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| Preparing for emergencies  A reference guide for organisations in the Health and Community Services Sectors  Version 1.1 |
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Department of Health

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| Preparing for emergencies  *A reference guide for organisations in the Health and Community Services Sectors*  *Version 1.1* |

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# Introduction

## About this reference guide

*Preparing for emergencies: A reference guide for organisations in the Health and Community Services Sectors* is a resource for organisations across both the health sector and the community services sector to plan for and effectively respond to external emergencies.

At the broadest conceptual level, the sectors exist to protect and improve the health and wellbeing of the community – whether that be for the community as a whole or for a targeted cohort. Good planning and preparedness before an emergency supports meeting this purpose during and after emergencies.

The Department of Health and Human Services (the department) aspires to achieve the best health, wellbeing and safety of all Victorians so that they can live a life they value. In the context of emergencies, the department works to minimise the impact of emergencies on the health and wellbeing of communities and individuals, especially the most disadvantaged and vulnerable[[1]](#footnote-1).

Experience during recent emergencies demonstrates that the sectors will seek information, guidance and assistance from the department, regardless of the formal relationship between an organisation and the department.

By encouraging a consistent approach to emergency preparedness and providing guidance around planning and response, the department seeks to improve the sectors’ ability to maximise health, safety and wellbeing outcomes during emergencies is increased.

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| A glossary of key terms and their definitions in the context of this document is at **Appendix 1** |

### Who should use this guide?

This guide has been written for any organisation that identifies as being part of the broader health sector and community services sector, that delivers services to clients.

## About emergencies in Victoria

Victoria experiences a broad range of significant emergencies. Types of emergencies that have occurred in Victoria include:

* floods, storms and bushfires
* industrial fires
* explosions and accidents
* extreme heat and heatwaves
* epidemics and pandemic
* contamination of food or water supply; and
  + disruption to essential services such as electricity, gas and telecommunications networks.

Emergencies can cause direct risks to the health and wellbeing of the Victorian community and impact the capacity of the sectors to deliver services.

The frequency and changing risk profile of emergencies continues to reinforce the importance of being prepared for emergencies through good planning, risk analysis and adopting mitigation strategies.

# Planning for emergencies

## Overview

Emergency management planning is about preparing, mitigating risk, responding to and recovering from an emergency. Emergency management plans should be considered as part of the overall business continuity approach.

An emergency management plan provides direction for management, staff, clients and other stakeholders in what to do if there is an emergency.

Good practice emergency management plans:

* + - are tailored to meet the particular needs of communities and clients, including Aboriginal and CALD communities, to ensure a culturally responsive approach
    - reflect the location, physical environment, client and staff profiles
    - outline decision making authority
    - have clear triggers for activation and deactivation
    - describe the response options for different types of emergencies such as altering or ceasing services, relocation, sheltering and evacuation
    - include processes for maintaining situational awareness and sourcing accurate, up-to-date information during an emergency
    - define communication arrangements
      * are updated as required and reviewed annually.

Good practice emergency preparedness includes:

* + - communicating emergency management plans to all staff, and key stakeholders
    - undertaking facility site assessments
    - completing all identified risk mitigation strategies
      * undertaking emergency exercises annually.

It is advised to take a collaborative approach to emergency planning. Meet with other services in the area or with similar client profiles to discuss how you can support each other during emergencies, particularly when alternative accommodation or services are needed. A collaborative approach can increase capacity, enhance effectiveness and simplify coordination in an emergency. It is also recommended to discuss plans with local governments and local emergency services to ensure plans are comprehensive.

## Understand emergency management responsibilities

Most service providers will have requirements relating to emergency management planning under their respective legislation, quality and safeguarding frameworks, funding agreements and program management arrangements.

For example, emergency management responsibilities for organisations that are funded by the department are listed in the [Health and Human Services Sector Emergency Management Policy](https://providers.dhhs.vic.gov.au/emergency-management).

Chief Executives, boards, company directors and managers need to consider how they will respond to a broad range of emergencies to ensure the safety of clients and staff.

A service’s requirements will depend on the type of service provided and the setting in which it is delivered. For example, plans for facility-based services will be different to those delivered in a client’s home.

## Identify decision makers

Each service provider is responsible for making decisions about how it will respond to an emergency and is accountable for the consequences arising from those decisions. This means it’s important to make informed decisions about how to best respond to an emergency based on the particular circumstances of the event and the specific needs of clients.

A good emergency management plan will outline who in the organisation has authority to make decisions during an emergency. The authority might be inherent in the position, such as a chief executive officer, or formally delegated to another person, so that appropriate decisions can be made at all times.

It is also advised to clearly outline the processes for delegating decision-making authority in the emergency management plan.

## Identify hazards and assess risks

Examples of hazards which may require planning include:

* *natural*: bushfires, landslide, extreme heat, floods and storms
* *biological*: disease outbreaks including human, animal and plant epidemics and pandemics
* *technological*: chemical and radiological agent release, explosions, infrastructure failures
  + *societal*: acts of terrorism and humanitarian emergencies.

While emergencies can occur at any time of the year, the Victorian summer is a period of heightened risk for certain hazards such as bushfires, extreme heatwaves and severe thunderstorms.

It is important to undertake a risk assessment of emergencies that are likely to affect your service.

Options for finding out about the types of risks in your area include:

* regional Victoria [State Emergency Services](https://www.ses.vic.gov.au/) office or relevant fire service
* local government
* DHHS emergency management staff, or
  + attending a DHHS emergency preparedness forum.

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| **Appendix 2** provides links to hazard-specific resources and information from relevant subject matter experts.  **Appendix 3** provides a sample hazard risk assessment template. |

## Assess client risk profile

The profile of your clients and their care requirements are an essential component of planning for emergencies – particularly for making decisions about whether to relocate a facility-based service or for planning service continuity for in-home services.

Some client’s personal circumstances may increase their risk during some types of emergency events. These circumstances may be enduring (e.g. limited mobility or cognitive function) or time-limited (e.g. pregnancy) or only in relation to specific types of emergencies (e.g. respiratory conditions during a smoke event).

## Plan for continuity of care

Planning is critical to ensure continuity of care to clients if services usually delivered in the home are altered or ceased because of an emergency.

Agency emergency management plans should consider the needs of clients and be adaptable for all types of emergencies. Key points include:

* health needs such as medication, prescriptions and equipment (including any equipment substitutions required in the event of power disruption)
* transportation to alternative locations
* location of the home with respect to fire, flood or essential service disruption risks
  + ensuring emergency information is readily available and relevant for the client.

### Altering or ceasing services

A number of agencies provide services from health and community service centres, through programs and appointments, or services in the home. Organisations providing centre or home-based services to people living independently in the community need to develop emergency management plans for altering or ceasing services.

When developing an emergency management plan that includes a decision to alter or cease services, the following factors could be considered:

* the level of risk in ceasing services or to staff in continuing service during an emergency
* options for providing services in alternative ways, such as changing the timing or location of service delivery, or partnerships with alternative providers
* communication – how clients, families of clients (where appropriate), staff and the community will be provided information about services that may cease or be delivered in different ways, times or locations
* arrangements for informing relevant statutory bodies of any statutory clients who are unable to attend programs due to alteration or cancellation of a service
* triggers for altering or ceasing a service and particular needs of clients and staff.

## Planning emergency response options

Discuss with clients your service’s approach to emergency preparedness and planned responses. For those receiving services in the home, best practice would see emergency preparedness planning undertaken as part of the process of establishing the in-home services.

### Relocation

Relocation is the early, planned movement of clients with an appropriate number of staff from a service or facility to alternative accommodation with a similar type of care available. Relocation is undertaken in response to a forecast or warning, such as the declaration of a Code Red day, or because of an imminent or actual emergency.

Relocation is initiated by the service prior to an emergency impacting or posing a significant threat, including relocation ahead of a Code Red day.

Planning for relocation should be done well in advance of any warning or emergency and should take into account:

* any special needs of clients
* staffing requirements
* [transport and accommodation options](#AccommodationTransport)
* the time it would take to relocate the facility, including preparing the clients for transport and
  + information sharing requirements.

Preliminary planning for returning to a facility should also be considered.

### Evacuation

Evacuation is the urgent movement of clients and staff to a safer location using best endeavours from a facility or home to a safer place in response to a threat or imminent impact of an emergency. Depending on the emergency, an evacuation may involve a partial, progressive or full evacuation of the facility.

An evacuation without any prior warning is resource intensive and potentially detrimental to the health and welfare of clients, staff and emergency services personnel. The main priority when deciding to evacuate is the protection of life.

Effective planning and execution of a facility evacuation without any prior warning or notice is the *least-preferred* emergency response option. Emergency service resources such as ambulances may not be available to assist to relocate all clients.

Given the unpredictable nature of emergencies, the control agency may recommend that a service evacuate. If this occurs, the person with delegated authority must decide whether to implement the control agency’s recommendation to evacuate.

The department strongly encourages services to follow the recommendation to evacuate unless a risk assessment demonstrates that it would not be possible to evacuate clients and staff safely with available resources, within the recommended time frame.

Victoria Police manages the planning and operational aspects of an evacuation during an emergency. Victoria Police will appoint an evacuation manager to perform a range of tasks and functions leading up to and during any evacuation.

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| A relocation and evacuation kit will help your client or service to quickly prepare for relocation of evacuation. **Appendix 4** provides a suggested list of items to include in a kit. |

### Sheltering

There are times when staying and sheltering during an emergency is safer than relocating or evacuating. Emergency management plans should consider potential scenarios where it might be necessary to shelter in place when it is not possible to leave safely. Services should consider what resources might be required and what steps can be taken to make the facility as safe and resilient as possible.

A decision to stay and shelter will be influenced by factors such as the type of emergency, the predicted timing of impact, property preparedness, capacity to actively defend the location and the safety of relocating or evacuating. Advice should be sought from emergency services and / or the department.

Service providers should consider the risks involved with sheltering compared with relocation or evacuation. Some facilities may have clients who are difficult to move. When making a decision to relocate, evacuate or shelter, assess the risks and issues associated with moving clients compared to the risks of staying, especially for clients who may be very frail, or have a serious physical or mental health condition or disability.

There are two terms often used for sheltering:

* shelter in place, or
  + shelter indoors.

#### Shelter in place

To shelter in place is to remain on site, within an existing facility or home, during an emergency.

The decision to shelter in place should be based on information from trusted sources, such as VicEmergency or the control agency. Seek advice to confirm that this option is safer or more appropriate than relocation or evacuation.

Moving clients from one facility or home to another safer building within the same location is also considered sheltering in place.

Key considerations for sheltering indoors include:

* preparation of the property for the type of emergency
* emergency management capability and readiness of the service and staff on site to respond to an emergency threat if necessary
* resources needed to stay on site during an emergency or for the duration of potential isolation, such as staff, equipment, supplies and essential services, and
  + potential impact on information and telecommunications infrastructure.

#### Shelter indoors

To shelter indoors is to remain inside a building and limit the exposure to unhealthy conditions in the air outside such as leaking gas, smoke and other air contaminants.

On receiving advice to shelter indoors, actions to take are:

* go indoors immediately
* close all doors and windows
* turn off heaters, air conditioners and exhaust fans, and
  + listen to the radio or television or monitor VicEmergency for the all-clear advice.

## Plan alternative accommodation and transport options

Service providers should determine accommodation options during an emergency. It is also strongly recommended that services engage with other local providers to limit the risk of overwhelming the capacity of one particular service or business during and after an emergency (for example one local motel may be identified as the alternative accommodation option by multiple agencies).

Meeting day-to-day pre-hospital care needs of Victorians during actual or potential emergencies requires considered use of both emergency ambulance services and non-emergency patient transport resources.

Think broadly and consider a range of options when planning client and staff transport. All facility emergency management plans should include a detailed section on how clients and staff could be transported. It may not be possible for ambulances to relocate all clients. Where ambulance transport is not required, alternative transport to relocate clients should be planned.

## Plan for prolonged power disruption

Depending on the impact of the hazard, there may be disruption to power. Without battery-operated support and back-up generator power, systems and electronic equipment may not function including lifting equipment, air conditioners and life supports. Food safety may also be compromised.

Clients who are considered to be power-dependent may need to have a planned relocation as soon as external conditions are considered to be unfavourable. Even in the absence of any direct threat, conditions within surrounding areas could have hazardous effects or limit ability to relocate.

## Property preparedness

Service providers should ensure that the properties they use for delivering services, including facilities and offices, are prepared for emergencies.

Specific preparedness activities prior to summer, such as risk assessments, necessary property maintenance, staff training and drills should form part emergency preparedness to mitigate potential risks.

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| Additional resources to assist planning for emergencies  * **VicEmergency** is a centralised website for Victorians to find emergency information and warnings. It also provides preparedness and recovery information related to emergencies. <http://emergency.vic.gov.au/prepare/#where-do-i-get-information-in-an-emergency>   **SES** Get ready: Preparing for Emergencies <https://www.ses.vic.gov.au/get-ready>  **Red Cross** REDiPlan materials to prepare households for emergencies: [www.redcross.org.au/emergency-services.aspx](http://www.redcross.org.au/emergency-services.aspx)  **DHHS:** How to maintain food safety in emergency situations, specifically during power failures: <https://www2.health.vic.gov.au/public-health/food-safety/food-safety-information-for-consumers/food-safety-during-power-outages>  **Local Councils** for local information on emergencies including Municipal Emergency Management Plans <https://knowyourcouncil.vic.gov.au/councils>   * **Australian standards**   + - AS 3745-2010: Planning for Emergencies in facilities     - AS 4083-2010: Planning for emergencies – Health Care facilities  Additional resources to assist people with disabilities to plan for emergencies  * **Collaborating 4 Inclusion** Person-Centred Emergency Preparedness *A Process Tool and Framework for Enabling Disaster Preparedness with People with Chronic Health Conditions and Disability* <https://collaborating4inclusion.org/prepare-nsw/> * **I’m Okay** Emergency readiness for people with disabilities <http://imokay.org.au/about>   *Please note that the listed resources have been developed in New South Wales*. |

# Readiness for an imminent emergency

Emergency readiness activities are undertaken when situational awareness indicates there is high probability of an imminent emergency event, such as a bushfire or flood.

## Monitoring local conditions

VicEmergency is the platform for information about all emergencies in Victoria. VicEmergency displays a real-time map with incidents from across Victoria including fires, floods, storms, power outages, hazardous materials and significant traffic incidents. The site also includes information from the Environment Protection Authority and the Chief Health Officer.

Information about current and forecast conditions is also available from a variety of media sources, including radio, television and the internet. Agencies such as the Bureau of Meteorology, Victoria State Emergency Service, fire services and Victoria Police monitor forecast hazards and provide advice and warnings.

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| Emergency Warnings and Public Information resources Current warnings and locations of emergencies:   * + - The VicEmergency website: [www.emergency.vic.gov.au](http://www.emergency.vic.gov.au) and mobile app (download from Google Play or the App Store)     - The VicEmergency hotline: 1800 226 226 * Information on fire danger ratings and Code Red days: <http://www.cfa.vic.gov.au/warnings-restrictions/bans-and-rating-faqs/>   + Information about public health risks, including epidemic thunderstorm asthma, can be accessed from the [Chief Health Officer page](https://www2.health.vic.gov.au/public-health/chief-health-officer) on the health.vic website. To maintain situational awareness of public health issues, subscribe to the Chief Health Officer Alerts via this page. |

## Service readiness

Where situational awareness indicates an emerging threat, emergency management plans should be reviewed to ensure they are up to date and appropriate for the emerging threat. Readiness activities identified in emergency management plans should then be carried out so that services are ready to undertake necessary action if and when required.

Communicating planned activities with partner agencies, relevant emergency services, or other emergency contacts of clients, patients and participants should form part of readiness planning.

# During an emergency

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| **Always call 000 (triple zero) if there is an immediate danger to life** |

## Activating your emergency management plan

Services need to be prepared and ready to activate their emergency response plan. Emergencies can impact quickly with little time to prepare and gather resources.

The person with delegated authority needs to make decisions as soon as practicable.

Facilities such as hospitals, residential aged care and residential institutions must be ready for the potential need to relocate, shelter or evacuate in response to an emergency. The decision to implement any of these responses is complex and there are often multiple factors that need to be considered.

The decision to relocate, shelter or evacuate during an emergency includes an assessment of the following factors:

* the current client profile and care needs – mobility, health status and medical needs
* the ability to reduce client numbers during periods of heightened risk, for example some clients may be able to go home or stay with family
* availability of staff - consider the possibility that staff and resources may be unavailable due to the emergency
* outcomes of risk assessments undertaken earlier or during the emergencies
* level of facility preparedness and the resources needed to defend it
* level of support available from emergency service organisations
* availability of supplies, including essential services such as electricity, a safe drinking water supply and telecommunications
* availability of safe transport and road access, and
  + availability of suitable and safe alternative accommodation.

## Decision making – deciding whether to relocate, shelter or evacuate

Best practice: be ready and able to receive advice, notifications, alerts or warnings from VicEmergency, and prepared to activate an emergency management plan.

It is the responsibility of the organisation to maintain situational awareness, monitor emergency services for information and be prepared to act in a timely and effective manner.

If there is an emergency in the area that may necessitate evacuation, sheltering or a combination of both to protect life, each service must activate its emergency management plan.

The diagram at Figure 1 shows the timing and triggers that influence the decision to relocate, shelter or evacuate. Decision making authority rests with the Chief Executive Officer or delegate of the service.

When deciding to relocate, ensure that there is enough time to relocate safely. For example, relocation for a Code Red day should occur on the day before.

Figure 1- Timing of decisions to relocate, shelter or evacuate

A decision to leave or stay may need to be made before, during or after an emergency. Use your emergency management plan 
Before: relocate or stay
During: evacuate or shelter
After: relocate or stay


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| Suggested decision-making process for relocation, evacuation or sheltering   * Activate your emergency management plan / bushfire plan. * Be ready to make decisions – any decision to relocate, shelter or evacuate must be made on behalf of the service by a person with appropriate authority. * Assess the situation – find out about the emergency and predicted conditions. It is important to seek information from trusted sources, preferably VicEmergency. * Review client profiles – numbers of clients, mobility, medicines and resources required to move clients, client records and essential information that will need to accompany a client. * Review staff availability - staff may be personally affected by the emergency and may not be able to support the emergency response. * Seek advice from key stakeholders to assess available resources. * Consider how you will manage if emergency services are unable to access the facility or have limited resources available. * Develop flexible plans for client transport – do not rely on one source of transport. *Do not use triple zero (000) to discuss transport assistance with Ambulance Victoria.* * Review options for alternative accommodation. * Maintain situational awareness and continue to revise risk assessments - be prepared to change plans if circumstances alter.   + Communicate with clients’ next-of kin to keep them informed. |

The diagram at Figure 2 summarises the range of factors that should be considered when planning a response to an emergency.

Figure 2: Decision making criteria for responding to external hazards

decision making criteria for responding to external hazards

External factors, internal factors and the phase of the emergency influence the response deicsion.
External factors include hazards (bushfire, heat, flood etc), the nature of the event (time and scope) and the location of the factility (rural, regional metropolitan)
Internal factors: resident/patient/client care needs, alternative accommodation, transport, supplies, equipment and services, staff and the physical enviornment
Before an amergency the response is a precautionary relocation. During an emergency situation, the response is an emergency evacuation.


# After emergencies

It is difficult to develop a recovery plan before an emergency happens, but it is useful to have started planning to help guide the recovery process.

For most service providers, recovery will be focused on the:

* health and wellbeing of clients and staff, and
  + return to business as usual.

It is important to learn from the emergency experience and increase preparedness for future emergencies.

## Health and wellbeing of clients and staff

The first priority of service providers should be to check the health and wellbeing of clients and staff affected by the emergency and make sure appropriate support, including psychosocial support, is provided as soon as possible. The recovery process may take a long time if the emergency was significant and people may need support months or even years after the emergency has passed.

## Return to business as usual

The return to business as usual will depend on the nature of the emergency, the availability and capacity of staff, the type and extent of damage to buildings and infrastructure, and the availability of essential services after the emergency has passed.

Facilities that were required to shelter during the emergency may need to consider relocating if there has been damage to the building or if essential services such as power, water and telecommunications have been disrupted.

Facilities that have relocated or evacuated will need to assess the nature and extent of any damage incurred at the facility or in the surrounding area. After an emergency it is important to conduct a site assessment to determine if there are any safety issues that have occurred as a result of the emergency and to assess requirements for the clean-up. If work is required to restore the facility it will be necessary to make interim arrangements for clients and staff.

Services that provide care in the home should plan to resume services as soon as possible and plan for the immediate needs of clients who are without support. It may take some time before all areas affected by an emergency are accessible and safe to enter.

A communication plan will be required to ensure clients, families of clients (where appropriate), staff, the department and other stakeholders are kept informed.

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| Actions for service providers to undertake after an emergency:   * Prioritise the needs of clients and staff following an emergency and ensure they have adequate care and support while they wait for services to return to normal. * Conduct site assessments and consider factors such as safe access and egress, communications, electrical safety, water sanitation and other health and safety issues. * Communicate regularly with clients, families and staff to keep them informed while waiting for a return to business as usual. * Conduct a debrief with staff and relevant stakeholders as soon as possible to discuss the emergency, what worked well and what could be done differently next time.   + Review and update emergency management plans to reflect lessons learned. |

1. Glossary

In the context of this reference guide, certain terms have specific meanings as follows:

* **client** – individuals or families who are receiving a service, including children and young people placed in out-of-home care, patients of health services, residents of accommodation services and NDIS participants.
* **Code Red** – is the highest fire danger rating in Victoria. It signifies the worst conditions for bushfires or grassfires. A Code Red fire danger rating means that if a fire were to start:
  + - it will be uncontrollable, unpredictable and fast moving
    - fire services will find it difficult to put out
    - there is a high likelihood that people in the path of a fire will be killed or seriously injured
    - even the best prepared homes will not be safe[[2]](#footnote-2).
* **control agency** – the primary or lead organisation responsible for responding to the emergency. For example, the State Emergency Service (SES) is usually the control agency for storm or flood events.
* **emergency** – as defined in the *Emergency Management Act 1986:*

‘An emergency due to the actual or imminent occurrence of an event which in any way endangers or threatens to endanger the safety or health of any person in Victoria, or which destroys or damages, or threatens to destroy or damage, any property in Victoria, or endangers or threatens to endanger the environment or an element of the environment in Victoria including, without limiting the generality of the foregoing:

* + - an earthquake, flood, wind-storm or other natural event
    - a fire
    - an explosion
    - a road accident or any other accident
    - a plague or an epidemic
    - a warlike act
    - a hi-jack, siege or riot
      * a disruption to an essential service.’
* **health services** – services covered by the *Health Services Act 1988,* including metropolitan Melbourne hospitals and health services, and rural hospitals and health services[[3]](#footnote-3).
* **home-based care** – foster care and kinship care for children and young people.
* **home-based care service contact** – means the funded agency or department area office with whom a foster carer or kinship carer regularly engages.
* **in-home and community-based services** – services provided in the home or in community settings such as personal care, day services, community-based respite, or information and referral services.
* **residential services** – overnight accommodation services provided in a facility-based setting. For example, residential and lead tenant out-of-home care arrangements, supported independent living (including respite), youth foyers and the Disability Forensic Assessment and Treatment Service.
* **service provider** – an organisation or individual providing a health service or community service to one or more clients

1. Hazard-specific information and resources

Bushfire and grassfire

Information and advice to help you plan and prepare for bushfire and grassfire is available through the Country Fire Authority: <http://www.cfa.vic.gov.au/plan-prepare/>

Specific local information for high-risk localities: <http://www.cfa.vic.gov.au/plan-prepare/your-local-area/>   
Victorian Bushfire Information Line: 1800 240 667.

* The State Bushfire Plan:   
  <https://www.emv.vic.gov.au/responsibilities/state-emergency-plans/state-bushfire-plan>

Bushfire risk identification

To assess whether a facility or property is exposed to a high bushfire risk, consider:

* local knowledge and the advice of fire services or others with relevant expertise
* bushfire risk assessments using a combination of factors such as vegetation type, distance from vegetation and slope

## Bushfire emergencies - Code Red day

The Code Red fire-danger rating forecasts the worst conditions for bushfire. A Code Red day represents a significant risk.

The Emergency Management Commissioner is responsible for declaring a Code Red day. This will occur no later than 1 pm the day before the Code Red day and will specify the weather district/s it applies to. The declaration will be communicated broadly.

All services that are impacted by a Code Red day should immediately undertake readiness activities.

Electricity supply disruptions

* Information about power outages and keeping safe during a power outage:  
  <https://www.energy.vic.gov.au/>
* Information on how to cope without gas or electricity:  
  <https://www.betterhealth.vic.gov.au/health/servicesandsupport/emergencies-coping-without-gas-or-electricity>
* Safe use of alternative fuel and electricity generators:  
  <https://www2.health.vic.gov.au/public-health/environmental-health/environmental-health-in-the-home/power-blackouts-generators-carbon-monoxide>

Extreme heat and heatwaves

**Extreme heat** occurs when the forecast average temperature on any day exceeds the predetermined heat health temperature threshold in a Victorian weather forecast district.

A **heatwave** involves three or more consecutive days of extreme heat.

Isolated days of extreme heat typically affect the health and wellbeing of Victorians who are most at risk, commonly due to age, illness, medication or social isolation

In heatwaves, these impacts are compounded and occur alongside significant health impacts across broad sections of the community. Heatwaves also affect Victoria’s natural, built and economic environments, often through the compromised operation of critical infrastructure, facilities and services.

The department's heat health alert system notifies registered subscribers (including local governments, program areas, hospitals, statewide and major metropolitan health and community service providers, and the general community) of forecast extreme heat and heatwave conditions which have the potential to impact on human health.

* Information about heatwaves and health:   
  <https://www2.health.vic.gov.au/public-health/environmental-health/climate-weather-and-public-health/heatwaves-and-extreme-heat>
* The Department of Health and Human Services heat health alert system to notify subscribers of forecast heatwave conditions. To view the alert system and sign up for alerts:  
  <https://www2.health.vic.gov.au/public-health/environmental-health/climate-weather-and-public-health/heatwaves-and-extreme-heat/heat-health-alert-status>
  + The State Extreme Heat Sub-plan:  
    <https://www.emv.vic.gov.au/responsibilities/state-emergency-plans/state-extreme-heat-sub-plan>
  + Bureau of Meteorology Heatwave Forecast Service for Australia

<http://www.bom.gov.au/australia/heatwave/index.shtml>

* + VIC Emergency

<https://www.emergency.vic.gov.au/respond/>

Flood, storm, earthquake

* The Victoria State Emergency Service provides information about floods, storms and earthquakes, including safety videos, and how to prepare for these hazards [www.ses.vic.gov.au](http://www.ses.vic.gov.au)
  + may have information about the flood risk in your area:  
    <https://www.water.vic.gov.au/waterways-and-catchments/our-catchments/catchment-management-framework>

Pandemic

Influenza

* The Victorian action plan for pandemic influenza:  
  <https://www.emv.vic.gov.au/responsibilities/state-emergency-plans/victorian-action-plan-for-pandemic-influenza>
* National, international and state plans for pandemic influenza  
  [www.health.vic.gov.au/pandemicinfluenza/](http://www.health.vic.gov.au/pandemicinfluenza/)

Novel Coronavirus (COVID-19)

* COVID-19 Pandemic Plan for the Victorian Health Sector  
  <https://www2.health.vic.gov.au/emergencies/emergency-type/infectious-diseases/covid-19-pandemic-plan>
* Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)  
  <https://www.health.gov.au/resources/publications/australian-health-sector-emergency-response-plan-for-novel-coronavirus-covid-19>
* Victorian resources for health services and professionals and community services  
  <https://www.dhhs.vic.gov.au/coronavirus>
* Commonwealth resources for health professionals, including aged care providers, pathology providers and health care managers  
  <https://www.health.gov.au/resources/collections/coronavirus-covid-19-resources-for-health-professionals-including-aged-care-providers-pathology-providers-and-health-care-managers>

Smoke exposure

* The State Smoke Framework outlines and describes a cross-government approach to smoke events that impact air quality and the health of communities.  
  <https://www2.health.vic.gov.au/about/news-and-events/videos/state-smoke-framework>
* Bushfire smoke and your health: <https://www2.health.vic.gov.au/public-health/environmental-health/climate-weather-and-public-health/bushfires-and-public-health>
* Smoke and your health <https://www.betterhealth.vic.gov.au/campaigns/smoke-and-your-health>

1. Risk assessment

Assess the types of emergencies that are likely to affect your facility or client. Results of the risk assessments should be incorporated into the emergency management plan.

### Likelihood

There may be multiple factors that contribute to the likelihood and degree of risk for a particular emergency. Consider adjusting the definitions for each likelihood level as appropriate to your service and clients.

Consideration should also be given to any historical incidents when determining the likelihood of an emergency. Your local government may be able to provide information about the history of emergencies in your area.

|  |  |
| --- | --- |
| Likelihood | Example definitions |
| Almost certain | Will occur at least once per year or more frequently |
| Likely | Will potentially occur once within every two years |
| Possible | May occur once in every five years |
| Unlikely | Could occur once in every 10 years |
| Rare | Will only occur in exceptional circumstances, such as once every 50 years |

### Consequences

Consequences represent the extent of injury of degree of harm that might be caused by an emergency.

|  |  |
| --- | --- |
| Consequence | Example definitions |
| Catastrophic | Death of clients or staff, ongoing impact on facilities and service continuity |
| Major | Extensive injuries requiring hospitalisation, major impact on facilities and service continuity |
| Moderate | Clients require medical treatment, residential facilities temporarily uninhabitable, impact on service continuity |
| Minor | First aid treatment, Some impact on client wellbeing, Some impact on facility, Impact on service continuity |
| Insignificant | No injuries, no structural damage, low impact on business |

Services should develop definitions for likelihood and consequence categories relevant to their clients and operations.

Likelihood and consequences of an emergency can be affected by the level of awareness of emergency plans or the amount of training provided to staff and clients

Risk Rating

* Use the risk matrix to assess risks as extreme, high, medium or low, and determine priorities for risk controls.
* Prioritise each risk according to its rating, with extreme and high risks requiring more urgent attention.
  + When prioritising risks with a similar rating, risks with a higher likelihood or more serious consequence are to be given a higher priority.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Likelihood | Consequences | | | | |
| Insignificant | Minor | Moderate | Major | Catastrophic |
| Almost certain | H | H | E | E | E |
| Likely | M | H | H | E | E |
| Possible | L | M | H | E | E |
| Unlikely | L | L | M | H | E |
| Rare | L | L | M | H | H |

Example risk assessment matrix

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Hazard* | *Likelihood* | *Consequence* | *Rating* | *Example Comments* |
| Grassfire | Unlikely | Major | E | Facility is in an area that could experience grassfire. Emergency planning for relocation underway |
| Heatwave | Likely | Minor | H | Impacts of heatwave may exacerbate effects of client’s medical condition, however this is mitigated by client having air conditioning installed in their home |
| Heatwave + Power outage | Possible | Major | E | Additional support to client required in the event of power outage and heatwave combined. Refer to client’s support plan and follow first aid guidelines if client or staff are affected by heat. |

Risk assessment template

*complete definitions appropriate for your service*

|  |  |
| --- | --- |
| Likelihood | Definitions |
| Almost certain |  |
| Likely |  |
| Possible |  |
| Unlikely |  |
| Rare |  |

|  |  |
| --- | --- |
| Consequence | Definitions |
| Catastrophic |  |
| Major |  |
| Moderate |  |
| Minor |  |
| Insignificant |  |

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|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Hazard | Likelihood | Consequence | Rating | Comments |
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1. Preparing a relocation and evacuation kit

A pre-prepared kit containing relevant emergency information and equipment could save valuable time and resources in the event of a relocation or evacuation. Contents should be checked regularly, particularly if any perishables are included in the kit.

***This list a sample list only and is not exhaustive. Your service should be aware of any specific circumstances for your clients and adjust your kits accordingly*.**

General equipment and supplies

* Battery-powered radio, and spare batteries (check expiration dates)
* Torches in good working order and spare batteries
* Woollen blankets
* Garbage bags
* Paper, pens and markers
* First-aid kit
* Antibacterial wipes and hand sanitiser gel
* Toilet paper
* Bottled water
* Non-perishable food and snack items

Client-specific items

* Medication and medical aids
* Copies of care plans
* Any important documents (including prescriptions)
* Thickened fluids and enteral feeding
* Continence aids
* Changes of clothes, toiletries
* Identification

Facility-based residential services requirements

* Emergency contact details (facility-based service)
  + - your local government emergency contact
    - your regional DHHS emergency contact
    - your state/federal agency emergency contact
    - local emergency services
    - hospitals, ambulance etc
* An up-to-date list of residents that includes information such as medical conditions, mobility status and next-of-kin emergency contact information and a photo
* Resident identity bands
* Spray water bottles (particularly useful is relocating during hot weather)
* Cool packs for transporting refrigerated medicines
  + Clipboard with notes, pens and pencils to record information

1. Key roles and responsibilities in emergency management

Emergency management planning occurs at national, state, regional and local levels through a range of planning committees. The level of a response is dependent on a number of factors including the scale and severity of the emergency and the potential consequences for the community.

Victoria’s emergency management arrangements are enshrined in the *Emergency Management Act 1986*, *Emergency Management Act 2013* and detailed in the Emergency Management Manual Victoria. The emergency management sector works together under these arrangements to pursue the shared vision of building safer and more resilient communities.

Understanding the key roles and responsibilities for emergency management provides the basis for a planned and integrated approach to managing emergencies across both the health sector and community services sector.

Local government

Local government works in partnership with agencies at the municipal level and has a range of emergency management responsibilities including:

* planning and preparing for emergency events
* undertaking risk reduction and mitigation activities
  + supporting the community to respond to, and recover from, emergency events.

Local governments coordinate the Municipal Emergency Management Planning Committee, which brings together emergency services, support agencies and other relevant parties to develop and review municipal emergency management plans.

State government

In Victoria, the state government is responsible for developing emergency management response and recovery capabilities, for protecting life, property and the environment and for coordinating a multi-agency response.

Emergency Management Victoria has the overarching responsibility for control, command and coordination across government, with specific agencies across government responsible for various elements of the emergency response. These responsibilities are detailed in the Emergency Management Manual of Victoria.

Commonwealth government

#### Residential aged care

At the national level, the Department of Health is responsible for:

* assisting residential aged care providers to build capacity to respond effectively during an emergency, including developing emergency plans.
* monitoring the capacity of residential aged care providers to care for residents during and after an emergency event.
  + supplying relevant information to residential aged care providers and reminding them of their responsibilities.

#### National Disability Insurance Scheme (NDIS) supports and services

The NDIS Quality and Safeguards commission has responsibility for ensuring that NDIS providers meet NDIS practice standards which includes (where applicable) preparedness and planning measures are in place to enable continuation of critical supports during and after an emergency.

1. <https://files-em.em.vic.gov.au/public/EMV-web/EMMV-Part-7.pdf> (Page 7-56) [↑](#footnote-ref-1)
2. https://www.cfa.vic.gov.au/documents/20143/80821/FINAL\_EMV\_Code\_Red\_FAQs\_General\_FAQs.pdf/b1f467dc-50e7-be63-da51-7d0e3362c059 [↑](#footnote-ref-2)
3. https://www2.health.vic.gov.au/hospitals-and-health-services/public-hospitals-victoria [↑](#footnote-ref-3)