free or reduced-price services for their broker in light of their humanitarian mission and the critical role of their volunteers in addressing the global pandemic. Ideally with the help of such a broker, the NS should undertake due diligence about the financial stability and reputation of an insurer, including its years of operation, and its reputation for efficiency and fairness in addressing claims.

In terms of the scope of the policy sought, a first consideration should be to determine whether coverage is guaranteed for the consequences of pandemics (which many standard policies will tend to exclude). NSs should consider the services they expect to have covered.

For medical services, these should include doctor and hospital visits, vaccinations, prescription drugs, medical devices, outpatient treatments and hospitalization. If they seek coverage for loss of income, since volunteers are not paid in the same ways staff, an agreed value will need to be established (and watch for clauses that might allow the insurer to reduce pay-outs if the volunteer has other sources of income). NS should consider whether the policy should also cover other causes of injury, illness or death. This will avoid unfairness of result among volunteers who may have the same needs from different causes and may help to establish a more permanent precedent for coverage.

It is equally important to consider what deductible or co-pay may be required and if they will be affordable, whether pre-existing conditions are covered (recalling that persons with pre-existing heart and lung conditions are among those most at risk) as well as what documentation requirements and claim deadlines will be imposed, and whether they are realistic. For instance, in many countries, death certificates are often challenging and time-consuming to obtain.

Finally, NS should not hesitate to negotiate with the potential provider about the coverage and the price. In doing so, it may be helpful to have relevant data that may be relevant to the insurer, including the number of uninsured volunteers, their ages and locations. In the Americas region, some NSs (e.g. Uruguay) together with the IFRC Regional Office approached private companies to obtain discount in insurance. The companies saw this as an opportunity to contribute during the pandemic.

3. Establishing a NS-operated solidarity mechanism

In the absence of full public coverage and as an alternative to private insurance, NSs may also choose to self-insure their volunteers (and potentially staff).

a. Pros and cons of pursuing a self-insurance mechanism

The main advantage of a self-insurance mechanism is that the NS can control the administration process and therefore be more flexible in addressing the needs of particular cases and ensure speedy financial support when it is needed most. As compared to paying private insurance premiums, funds set aside for a self-insurance mechanism but not needed for supporting volunteers are not lost and may be redirected for other important uses (subject to donor requirements as discussed below), such as improving volunteer safety and security.

On the other hand, it will require specific administrative and financial management expertise to successfully establish, manage and sustain a self-managed mechanism. Finally, there are risks of fraud and corruption that will require effective risk management mechanisms.

b. Examples of good practice

Several NS have existing, well-functioning self-insurance mechanisms to compensate their volunteers. For example, in Syria, an independent fund is managed solely by the Syrian Arab Red Crescent and covers cost of hospitalisation or death benefits to the volunteer or staff dependents. In Yemen, a fund is managed by the Yemen Red Crescent Society together with other Movement partners which contribute equally to the fund. The fund also covers a percentage of the loss of earnings for volunteers who cannot go to work due to their illness or injury. Please refer to **Annex 3** for a description of several different models currently in operation and a comparison between them.

c. Considerations for establishing a self-insurance mechanism

The first step the NS should take is to create a specific fund whose sole purpose is to compensate volunteers [and staff] financially for the above-mentioned purposes.

In order to successfully establish a self-insurance mechanism, the NS should consult an internal or external legal adviser specialized in trusts, in order to:

- Determine any requirements under national law and whether the governance structure of the NS allows the creation of a self-insurance mechanism.
- Determine whether a separate legal entity needs to be created. Although creating a separate legal entity might be more complicated, it provides the advantage of clearly distinguishing accounts (*i.e.*, the National Society's *vis-à-vis* the Fund's) which would prevent legal claims being brought directly against the NS in case of dispute.
- Draft the regulations or by-laws. In addition to the governance structure and functioning of the Fund, there should be guidelines on who would be covered and under which circumstances. Moreover, the regulations should:
 - aim that the Fund's liabilities are kept at a minimum and, if possible, include a disclaimer whereby the Fund's support would be subject to the availability of funds.
 - Create an oversight (audit) mechanism.
- Advise on a stop-loss insurance. In case the National Society does not establish a separate legal entity, a stop-loss insurance would enable the National Society to cap expenses and avoid legal claims against it.

In developing criteria and procedures for the mechanism, it is important to ensure that there is equal and fair access to benefits by all NS volunteers, throughout the different branches of the NS, and no potential for discrimination, for instance on the basis of gender. Please refer to **Annex 4** for a template outline for terms of reference of a self-insurance solidarity mechanism.

4. Resourcing volunteer solidarity agreements

This section guides how a National Society can fund its approach (e.g., to pay for insurance premiums or for an internal mechanism as described above), through domestic fundraising and, where this is not sufficient, potentially with support from the IFRC COVID-19 appeal.

a. General considerations

National Societies may seek funding for volunteer solidarity arrangements through restricted funding sources (meaning funds that are donated on a legal principle or understanding that they will be spent on specific projects or activities) or unrestricted sources (also called general or regular resources). Many NS create fund structures for specific emergencies or for disaster response in general. NS may also include in their calculation of overhead costs provision for resourcing an insurance or volunteer compensation. For further information on costing activities such as this, National Societies may wish to develop a costing policy in line with the local legislation (sometimes also referred to as a fundraising policy). Guidelines for developing such a policy are [available here](#).

Fundraising for such purposes requires careful planning as in any other fundraising for specific projects or activities. NS should explore options that meet the needs and honour donor intent. It is important to be clear from the early stages on how the funds will be spent and channelled. If the NS cannot be sure the funds will be spent within a certain timeframe, that should be made clear. For example, if a donor provides funding for a volunteer solidarity mechanism for COVID-19 and by the end of the implementation timeframe some of the funds have not been spent for volunteer compensation or coverage and remain with the NS, it is important to revert to the donor with a proposal on how those funds could be used, unless they have to be returned to the donor.

Many partners of NS do not provide unearmarked flexible funding (such as operational partners), and therefore, for some donors it may be more appropriate to incorporate planned activities to support volunteers in existing programmes as a direct cost and/or include provision for this through the National Society's indirect cost recovery. This can be the case, for example, for UN partners who are increasingly encouraged¹⁰ to include in their partnership agreements with national and local partners contributions to fund the full costs of their programmes and interventions, including support to the security and risk management of local partners.

b. Domestic fundraising

Identifying the resources from local or domestic funding source is beneficial for the sustainability of a NS-led volunteer solidarity mechanism (or for the purpose of insurance premiums), as this

¹⁰ For example, Inter-agency Standing Committee (IASC) interim guidance note on Localization and COVID-19 response (available soon).

reduces dependence on international donors. As discussed in more detail in section 1 above, one important potential source of domestic funding is the government.

When identifying possible donors, consider which partners may be interested in contributing to such activities, and where donor interests align. For example, some corporations in financial services or insurance may be interested to support this initiative. NS may have opportunities with high net worth individuals. In the COVID-19 context, strong emphasis and support has been placed on health and other frontline workers. This might also provide an opportunity to have fundraising campaigns which highlight the role of Red Cross and Red Crescent volunteers.

For guidance on raising domestic funds, National Societies can refer to emergency fundraising guidance available [here](#) (FedNet) from the Virtual Fundraising Hub. For more information and to access further guidance on domestic fundraising, you can [join the Hub's Microsoft Team](#) online. National Societies who have concerns about financial risk or longer-term financial sustainability during and after the COVID-19 emergency should refer to the IFRC's [Financial Sustainability toolkit](#).

c. Funding from Movement partners in country

Financial support for a volunteer solidarity mechanism can also be sought from Movement partners in country, especially for volunteer solidarity mechanisms which are jointly managed with partners. For example, in the volunteer solidarity mechanism set up for the Yemen RC¹¹ with the Movement partners in country, in addition to the Yemen RC annual contribution to the fund, the Movement partners in Yemen commit to providing an annual contribution to the fund to ensure sufficient resources are available for compensation to volunteers who fall ill, are injured or die. In addition to Movement partners, other external partners to the NS can also be encouraged to contribute to the fund as a common effort to support volunteers.

d. Funding from the IFRC Global Appeal for COVID-19

If none of the domestic options is successful for resourcing the volunteer solidarity mechanisms, some resources may be available through the IFRC Global Appeal for COVID-19 to cover the most pressing needs. In accordance with the *"Principles and Rules for Red Cross and Red Crescent Humanitarian Assistance"*, NS may seek international assistance through the IFRC, which will normally support with the launch of an Emergency Appeal. In the case of COVID-19, as the same need for support has been initiated by multiple National Societies worldwide, a Global Emergency Appeal has been launched.

In addition to the IFRC Global Emergency Appeal for the COVID-19 response, National Societies are developing their national response plans outlining the activities the individual NS is planning to undertake as part of its COVID-19 response. These plans may include activities to support staff and volunteers, potentially their families, who have been affected by COVID-19. Particularly for contexts where volunteers are actively engaged in the COVID-19 frontline of the response and where there are gaps in volunteer coverage (e.g. government does not provide free health care, insurance for volunteers does not exist or volunteer solidarity mechanism is not resourced), it is important to consider these needs and activities in developing the national response plans.

¹¹ To be used as an example, the ToR for the Yemen RC joint mechanism is available upon request.

As part of developing its response plan, the National Society should define its resource needs in collaboration with the respective IFRC Country Office or IFRC Country Cluster Support Team. These resource needs should also consider resource needs for a volunteer solidarity mechanism or for volunteer health coverage. The resource needs would need to be detailed in estimating how many volunteers would need to be covered and what the costs of coverage would be, e.g. the costs of an insurance premium or the contribution required to a volunteer solidarity mechanism. After the resource needs are identified as part of the response plan, funding can be sought from the IFRC Global COVID-19 Appeal, through liaising with the IFRC Country or Country Cluster Support Team.

If the funding through the COVID-19 Global Appeal is confirmed, a Project Agreement will be established between the National Society and the IFRC outlining the funding available for the National Society to implement the activities agreed and describing reporting modality and deadlines.

When considering the option to request funding for a volunteer insurance or a volunteer solidarity mechanism through the avenue of the IFRC Global Appeal for COVID 19, it is important to note that:

- a) the funding is only available subject to funding from donors,
- b) reporting processes related to an IFRC Emergency Appeal apply,
- c) the implementation is time-bound which means the funding may only be spent during the Emergency Appeal time-frame – hence disbursement related to the support of volunteers need to have taken place during the course of the Emergency Appeal operating timeframe.

This means that the funding through the IFRC COVID-19 Emergency Appeal should not be considered a long-term solution to resourcing a volunteer solidarity mechanism or an insurance. Rather, it can support a NS in the early stage of setting up such a mechanism in the COVID-19 context.

5. The French Fund Maurice de Madre

Since 1974, the French Fund Maurice de Madre (hereinafter the FFMM) has provided assistance for those in difficult circumstances as a result of a work-related accident/illness, and notably in the case of death, following which a financial or material assistance can be provided for the family of the deceased.

a. Extraordinary measures for COVID-19

Following the spread of COVID-19, the Board of The FFMM decided to mobilize up to 300,000 CHF from the fund's capital to provide support to families of National Society staff/volunteers who died from COVID-19 contracted while working for the Movement.

This temporary measure, while a more comprehensive solution is being developed, is only for cases where volunteers/staff are not insured otherwise. The grants will take the form of a lump

sum to accelerate the process, the amount of which is still to be determined but probably indexed to the cost of living in respective countries. National Societies are responsible for the security of their volunteers: the FFMM does not replace such duty of care.

The FFMM is a subsidiary Fund, not an insurance policy. This means that there is no automatic right to assistance and each application is treated on a case by case basis. Should the 300,000 CHF authorized by the board of the FFMM be depleted before another system is put in place, the FFMM will work with its partners and explore an extension of this temporary measure.

b. How to apply and criteria for accepting a request

Application forms for benefits can be downloaded [from the ICRC website](#) and returned to the FFMM secretariat through an ICRC or IFRC delegation. If there is no delegation covering your National Society, the application form can be sent directly to the Secretary of the FFMM at the following address: eseite@icrc.org.

Reviewing the requests is a delicate exercise. The staff of ICRC or IFRC delegations act as vital intermediaries for the FFMM secretariat: They can make contact with the National Societies and supply the necessary details for the files, enabling the secretariat to verify whether the conditions for allocating a grant are fulfilled.

The FFMM is administered independently by a Board of five members who are appointed by the ICRC and who represent the ICRC, the IFRC and the Family of Maurice de Madre. The ICRC is responsible for the fund's administration, accounts and secretariat.

Annex 1 - Additional resources and contacts

Obtaining governmental support

Resources

- The IFRC's [Legislative Advocacy Toolkit Participants' Handbook](#) provides very detailed guidance on how to advocate to government.
- The IFRC has Guides to the Auxiliary Role for [Africa](#), the [Americas](#), [Asia Pacific](#) and the [Middle East and North Africa](#).
- The 'Background Documents' for [Resolution 2 of the 30th International Conference](#) and [Resolution 4 of the 31st International Conference](#) provide a detailed overview of the auxiliary role.

Contacts

The Disaster Law Programme's Regional Coordinators are available to assist National Societies to advocate to government. The names and email addresses for the Regional Coordinators are below.

- Africa Region: Maria Martinez (maria.martinez@ifrc.org)
- Americas: Sophie Teyssier (sophie.teyssier@ifrc.org)
- Asia Pacific: Gabrielle Emery (gabrielle.emery@ifrc.org)
- Central Asia: Baktiar Mambetov (baktiar.mambetov@ifrc.org)
- Geneva: Isabelle Granger (isabelle.granger@ifrc.org)

Resourcing volunteer solidarity arrangements

Resources

- [Guidelines for a NS Costing Policy – Best Practice for Project Costing and Indirect Cost Recovery procedures](#)
- [Emergency fundraising guidance](#)
- [NS Financial Sustainability toolkit](#)

The French Fund Maurice de Madre

The application form for claims is available in English and French (only):

- [Link to the Application Form in English](#)
- [Link to Application Form in French](#)

Contact : Tricia Baglione, IFRC (tricia.baglione@ifrc.org)

Annex 2 – Template letter to governmental decision-maker

Dear [name]

Re: Impact of COVID-19 on [National Society name] Volunteers

I write to request a meeting with you to discuss the impact of the COVID-19 pandemic on [National Society name] volunteers.

As you are aware, [National Society name] volunteers are playing a critical role in meeting the needs of communities affected by COVID-19. Since the onset of the pandemic, volunteers have been involved in [list or describe volunteer activities]. A total of [X] volunteers have provided assistance to [X] people.

The activities of [National Society name] volunteers have [complemented/supported/supplemented] the government's pandemic response, by [explain how the volunteer activities tie in with the government response]. This is consistent with the [National Society name]'s unique role as an auxiliary to government in the humanitarian field, which is recognised by the [name of the law or policy that establishes the National Society's auxiliary role, mandate and responsibilities]. [National Society name] volunteers on the frontline have, similar to government frontline workers, exposed themselves to the risk of infection in order to meet the pressing needs of vulnerable and impacted communities.

Unfortunately, the [National Society name]'s insurance policy does not provide coverage for volunteers who have developed COVID-19. As a result, volunteers who have developed COVID-19 are facing significant medical costs which, in many cases, they are unable to meet. Further, the families of volunteers who have died from COVID-19 do not have access to any compensation. We estimate that approximately [X] volunteers are affected by these issues and anticipate that this number may increase significantly.

We would appreciate the opportunity to meet with you to discuss this pressing issue at your earliest convenience. We would specifically like to discuss the possibility of government providing free medical care to affected volunteers and compensation to the families of volunteers who have died. Such a scheme would accord with the government's commitment to facilitate the voluntary work of [National Society name] and to tackle pandemics and epidemics together.¹² It would also be in line with international best practice.

We look forward to hearing from you.

Yours sincerely,

¹² Resolution 4 of the 31st International Conference; Resolution 3 of the 33rd International Conference.

Annex 3 – Comparison between several current solidarity fund models

	Syrian Arab Red Crescent	Yemen Red Crescent Society	South Sudan Red Cross
MANAGEMENT	<p>Managed by the SARC special fund committee</p> <ul style="list-style-type: none"> • President of SARC • SARC SG for Finance and Administration Treasurer • SARC Head of Operations <p>The Committee has the following powers:</p> <ul style="list-style-type: none"> • To study the received cases and take the appropriate decision. • To determine the amount of the monthly support provided to the Fund beneficiaries • To approve and supervise investment projects funded by this Fund, and which the proceeds go back to the Fund. • To approve the opening of bank accounts for the benefit of the Fund in the operating banks in Syria 	<p>Managed by a Movement Committee</p> <ul style="list-style-type: none"> • YRCS Secretary General • ICRC Cooperation Coordinator • IFRC Head of Country Office • GRC Country Representative • DRC Country Representative • NRC Country Programme Manager • QRC Country Representative <p>The Committee ensures the following:</p> <ul style="list-style-type: none"> • the implementation of the special fund • the accuracy of the date/profile provided by the YRCS branches. • the accuracy of the accident/illness as per inclusive and exclusive criteria. • the smooth and transparent transaction of the agreed/approved fund to the 	<p>Administered by a Movement managing committee</p> <ul style="list-style-type: none"> • Secretary General of SSRC • Cooperation Coordinator of ICRC • Country Representative of IFRC • Finance Manager of SSRC • Health Advisor (medical doctor) • Head of Organizational Development of SSRC (Secretary to the committee) <p>The committee is responsible for reviewing the applications from volunteers and to make decisions about whether to give the grant to the volunteers who applied for financial assistance from the Fund. The committee approves financial reports on use of the fund produced by Finance Manager of SSRC.</p>

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	<ul style="list-style-type: none"> The Committee decisions are taken by majority vote 	<p>concerned volunteer and or his/her depending family members.</p>	
TIMELINE	Permanent	Permanent	This fund is established for fixed period of the time from 1 May 2020 to 30 April 2021. This may be extended when there is need by a decision of the managing committee for the fund.
SCOPE	<p>A special national fund for the injured and the martyrs of the Syrian Arab Red Crescent.</p> <p>Beneficiaries:</p> <ul style="list-style-type: none"> SARC Staff/volunteers who were injured while carrying out humanitarian duty. Father, Mother, wife and children of SARC staff in case of martyrdom. Special cases decided by the Fund committee. 	<p>The special fund for the YRCS volunteers will allow the YRCS to:</p> <ul style="list-style-type: none"> cover the cost of compensating volunteer/s who is/are injured at or become ill through work. provide short term support to a closest depending family member of the deceased volunteer/s. response quickly to the needs of injured/ill volunteer/s for his/her recovery. <p>This fund cannot be used for treatment of injured/ill volunteers outside Yemen.</p>	<p>The fund provides financial assistance to volunteers in the following cases:</p> <ul style="list-style-type: none"> A volunteer who has symptoms suspected to be Covid-19 can get financial support for a test including transportation cost where necessary based on real cost incurred; A volunteer who tested positive of Covid-19 can get financial support for treatment as lump sum up to the equivalent of USD300 <p>This fund does not provide financial support to the volunteers and their families in case of death.</p>

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PARTNERS	Not part of the management, only as donors	ICRC, IFRC, German Red Cross, Danish Red Cross, Norwegian Red Cross, Qatar Red Crescent	SSRC, ICRC, IFRC, PNS, Other Donors
CLAIMS PROCESS	<p>Injury: In the event that a SARC personnel gets injured while he/she on duty, he/ she will be provided with first aid immediately, then his/her case will be transferred to the special committee of the fund with a complete file prepared by the medical services director stating the following:</p> <ul style="list-style-type: none"> • Full information about the injured and his/her date of enrolment in SARC • Full details and copies of his/her personal ID and his/her SARC ID. • Resume • Detailed information about his/her mission, its date and type • Injury date, timing, type, and severity, as well as the initial prognosis of the treatment and its cost. <p>Martyrdom: In case of the death of SARC personnel, the branch in charge of this person sends a letter which states the following:</p>	<p>The term of accident for circumstance of the YRCS volunteer/s is defined as following: “Volunteer/s got injured or killed by direct, indirect shooting, airstrikes and or car accident or get affected with diseases while carrying out YRCS humanitarian mandate/duties including attending meetings or trainings.”</p> <ul style="list-style-type: none"> • Volunteer/s has/have valid YRCS ID card and YRCS jacket on him/her during accident. • Volunteer/s is/are in the YRCS vehicle or rented vehicle for the specific assignment. • The compensation to volunteer can cover testing and treatment limit to the amount mentioned under “Fund contribution to volunteer or depending family will be” under ceiling. • If volunteer/s injured/sick and cannot able to go for 	<p>Test: A volunteer who has symptoms which are suspected to be of Covid 19 can apply for financial support for a test through the branch or Unit s/he belongs to. Once the request is received, the branch/unit shall send Head of Organizational Development the request. The Secretary General can take a decision, without convening a meeting of the committee, about whether the applicant can get the requested financial support.</p> <p>Treatment: A volunteer, who tested positive with Covid 19, can apply for financial support by using the application form with his/her test certificate. Once the application is received, the branch shall send Head of Organizational Development the request who is responsible for reviewing applications and advises the Secretary General on the needs of convening a meeting of the</p>

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	<ul style="list-style-type: none"> • Full information about the martyr and his/her date of enrolment into SARC • Full details and copies of his/her personal ID and his/her SARC ID. • Resume • Detailed information about his/her mission, its date and type • The date and timing of martyrdom <p>The fund committee invites a representative (volunteer) from the branch that the martyr belongs to in order to attend the discussion of his branch file.</p>	<p>volunteering task due to advise by doctor to stay at home, then the branch can submit report (with stamp of hospital/doctor) from doctor/hospital stating the recovery period of volunteer.</p>	<p>committee. The committee is responsible for reviewing the applications from volunteers and to make decisions about whether to give the grant to the volunteers who applied for financial assistance from the Fund.</p> <p>People who are not officially registered as SSRC volunteer but were mobilized for Covid-19 activities temporarily (e.g. community mobilizers) are not eligible to apply for a financial assistance from this fund.</p>
TIMEFRAME FOR APPLICATIONS	No deadline for submitting applications.	The related branch should return the application form together with all required documents mentioned in procedures to the committee within 3 business day in case of injury and within 5 business day in case of death.	SSRC Branches and Units shall send the application to HQs within a week after they receive it from volunteers. The managing committee shall convene a meeting within a week after HQs receive the applications. The overall process to grant cash to the volunteers who apply for financial support shall not exceed six weeks since an application is received from a volunteer.

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FUNDING MODALITY	<p>Fund revenues:</p> <ul style="list-style-type: none"> • Cash donations (taking into consideration the donor's conditions and wishes). • Deducted percentage or amount of the Syrian Arab Red Crescent stamp revenue • Fund's capital investments revenues • The fund investment projects' earnings 	<p>The Movement partners (ICRC, IFRC, GRC, DRC, NRC and QRCS) or the other external partners (if any) will contribute depending on approved of their plan up to maximum of 10,000 USD to this fund on annual basis. YRCS is also required to contribute a 1,000 USD amount each year to this special fund.</p> <p>The maximum ceiling of volunteer fund will be 100,000 USD. When 50% of the fund exhausted, then the YRCS and its Movement partners and/or external partners (if any) resume its annual contribution to the fund until it reaches to its original ceiling.</p>	<p>This fund consists of monetary contributions from the ICRC, the IFRC, partner National Societies and other donors.</p> <p>The initial scale of the fund amounts to USD50,000, and this can be increased as SSRC receives more contributions from various donors.</p>
CONDITIONS OF THE COVERAGE	<p>Injury:</p> <ul style="list-style-type: none"> - Person will be provided with first aid immediately. - Covering related treatment expenses. - Continue to pay person's salary/perdiem during the treatment and recovery periods. - Depending on the severity of the injury and its long-term effects 	<p>The fund will cover full treatment, if person gets ill or injured:</p> <ul style="list-style-type: none"> • In case of fatality USD 6,000 • In case of serious casualty (including disability), maximum up to USD 3,000 • In case of doctor's advice to stay at home. The volunteer/s will be given per-diem as duty of care. The per-diem calculation will be 	<p>Financial support for a test including transportation cost where necessary based on real cost incurred</p> <p>Financial support for treatment as lump sum up to the equivalent of USD300</p>

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	<p>on the person's physical ability, longer term solutions will be taken based on the specificity of the case. (ex: changing his area of work from field to admin, from a program to another, continue to provide the financial support or in kind for who is unable to work anymore ...)</p> <p>Martyrdom: Monthly support approved by the committee</p>	<p>based on number of days recommended by the doctor to rest and the rate per day will be half per diem (according to the YRCS per-diem policy); and no per-diem for Friday.</p>	
DISBURSMENT OF FUNDS	<p>Martyrdom: The amount of monthly support approved by the committee is to be delivered to the martyr's family, exclusively for /father, mother, wife and children/.</p> <p>One person should be authorised by the family to receive the compensation.</p> <p>The fund amounts disburse should be signed by Both the president of the committee and the treasurer. The payments orders are to be issued by the Financial Director.</p>	<p>Application will only be accepted in the name of volunteer/s, not under name of volunteer dependents family and or extended family members such as parents, wife, children, sisters, brothers, cousin, aunts or uncles.</p> <p>The cheque to transfer money should be signed stamped by the Secretary General of the YRCS (or his replacement) and by the ICRC Head of Delegation (or his/her replacement) on behalf of the Movement partners. The transfer of money will not be accepted, if one</p>	<p>The Secretary General of SSRC is responsible for taking a decision over the requests from volunteers for Covid-19 tests with the advice of the Health Advisor. He convenes and chairs a meeting of the committee when there are applications for a financial support for treatment.</p> <p>The grant should be given to the applicant in principle. However, given that physical movement of the person who tested positive will be restricted, one of the family members of the applicant may take the grant with the</p>

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		signatory is missing. Also, in no circumstances this fund to be used for different propose and/or YRCS activities.	letter of delegation and National ID to prove the family relationship. Once the grant is determined by the committee, the branch and unit shall facilitate cash transfer to volunteers. Branches and units are responsible for following up with the beneficiaries on what kind of actions (treatment) have been taken after the grant was made.
ADMIN & DATA MANAGEMENT	A special register is to be created to record the Committee minutes of meetings, proposals and decisions. All the committee registers, case files, applications and financial records are to be reserved in a specific cabinet in the HQ under the supervision of the Financial Director. Martyr application and the case files are to be signed by all the Committee members after registering the decision taken by the Committee.	The YRCS together with its Movement partners will open a special account under the name of YRCS volunteer fund in one of the most reliable financial institution (bank). The beneficiary should provide a receipt to the fund committee for the record keeping purposes.	The Head of Organizational Development is responsible for following up the decision taken by the committee including the communication with branches and units. The Financial Manager is responsible for all the financial procedure to grant the fund to volunteers according to the decision taken by the committee.
FINANCIAL REPORTING	Fund-specific financial and accounting files are to be held by the Financial Director	The YRCS HQ to share the funding statement to all the donors of this fund, each quarter of the year.	The Financial Manager produces a financial report on the use of the fund and submit it to the committee on quarterly basis.

<p>LINKS WITH OTHER FUNDS OR COVERAGE</p>	<p>In case of injury, and when SARC does not have the capacity (financially or logistically) to cover all related expenses or type of medical services needed, SARC in some cases approach ICRC asking for support. ICRC will decide to provide the support or not, based on the available capacity.</p> <p>In case of death, SARC and the ICRC support the family of the deceased to apply for financial support to the French Fund Maurice de Madre (FFMM).</p>	<p>In case of accident, the YRCS will also apply for the claim under IFRC Global Accident Insurance (if it is valid), within 72 hours (in case of death).</p> <p>The exhausted amount from the fund might be reimbursed from the IFRC insurance company once the due process has been followed and submitted to the insurance company.</p>	<p>In case of death, SSRC and the ICRC shall support the family of the deceased to apply for financial support to the French Fund Maurice de Madre (FFMM).</p>
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Annex 4 – Template outline for terms of reference of a NS-led solidarity fund

While administrative needs will vary between NS, the following template outline and considerations may serve as a starting point in developing terms of reference (or other appropriate foundational document) for a NS-led solidarity fund (or mechanism).

Purpose of the fund

It is helpful to clearly specify the purpose and scope of the fund or mechanism. That purpose might be: “to provide financial assistance to its volunteers [and staff] who are not otherwise insured and need financial compensation if they incur medical costs for treatment of illnesses or death benefits to their families.” It is recommended that the fund not be limited to the consequences of COVID in order to ensure fairness to similarly situated volunteers and for long-term sustainability. Principles of non-discrimination should also be affirmed.

Governance and administration of the fund

In this section, describe how the fund will be governed. In some cases, this will be entirely within the NS’s own legal structure. In others, the NS may elect to bring other Movement components into the governance and administration of the fund.

Even if the fund is administered within the NS’s own legal structure, it is recommended that it establish a Board of Directors for the fund, to ensure adequate oversight. This Board might include the Secretary-General, Finance Manager, Organisational Development/Volunteer/HR Manager of the NS (potential Secretary of the Fund), and 1-2 donor representatives. The Board should review and approve decision making on applications and award amounts and review and approve financial reporting. A quorum for these purposes should be established, as well agile working methods (such as email approvals).

A NS staff position should be identified with responsibility for administering the fund, under the oversight of the Board. Ideally, focal points should be nominated at the branch level, acting as intermediaries between volunteers and the fund administrator, to minimise the amount of time it takes for claims to be submitted and processed.

The Fund should ideally have access to a dedicated account solely for compensating volunteers/(and staff, if applicable) needing support and needing at least two signatures for funds disbursement. In cases where Movement partners are part of the governance structure, a joint account might be created, managed by the NS and one of the partners.

Funding modalities

Under this section, explain how the NS will mobilise the funds to sustain it. If the fund is jointly governed with other Movement partners, list the names of the partners supporting the fund (IFRC, ICRC, PNS).

Indicate the initial amount of funds to be mobilised to set up the fund for provision of support to volunteers /(staff). A financial projection, which includes the number of active volunteers, will help the NS to assess this amount.

For funds jointly governed by Movement partners, clearly indicate the amount each partner contributes to the fund. The NS itself should always also contribute to this fund from its own resources.

Where the fund is established through an initial lump sum grant, this section should also indicate when replenishment should be organised (e.g. once a certain percentage of the fund has been exhausted) to ensure sustainability of the fund.

[Refer to section 4 of this guidance document for more information on resourcing a NS led mechanism]

Criteria and claims process

Under this section, explain in plain terms the criteria for eligibility for financial assistance (for example registered volunteers or active volunteers). Include a manageable deadline to submit a claim in this section. Selection criteria and/or processes should be transparent, equitable and free from any conflict of interest. This section should identify the persons responsible for making decisions (which may involve members of the Board) and how they will be made on a timely basis (for example, on the basis of email approvals).

This section should set out the documentation requirements from claimants (e.g., hospital bills, medical certificates, or death certificates), bearing in mind the administrative and financial burden that obtaining them may impose.

Award amounts

Clearly state the maximum amount of compensation that might be provided to each applicant, depending on the nature of the claim (hospital costs or fatality). NS may choose to compensate applicants with a pre-determined lump sum or on the basis of actual costs incurred. This section can also include whether and how the fund will extend to testing and transportation costs to the medical facility, amongst others.

If the NS desires to maintain some discretion in the amount or types of awards in individual cases, this section should set out the parameters of these decisions in order to guard against the appearance of bias. For example, in certain cases, the national society or Board can exceptionally decide to provide financial assistance for Covid-19 tests to families of volunteers /[staff] who tested positive in the case they had obvious symptoms or cover loss of earnings for a limited amount of time due to sickness/injury.