EMERGENCY AND DISASTER MANAGEMENT POLICY AND PROCEDURE

Purpose and Scope

The purpose of this policy and procedure is to ensure the safety of staff, participants and others during emergencies and other service interruptions.It applies to all staff and meets relevant legislation, regulations and Standards Standards. It should be read in conjunction with CAHH's (Connect Allied Health Hub) Work Health and Safety Policy and Procedure.

Applicale NDIS Practice Standards

Emergency and Disaster Management

Outcome

Emergency and disaster management includes planning that ensures that the risks to the health, safety and wellbeing of participants that may arise in an emergency or disaster are considered and mitigated and ensures the continuity of supports critical to the health, safety, and wellbeing of participants in an emergency or disaster.

Indicators

• Measures are in place to enable continuity of supports that are critical to the safety, health, and wellbeing of each participant before, during and after an emergency or disaster.

• The measures include planning for each of the following:

o preparing for, and responding to, the emergency or disastero making changes to participant supports

o adapting, and rapidly responding, to changes to participant supports and to other interruptions and

o communicating changes to participant supports to workers and to participants and their support networks.

• The governing body develops emergency and disaster management plans (the plans), consults with participants and their support networks about the plans and puts the plans in place.

• The plans explain and guide how the governing body will respond to, and oversee the response to, an emergency or disaster.

• Mechanisms are in place for the governing body to actively test the plans, and adjust them, in the context of a particular kind of emergency or disaster.

• The plans have periodic review points to enable the governing body to respond to the changing nature of an emergency or disaster.

• The governing body regularly reviews the plans and consults with participants and their support networks about the reviews of the plans.

• The governing body communicates the plans to workers, participants, and their support networks.

• Each worker is trained in the implementation of the plans.

Risk Management

Outcome

Risks to participants, workers and the provider are identified and managed.

Indicators

• Risks to the organisation, including risks to participants, financial and work health and safety risks, and risks associated with provision of supports are identified, analysed, prioritised, and treated.

• A documented risk management system that effectively manages identified risks is in place and is relevant and proportionate to the size and scale of the provider and the scope and complexity of supports provided.

• The risk management system covers each of the following:

o incident management

o complaints management and resolution

o financial management

o governance and operational management

o human resource management

o information management

o work health and safety and

o emergency and disaster management.

Human Resource Management

Outcome

Each participant's support needs are met by workers who are competent in relation to their role, hold relevant qualifications, and who have relevant expertise and experience to provide person-centred support.

Indicators

• Workers with capabilities that are relevant to assisting in the response to an emergency or disaster (such as contingency planning or infection prevention or control) are identified.

• Plans are in place to identify, source and induct a workforce in the event that workforce disruptions occur in an emergency or disaster.

Definitions

Altering or ceasing services – services may at times need to be altered or ceased due to emergencies. This may be due to direct risk or impact on the location itself or because travel in the area is considered too unsafe.

Leaving early – the practice of relocating well in advance of an emergency. This activity is undertaken by households in response to a range of triggers such as a weather forecast or flood warning.

Emergency and disaster planning – identification of potential events that could have a negative effect on an organisation and/or its services, and the actions that can be taken to minimise the impact or extent of damage.

Evacuation – the urgent movement of participants to a safer location in response to an imminent threat or impact of an emergency. An evacuation without any prior warning is resource intensive and potentially detrimental to the health of participants, staff and emergency services personnel. The main priority when deciding to evacuate is the protection of life. An evacuation must be effectively planned and executed.

Extreme heat or heatwave – a period of unusual and uncomfortable hot weather that could negatively affect human health. Extreme heat can also affect community infrastructure (such as power supply and public transport) and other services. Extreme heat can affect everyone, however some people, including people with a disability, are more vulnerable.

Organisational Resilience – the ability of a business to rapidly respond to and recover from emergencies, critical disruptions or threats, and continue operating with limited impact on service delivery.

Relocation – the planned movement of participants and an appropriate number of staff from a facility or home to alternative accommodation with a similar type of care available, in response to a forecast or warning of potential or actual emergency.

Policy

Connect Allied Health Hub plans for emergencies and disasters in order to protect the safety, health and wellbeing of participants and staff before, during and after an emergency or disaster, and to ensure participants have access to supports without interruption. CAHH will ensure essential services are maintained as far as is practicable and that full service delivery is recommenced as soon as possible after an emergency or disaster.

Procedures

Emergency and Disaster Planning

Connect Allied Health Hub must take an 'all hazards' approach when preparing for, responding to and recovering from emergencies and disasters. This includes planning for a range of possible emergenciesand disasters such as fire, bushfire, flood, relocation, evacuation and prolonged service interruption.

The EMT (Executive Management Team) will prepare, test and annually review an Emergency and Disaster Management Plan] for CAHH, in consultation with all relevant staff, participants and participants support networks.

The Emergency and Disaster Management Plan, or a summary of key elements of the plan, must be readily accessible by staff and on display in CAHHs practices.

The Emergency and Disaster Management Plan must explain and guide how the EMT will respond to, and oversee the response to, an emergency or disaster. It must include:

• how serious accidents, bomb threats, fires, bushfires, floods, and other natural disasters will be responded to, as well as how unexpected relocations, evacuations, prolonged service interruptions

• contact details for key staff who have specific roles or responsibilities under the plan(e.g. contingency planning, fire wardens and first aid officers)

• contact details for local emergency services (e.g. police, fire brigade and poison information centre) and medical assistance

• how replacement staff will be identified, sourced, and inducted should workforce disruptions occur in an emergency or disaster

• a description of how people will be alerted to an emergency or possible emergency(e.g. sirens or alarms at IHC's office and by phoning affected participants or their supporters)

• a map of CAHH's practices, illustrating the location of fire protection equipment, emergency exits and assembly points

• evacuation procedures, including arrangements for assisting any people with hearing, vision or mobility impairment

• how IHC will adapt, and rapidly respond, to changes to participant supports that are required because of an emergency, disaster, or other service interruption. This includes how changes will be made and communicated to staff, participants and participants' support networks

• testing of emergency procedures, including the frequency of testing and

 • information, training and instruction to staff on implementing the Plan.

The Emergency and Disaster Management Plan must be tailored to the business' location and circumstances and be based on consultation with local health and emergency services, as well as staff, participants and participants support networks.

In the event of an emergency or disaster, CAHH's Emergency and Disaster Management Plan must be implemented. Directions from emergency services workers must also be complied with.

 The EMT will review CAHH's Emergency and Disaster Management Plan, in consultation with staff, participants and participants support networks, at least annually. It will also review the Plan:

• when there are changes to the workplace such as re-location or refurbishments

• when there are changes in the number or composition of staff including an increase in the use of temporary contractors• when new activities have been introduced and

• after the plan has been tested. Upon the development of the Emergency and Disaster Management Plan, and after each review, IHC will communicate any changes as soon as practicable to all staff, participants and participants support networks.

Emergency Evacuation Plans

The Practice Manager must also prepare and regularly review Emergency Evacuation Plansfor how people should evacuate the premises, including where they should assemble if there is an emergency. Reviews should take into account the choices, safety, rights and feedback of participants, whilst also managing the businesses need to manage risk. Where there are changes to Emergency Evacuation Plans, these must be promptly communicated to staff and other stakeholders who access the premises.

Emergency Evacuation Plans must be displayed prominently in each practice. Each Plan must clearly indicate its current location, where the exits are and where the assembly area is. This information must also be included in staff Inductions and participant intakes.

Emergency and evacuation procedures must be practised with all staff at least annually. CAHH will utilise different scenarios as part of the drills, e.g. fire, flood, bomb threat, mass illness. A record of who attended the exercise, who conducted the exercise and the date it was conducted will be kept with organisational records.

Operational Readiness

The EMT must ensure CAHH is prepared to rapidly respond in the event of an emergency or disaster. This includes:

• having an Emergency and Disaster Management Plan in place

• ensuring the Emergency and Disaster Management Plan is tested and linked to broader community emergency frameworks

• actively engaging with local emergency service agencies and local government about how to respond in different emergencies

• regularly testing emergency and disaster management and evacuation procedures

• being prepared to make informed decisions about staff and participant safety and whether to cease or change services, relocate staff or participants, or direct staff and participants to shelter indoors

• considering how support for participants can be continued if services need to be altered or ceased in an emergency

• planning how to respond if critical infrastructure (e.g. Practice Management System) fails during an emergency, such as power failures

• ensuring staff are aware of their roles and responsibilities in the event of an emergency

• ensuring all relevant contact details (such as staff, participants, participants support networks, emergency services, and relevant government agencies) are up to date and available and

• training staff to implement Emergency and Disaster Management Plan [or equivalent], ensuring they are equipped to address individual participant needs.

Staff must:

• ensure all participant information, including contact details for the participant and participants' support networks, are up to date and easily accessible

• consider participants' needs in a range of possible emergency events

• communicate CAHH's Emergency and Disaster Management Plan to relevant stakeholders, for example, participants, participants' support networks and related service providers

• as part of support planning, ensure alternative plans for participants exist if service delivery is interrupted

• support participants living independently to develop their own personal emergency plan and

• notify participants and their participants' support networks where relevant, of all relocations and service cessations or alterations related to emergencies and disasters.

Obtaining Emergency Information

In the event of an emergency or disaster, the Practice Manager will obtain information about current and forecast conditions from radio, television the internet and its local networks.

Agencies such as the Bureau of Meteorology (weather forecasts), the State Emergency Service (floods and storms), Fire and Rescue services (fires and bushfires) and the Police monitor forecast hazards and provide advice and warnings. For any high risk or high needs clients, the Practice Manager will also contact local emergency services to advise of the situation and potential support that may be needed.

Fire Safety

The Practice Manager must ensure that fire equipment is installed, suitable for risks specific to their practice and be readily accessible in accordance with the relevant Australian Standards. Fire extinguishers must be placed away from heat sources and regularly maintained, with at least 1 metre of clearance to access the extinguisher.Signage within CAHH's practices must assist people to find fire equipment quickly and identify what type of fire it can be used on.

All staff must be trained in first response procedures, including how to use fire equipment and know what type of fire extinguishers to use for different types of fires. Refresher training must be conducted at least annually. The Practice Manager must ensure fire equipment is regularly tested by their local fire authority or fire equipment supplier in accordance with Internal Review and External Audit Schedule. Emergency exits must be kept clear at all times. Emergency exits must be kept unlocked and unblocked and all exit signs must be maintained and kept illuminated.

Power Failure

Power failures can be common and unexpected so the Emergency and Disaster Management Plan should include a plan to ensure supports can continue to be provided during them. Strategies include:

• having access to a phone, such as a charged mobile phone or land line that doesn't rely on electricity to operate

• having access to alternate lighting, such as a torch or a battery-operated light

• having access to a battery-powered radio

• having access to fresh water

Extreme Weather

The Emergency and Disaster Management Plan should also plan for extreme weather (such as extreme heat or cold) that is likely to occur where IHC supports are delivered. The plan should help staff identify which participants are most at risk and the support they may require.

 To support participants on extreme heat days or during heatwaves, staff must be aware of the following:

• which participants are most at risk

• how to assist participants to reduce the risk of heat related illnesses

• how to recognise heat related symptoms and

• what to do if a participant is heat affected.

On days above 30 degrees Celsius, staff should encourage participants to:

• drink plenty of water, even if they don't feel thirsty

• spend as much time as possible in cool or air conditioned buildings (shopping centres, libraries or community centres)

• wear light coloured, loose fitting clothing

• stay out of the sun during the hottest part of the day

• wear a hat and apply sunscreen

• avoid alcohol and caffeine

• close curtains or blinds to block out the sun and

• use wet towels and cold foot baths to cool themselves down.

Similarly, for days above 30 degrees Celsius staff are encouraged to have discussions with participants about suitable activities based on their circumstances and support

needs. Where required, they should avoid strenuous activity, cancel, or postpone outings.CAHH also requires all staff to follow the same precautions when working on hot days to ensure their health and wellbeing is maintained.

Organisational Resilience

In addition to planning for the safety and wellbeing of staff and participants in an emergency, CAHH's emergency planning is also based on strengthening its organisational resilience – or building the business' capacity to continue providing necessary services during emergencies. To support this, CAHH undertakes organisational risk assessments related to business continuity and emergency and disaster management and recovery. It also develops specific Business Continuity Plans [or equivalent] to complement its emergency planning activities. See the Risk Management Policy and Procedure for more detail.

Participant Readiness

CAHH's services may need to be changed, ceased or relocated in the event of an emergency, disaster or other service interruption. Support planning for all participants must consider how services can continue to be provided in these situations. This includes, for instance, considering how changes to services will be communicated to participants and their support networks, and alternative supports that could be provided should CAHH be unable to deliver normal services.

For services provided to a participant in their own home (whether rented or owned by the participant), CAHH expects that they (and where appropriate, the owner of the home) will be responsible for their own fire safety and ensure the home meets all relevant building laws, regulations and legislation. Participants receiving services in their home should be encouraged and supported to develop personal emergency plans that cater for all types of emergencies and address their needs.

CAHH staff will support participants with personal emergency planning in the following situations:

• where CAHH provides the majority of supports required by a participant, and these supports are provided in the participant's home

• where multiple providers support the participant and it is agreed by all providers and the participant that CAHH will support the participant with personal emergency planning and/or

• where assessment and planning activities identify that the participant requires support with personal emergency planning.

Staff will support participants to exercise choice and control in emergency planning by listening to their needs and preferences and involving them and their families and carers in the planning process.

Key considerations include:

• health needs

• transportation

• supports that are critical to the participants' health, safety, and wellbeing

• location of the participant's home in regard to fire or flood risks and

• ensuring emergency information is available and relevant for the participant.Personal emergency management plans should:

• be appropriate to the location, physical environment and participant and staff profile

• include planned emergency responses for different emergency situations, such as options for altering or ceasing services, relocation, sheltering and evacuation

• include clear triggers for when the plan is activated, including processes for maintaining situational awareness and sourcing accurate and up-to-date information

• be tailored to meet the particular CALD needs of participants, such as Aboriginal and Torres Strait Islander people and communities, to ensure a culturally responsive approach

• outline clear authority for decision making and communication arrangements; and

• include arrangements for continuity of supports and options should emergency services be unable to respond immediately.

Personal emergency plans should be reviewed and updated regularly as part of the participant's Support Plan reviews.

Reporting

Incidents relating to emergencies and service interruptions should be reported in accordance with CAHH's Incident Management Policies and Procedures.

Supporting Documents

Documents relevant to this policy and procedure include:

• Work Health and Safety Policy and Procedure

• Workplace Incident Management Policy and Procedure

• Risk Management Policy Procedure

- Emergency and Disaster Management Plan

- Risk Register

- Service Agreements

- Support Plans

- Emergency Evacuation Plans

Monitoring and Review

This policy and procedure will be reviewed at least annually by the EMT. Reviews will incorporate staff, participant and other stakeholder feedback, where relevant.

CAHH's Continuous Improvement Plan will be used to record improvements identified and monitor the progress of their implementation. Where relevant, this information will be considered as part of CAHH's service planning and delivery processes.