



# **Western Australian Government Pandemic Plan**

**March 2020**

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The *Western Australian Government Pandemic Plan (WAGPP)* will be updated as required. The latest version of the WAGPP will be available from the website of the Department of the Premier and Cabinet.

## Amendment List

Amendment		Details
1	July 2006	Initial issue as the Western Australian Government Human Influenza Pandemic Plan
2	November 2008	Revised to reflect the work of the Western Australian Government Human Influenza Pandemic Taskforce
3	April 2014	Revised to take account of developments in national and health plans since the 2009 H1N1 pandemic
4	March 2020	Revised and re-issued as Western Australian Government Pandemic Plan
5	June 2020	Minor updates to links in Annexure 1 and Appendix B.

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# 1. Introduction

## 1.1. Background

Pandemics are epidemics<sup>1</sup> on a global scale. For a communicable disease to have pandemic potential, it must meet three criteria:

- humans have little or no pre-existing immunity to the communicable disease;
- the communicable disease leads to illness in humans; and
- the communicable disease has the capacity to spread efficiently from person to person.

The impact of a pandemic depends on how sick the virus makes people (clinical severity), the ability of the virus to spread between people (transmissibility), the capacity of the health system, the effectiveness of interventions and the vulnerability of the population. The *Australian health management plan for pandemic influenza*<sup>2</sup> outlines possible scenarios (clinical severity being low, moderate, or high) and the differences in potential impact at each clinical severity level.

Pandemics are often, but not always, caused by influenza viruses. An influenza pandemic occurs when a new influenza virus subtype emerges, to which there is little or no immunity. In the absence of immunity, the new subtype can spread rapidly worldwide to become a pandemic, potentially causing high numbers of cases of severe disease and deaths. The pandemic strain eventually becomes one of the seasonal influenza viruses.

There have been several human influenza pandemics over the past hundred years. The Spanish Flu (1918-1919), Asian Flu (1957-1958), and Hong Kong Flu (1968-1970) were the most severe, causing millions of deaths worldwide. The H1N1 ('Swine Flu') pandemic in 2009-10 was less severe. Despite the limited number of deaths compared to previous pandemics, the H1N1 pandemic put considerable strain on health authorities.

Coronaviruses (CoV) are a large family of viruses that cause illness that include the common cold. The World Health Organization (WHO) describes a novel coronavirus (nCoV) as "a new strain that has not been previously identified in humans"<sup>3</sup>. On 30 January 2020 the WHO declared the novel coronavirus (COVID-19) outbreak to be a "Public Health Emergency of International Concern". On 28 February 2020 the WHO raised COVID-19 to the highest level of global risk.

Western Australia's whole of government response is based on effective leadership, robust governance, useful and credible communication, and ongoing community engagement. The response is aligned with the response of other Australian jurisdictions, including the Australian Government.

Throughout this document the use of the term Western Australian Government (WA Government) is used to describe the Cabinet, the Executive Council and Public Sector Agencies. In many instances it is the responsibility of agencies to make decisions about response activities, rather than their Ministers.

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<sup>1</sup> The Centers for Disease Control and Prevention (<https://www.cdc.gov/>) state: **Epidemics** occur when an agent and susceptible hosts are present in adequate numbers, and the agent can be effectively conveyed from a source to the susceptible hosts. **Endemic** refers to the constant presence and/or usual prevalence of a disease or infectious agent in a population within a geographic area

<sup>2</sup> <https://www1.health.gov.au/internet/main/publishing.nsf/Content/ohp-ahmppi.htm>

<sup>3</sup> <https://www.who.int/health-topics/coronavirus>

## 1.2. About this Plan

### 1.2.1. Purpose

The purpose of the *Western Australia Government Pandemic Plan* (the WAGPP) is to outline the WA Government's whole of government plan for protecting the community and minimising the impact of a human epidemic (of pandemic nature) on Western Australia. The WAGPP is flexible and aims to be applicable to mild, moderate or severe pandemics. The arrangements in the plan may be used as a whole of government plan for other health emergencies which do not reach but have pandemic potential.

The WAGPP supports the Western Australian health emergency management response to a human epidemic which is set out in the [State Hazard Plan – Human Biosecurity](#).

### 1.2.2. Objectives of the WAGPP

The objectives of the WAGPP are to:

- outline the Western Australian governance arrangements for, and approach to, minimising the impacts of a pandemic;
- provide guidance on preparedness to the community (including households), businesses and government bodies; and
- outline the roles and responsibilities of key government bodies in the event of a pandemic.

### 1.2.3. National planning framework

The WAGPP sits within the national planning framework for managing the risk of a pandemic. National arrangements are set out in:

- the [Emergency Response Plan for Communicable Disease Incidents of National Significance](#) (the National CD Plan); and
- the [Australian Health Sector Emergency Response Plan for Novel Coronavirus \(COVID-19\)](#) (the COVID-19 Plan)

The broad objectives of the national planning framework are to:

- prevent the emergence of a potentially pandemic virus, to the extent possible;
- minimise the spread of any new virus and, if possible, prevent a pandemic developing;
- provide timely, authoritative and up to date information to the public, business, government bodies, and the media throughout the period of a potential or actual pandemic;
- minimise the number of illnesses and deaths;
- minimise any general disruption to society;
- minimise economic consequences;
- assist maintenance of essential services;
- preserve continuity of essential government functions;
- assist business continuity; and
- aid pandemic recovery efforts.

#### 1.2.4. Planning assumptions

It is not possible to predict the nature and severity of a pandemic. It is therefore important to incorporate sufficient flexibility in planning processes. Notwithstanding this, based on health authorities' advice the following planning assumptions underpin the WAGPP.

- Susceptibility to a novel pandemic virus will be universal.
- Sustained community transmission of a novel virus signals an imminent pandemic.
- The pandemic may occur in several waves, with peaks of infection occurring months apart.
- Risk groups for severe and fatal infection cannot be predicted with certainty but may include infants, the elderly, pregnant women, persons with chronic or immunosuppressive medical conditions, and Aboriginal and Torres Strait Islander peoples.
- The spread of disease can be limited by prevention and preparedness actions.
- The development and national delivery of an effective pandemic-specific vaccine may take many months.
- If effective antiviral medications are available, their use may need to be targeted, in accordance with a nationally agreed approach, to try and prevent the spread of the disease and to treat those most at risk.
- The impact of a pandemic could have significant health, economic, community and social impacts on Western Australia. [Table 1](#) outlines some of these possible impacts.

#### 1.2.5. Emergency management framework

Western Australia's emergency management framework is overseen by the State Emergency Management Committee, which approves the State Emergency Management Policy and State Emergency Management Plan, and a number of State Hazard and State Support Plans on behalf of the Government.

Under the framework, a human epidemic emergency is managed under the [State Hazard Plan – Human Biosecurity](#) and relevant health plans. Other emergency management support plans are activated as needed, including those relating to public information, welfare services and recovery. The State Emergency Management Policy and State emergency plans and supporting plans are available from the [State Emergency Management Committee website](#).

Planning for a human epidemic is based on the emergency management elements of prevention, preparedness, response and recovery. The description of preparedness and response stages as referred to in the CD Plan are:

- **Preparedness:** No novel strain detected, or emerging strain under initial detection.
- **Response:**
  - Standby: Sustained community person to person transmission detected overseas.
  - Initial action: Cases detected in Australia – information about the disease is scarce.
  - Targeted action: Cases detected in Australia – enough is known about the disease to tailor measures to specific needs.
  - Stand-down: Public health threat can be managed within normal arrangements. Monitoring for change is in place.

Key national and State priorities for each stage are set out in Table 2 – National and State priorities for prevention, preparedness, response and recovery National priorities are drawn from Appendix 1 of the [National CD Plan](#).

## **1.2.6 Network of Personnel for Incident Management**

The State Emergency Management Committee has agreed arrangements that allow agencies to better share resources at times of significant need for the State. These arrangements provide streamlined interoperability procedures sharing skilled resources as required for emergency management operations in Western Australia.

The arrangements are designed to meet extraordinary needs only and are underpinned by the guiding principles of:

- Integration – ensuring a whole-of-Government and seamless approach to service delivery;
- Collaboration – ensuring the advantages of working together as a whole public sector are maximised;
- Flexibility – ensuring personnel have the ability to adapt to the dynamics of a changing environment as a result of an evolving hazard;
- A shared workforce identity – ensuring community needs are met by collaborating and sharing resources across the public sector; and
- Focus on community needs by the Public Sector – understanding the diverse and changing needs of the community through open communication across the public sector.

Provision of support under these arrangements is for specific organisational functions aligned to individual knowledge, skills and capability. Personnel providing support to the response or recovery management authority may be requested to perform functions in various locations across Western Australia.

## **1.3. Governance and operational arrangements**

Comprehensive governance structures are in place across national and state levels of government to manage emergencies, including human epidemics / pandemics. The structures are outlined in the Australian Government Crisis Management Framework and CD Plan, and reflected in the WAGPP.

Figure 1 outlines the high-level generic governance arrangements for the WA Government's management of its response to a pandemic and its interaction with inter-jurisdictional pandemic coordination arrangements. It is divided into the high-level governance for the health response and the whole-of-government response (i.e. the broader Public Sector's response and consequence management), and reflects the State's high-level emergency management arrangements. Figure 1 does not outline the interaction between these arrangements and other sectors (e.g. private sector, community sector and media sector).



**Table 1. Possible Impacts of a Pandemic on Western Australia**

<p><b>Health Impacts</b></p>	<ul style="list-style-type: none"> <li>• Demands for health care related to the pandemic could be significant, even in a relatively mild pandemic, and may have a significant impact on the delivery of non-pandemic related health care.</li> <li>• Special health care arrangements, such as the establishment of pandemic screening clinics for assessment of cases, may need to be activated.</li> <li>• Government and non-government organisations may be required to direct resources to support the Department of Health in order to maintain infection control policies (such as home quarantine), provide goods, personnel and security.</li> <li>• In a severe pandemic, mental health issues may occur in the community as a result of dealing with illness or death among family members, interruption of critical community services, loss of employment, and financial losses.</li> </ul>
<p><b>Community and Social Impacts</b></p>	<p>Community Impacts</p> <ul style="list-style-type: none"> <li>• Workplace absenteeism may threaten the continuity of essential community services.</li> <li>• People who are unwell may feel pressured to attend work for economic reasons.</li> <li>• Disruption to community life may result from measures taken to reduce the spread of infection by closing schools, businesses, and places of mass gathering etc.</li> <li>• Some community groups may have difficulty accessing and receiving services during a pandemic. Vulnerable groups will need increased support and carers may be unable or unwilling to perform their usual role.</li> <li>• If there are a large number of deaths, there may be a need for increased support and counselling services for those who are bereaved. The State's mortuary capacity may be impacted and funeral and burial services may need to be simplified, for example numbers attending funerals restricted.</li> <li>• Accommodation and support may be required for those in imposed quarantine or isolation.</li> <li>• Possible reduction in available volunteers and/or a need for volunteer agencies to manage a sharp increase in the number of spontaneous volunteer applications.</li> <li>• There may need to be changes to work practices and the work environment to limit the spread of disease (e.g. social distancing measures).</li> </ul> <p>Social-emotional Impacts</p> <ul style="list-style-type: none"> <li>• Law and order issues may arise if people become anxious about the security and safety of their environment.</li> <li>• General anxiety and fear may lead to significant changes in behaviour (panic, avoidance, anti-social, blaming, isolating others).</li> <li>• Psychological support and reassurance needs will rise amongst both vulnerable people and the general population.</li> <li>• Adult behaviour may cause growing anxiety and fear in children and young people.</li> <li>• Social media will spread messages and accentuate fear amongst all age groups.</li> <li>• Certain locations (e.g. public places, workplaces, schools) may become stigmatised and avoided during and after the pandemic.</li> </ul>
<p><b>Economic Impacts</b></p>	<ul style="list-style-type: none"> <li>• All economies are likely to experience negative impacts with some sectors experiencing significant downturns and markets experiencing significant shocks.</li> <li>• Disruption of business activities, resulting in some business failure.</li> <li>• Loss of or reduction in employment.</li> <li>• Sudden shifts in supply and demand of goods and services.</li> <li>• Reduced cash flow in the community as people stay at home or, due to reduced income, have less money to spend.</li> <li>• Flow on impacts on Australian financial markets from worldwide economic disruption.</li> </ul>

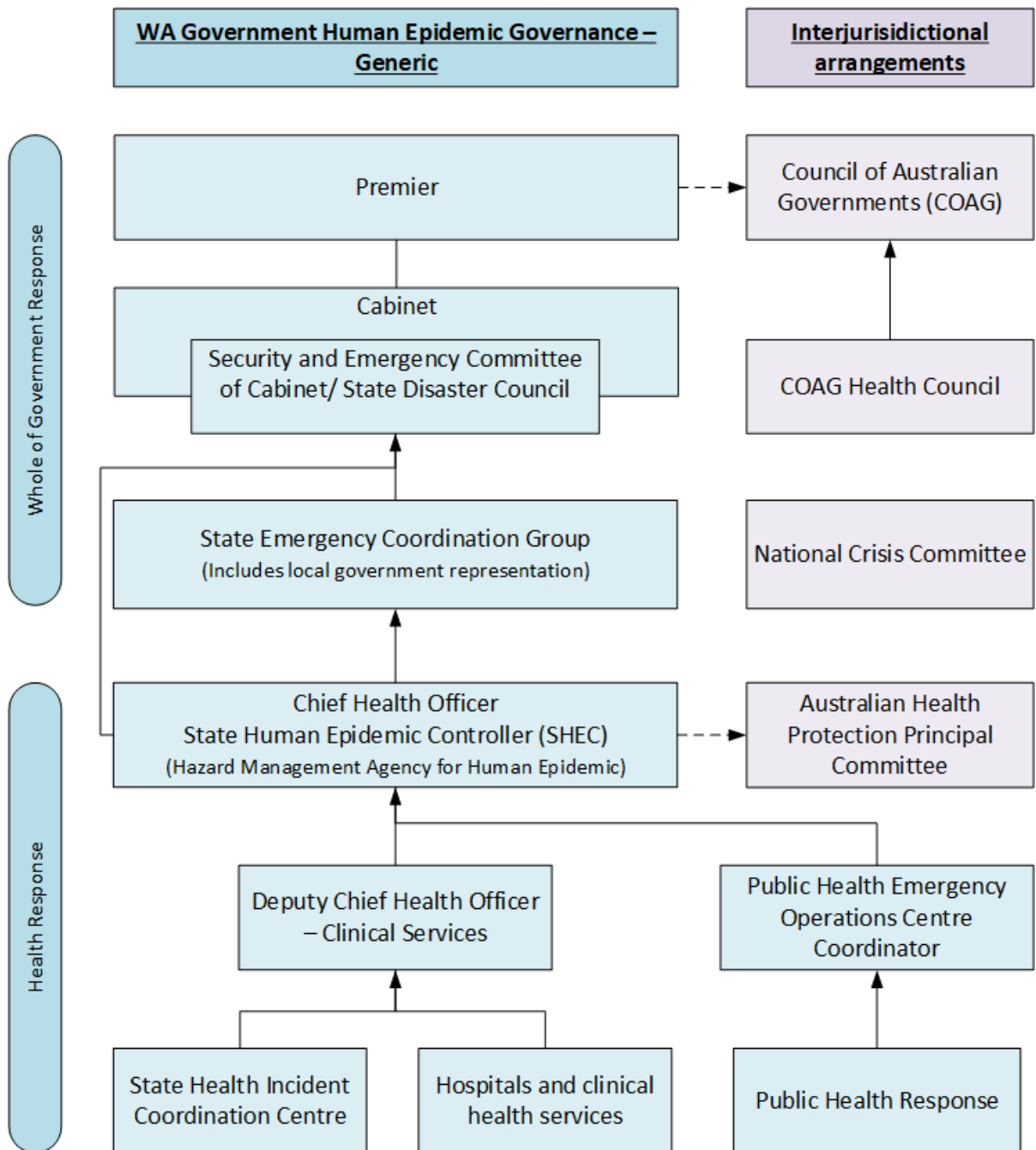
**Table 2 – National and State priorities for prevention, preparedness, response and recovery**

	<b>National CD Plan</b>	<b>WA</b>
<b>Prevention:</b>	<ul style="list-style-type: none"> <li>• Human disease surveillance programs</li> <li>• Domestic immunisation programs</li> <li>• Communicable disease prevention activities (applicable to all stages)</li> <li>• Establishment of infection control guidelines</li> <li>• Screening at borders</li> </ul>	<ul style="list-style-type: none"> <li>• Environmental health programs to minimise risk of disease transmission (such as provision of safe food and water; effective sewerage systems)</li> <li>• Immunisation programs against vaccine-preventable diseases</li> <li>• Vector control programs, to prevent the transmission of vector-borne diseases</li> <li>• Preventable disease surveillance systems and initiation of control activities</li> <li>• Health promotion and education activities for health professionals and the public</li> <li>• Collaboration with national and international health agencies on disease prevention and control activities</li> </ul>
<b>Preparedness:</b>	<ul style="list-style-type: none"> <li>• Establish and exercise plans, legislation and administrative frameworks necessary to support an effective response</li> <li>• Support containment activities (where feasible)</li> <li>• Establish communication networks with essential services providers</li> <li>• Establish pharmaceutical and protective equipment stockpiles</li> <li>• Gather and share information between stakeholders to promote preparedness to respond rapidly and effectively</li> </ul>	<ul style="list-style-type: none"> <li>• Develop plans and arrangements to manage human pandemic emergencies</li> <li>• Identify vulnerable populations and methods to access these populations in a timely fashion, to provide advice and support</li> <li>• Community education</li> <li>• Coordinate/control arrangements with other jurisdictions</li> </ul>

**Table 2 (continued) – National and State priorities for prevention, preparedness, response and recovery**

	<b>National CD Plan</b>	<b>WA</b>
<b>Response:</b>	<ul style="list-style-type: none"> <li>• Implement and support health sector response</li> <li>• Maintain essential government services</li> <li>• Regularly inform and engage the public, key community groups and spokespeople</li> <li>• Maintain essential services and liaise with providers of critical infrastructure</li> <li>• Implement business continuity plans as necessary</li> <li>• Assess impacts and revise plans as needed</li> <li>• Implement measures to restore emotional and psychological wellbeing</li> </ul>	<p><b>Alert</b></p> <ul style="list-style-type: none"> <li>• Monitor the situation to determine if the emergency can be dealt with at the local or district level, or if further action required</li> <li>• Link with Communicable Diseases Network Australia</li> <li>• Alert participating organisations of the potential need to become involved in the emergency response</li> </ul> <p><b>Standby</b></p> <ul style="list-style-type: none"> <li>• Stand up relevant operational groups including an Incident Support Group of agencies and organisations with response role under State Hazard Plan – Human Biosecurity</li> <li>• Notify and consult with Communicable Diseases Network Australia and the Australian Health Protection Principal Committee (AHPPC)</li> </ul> <p><b>Response</b></p> <ul style="list-style-type: none"> <li>• Appoint an Incident Controller (IC)</li> <li>• Activate the Public Health Emergency Operations Centre</li> </ul>
<b>Recovery:</b>	<ul style="list-style-type: none"> <li>• Continue to provide measures to restore emotional and psychological wellbeing</li> <li>• Assist social and economic recovery</li> <li>• Restore essential and community infrastructure to normal service</li> <li>• Prepare for future waves</li> <li>• Debrief and revise plans and arrangements.</li> </ul>	<ul style="list-style-type: none"> <li>• Implement recovery arrangements under the State emergency management framework</li> <li>• Activate State-level recovery arrangements to support coordination of community recovery in the social, economic, natural and built environments.</li> <li>• Activate the State Recovery Coordination Group, if needed.</li> <li>• Appoint a State Recovery Controller, if appropriate.</li> <li>• Develop a State-Level Recovery Plan, if appropriate</li> </ul>

**Figure 1: High level Western Australian human epidemic governance arrangements and interaction with the Australian Government**



### 1.3.1 Roles and Responsibilities

The key roles and responsibilities for all levels of government prior, during and after a pandemic are detailed in the [National CD Plan](#), and Western Australia's [State Hazard Plan – Human Biosecurity](#). These systems and processes are well developed, and are reviewed regularly. These roles and responsibilities include:

For the **WA Government**, to:

- work with the Australian Government and other States and Territories to ensure national coordination;
- work with local government, business and the community to support preparedness, implementation of response measures and recovery;
- develop, maintain and exercise relevant health and emergency management plans (operational);
- primary responsibility for the response to a communicable disease emergency within the State, including:
  - undertaking contact tracing;
  - coordinating distribution of antiviral drugs and disseminating protocols on the use of antivirals;
  - implementing social distancing measures as per national recommendations and local risk assessment;
  - implementing infection control guidelines and healthcare safety and quality standards; and
  - provide significant support to clinical services
- establish and maintain public health services; manage state and territory government health resources to support the response, including (where applicable) a state/territory Medical Stockpile;
- maintain essential and government services;
- establish systems to promote the safety and security of people in aged care and other institutional settings;
- support outbreak investigation and management in residential aged care facilities, schools, prisons and other institutions; maintain services to people with disabilities and residential and community aged care sector;
- support community recovery and deliver support services, such as mental health services; and
- coordinate the State's public information strategy on the pandemic.

For the **Australian Government**, to:

- determine, maintain and implement national policies, legislation and broad national strategies in close consultation with State and Territory Governments;
- maintain national capabilities to deal with a pandemic;
- coordinate international border health activities and immigration matters;
- provide advice to travellers and assistance to Australians overseas;
- provide nationally consistent guidance for health professionals;
- coordinate the national public information strategy and operate the national call centre for providing emergency information to the public;
- facilitate provision of Australian Government support to States and Territories;
- as far as possible, maintain government services;
- deliver government payments;
- work with States and Territories to maintain essential services and other support services;

- work with other healthcare providers to set standards to promote the safety and security of people in aged care and other institutional settings, establishing and maintaining infection control guidelines, healthcare safety and quality standards; and
- maintain cooperative relationships with the owners and operators of critical infrastructure to facilitate industry preparedness, continued operation, and recovery from a pandemic.

For **Western Australian Local Governments** to:

- provide community leadership and support the maintenance of civil society;
- maintain emergency management plans and capabilities under the State's emergency management framework;
- maintain business continuity plans to deliver essential services;
- represent the interests of local communities and businesses in broader planning processes;
- in partnership with State and Territory Governments, inform the public of planning, preparations, response and recovery activities;
- work with State and Territory Governments to tailor public information to the needs of the community, particularly to support vulnerable groups; and
- provide support with other local resources as requested by the SHEC or local State, Metropolitan or Regional Human Epidemic Control Centres<sup>4</sup>.

## 1.4. Legislation

Key legislation supporting emergency management of a human epidemic occurring in Western Australia includes the *Public Health Act 2016* (WA), the *Emergency Management Act 2005* (WA), the *National Health Security Act 2007* and the *Quarantine Act 1908*. Other applicable legislation includes the *Air Navigation Act 1920*, *Customs Act 1901*, and the *Privacy Act 1988*.

The [Public Health Act 2016 \(WA\)](#) (PH Act) and [Emergency Management Act 2005](#) (WA) (EM Act) provide powers that may be used to manage an emergency as a result of a human epidemic which requires a significant and coordinated response. Implementation of human epidemic management arrangements will rely on voluntary compliance and support, rather than legal enforcement to the greatest extent possible.

## 1.5. Ethical Framework

In the event of a pandemic, governments may need to make a number of difficult decisions about a wide range of response and recovery issues, including decisions about restricting individual freedoms and allocating limited resources. There may be conflicts between the needs and interests of individuals and those of the broader community, and a need to prioritise assistance to those in need of support.

The WA Government will ensure that the protection of the community as a whole is a primary focus of Government decisions, and ensure that any actions taken are based on evidence and expert advice, proportionate, equitably applied, and respect the rights of the individual. To the

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<sup>4</sup> The capability and commitment of each Local Government to undertake the tasks and meet the responsibilities identified in the State Plan should be confirmed by the HMA and detailed in the Local Emergency Management Arrangements (LEMA). This will ensure the varying capabilities of individual Local Governments are recognised and agreed to by all parties.

greatest extent possible, decisions and measures will be consistent with approaches in other Australian States and Territories.

Actions and decisions will be guided by the State Emergency Management Committee's State Core Objectives:

- |                        |   |
|------------------------|---|
| <b>People:</b>         | Protect lives and wellbeing of persons  |
| <b>Economy:</b>        | Maintain and grow the State's productive capacity, employment and government revenue  |
| <b>Social Setting:</b> | Ensure that there is public order, that people are housed and fed in a safe and sanitary manner and have access to social amenities including education and health services, and that things of cultural importance are preserved |
| <b>Governance:</b>     | Ensure that there is, at all times, an effective and functioning system of government and societal respect for rule of law  |
| <b>Infrastructure:</b> | Maintain the functionality of infrastructure, particularly key transport infrastructure and utilities required for community health, economic production and effective management of emergencies                                  |
| <b>Environment:</b>    | Protect ecosystems and biodiversity   |

## **2. Prevention and Preparedness**

### **2.1. Introduction**

Prevention and preparedness encompasses all activities aimed at preventing a pandemic and ensuring that Western Australia can effectively deal with a pandemic if it occurs. This includes the WA Government working with the Australian Government and other jurisdictions to develop plans to deal with an outbreak of a pandemic, and reviewing and updating these arrangements when appropriate.

The WA Government will work closely with other sectors including businesses and non-government organisations to effectively prevent, and plan for a pandemic. This work will complement planning for pandemic preparedness and business continuity of individual businesses and organisations.

### **2.2. Western Australia's capability**

Western Australia has the ability and capability to prepare for, respond to and recover from a pandemic situation. However, as the impacts of pandemics are generally unpredictable, WA Government agencies will take a flexible, collaborative approach to allow for the most appropriate actions to be taken. The development and maintenance of capability is shared across government agencies, outlined by key portfolio responsibilities.

### **2.3. Health sector planning for a human epidemic**

The WA health sector's responsibilities for public health planning generally derive from the PH Act and are distinct from emergency management planning under the EM Act which is the responsibility of the Hazard Management Agency (HMA). The health sector's responsibilities include developing and maintaining strategies for:

- surveillance, monitoring and reporting, including monitoring levels of epidemic or influenza-like illness in people attending hospitals and laboratory reports of diagnoses;
- infection control, including isolation and quarantine of cases and their contacts, and protective measures and precautions for healthcare workers and non-health sector workplaces;
- public health communications regarding the disease and effective ways to minimise the risk of infection;
- support and assistance towards the Australian Government administration and distribution of national medical stockpile and medical stockpiles of equipment, personal protective equipment and medication. These resources will be deployed in accordance with agreed national principles and based on the level of risk of exposure to the epidemic disease and the ability to contain its further spread; and
- administration and distribution, once it is developed, of a customised vaccine.



## 2.4. Whole of Government planning for a pandemic

The WAGPP outlines the whole of government planning for a pandemic. The Department of the Premier and Cabinet has responsibility for maintaining and reviewing this Plan.

The Department of the Premier and Cabinet also maintains a Continuity of Executive Government Plan to ensure continuity of leadership and strategic decision-making continues during emergencies.

## 2.5. Planning for Western Australian Government bodies

Western Australian public sector bodies are required to undertake a structured risk assessment process to identify the risks facing their organisations and to have business continuity plans to ensure they can respond to and recover from any business disruption. This requirement is detailed in the [Public Sector Commissioner's Circular 2015-03 Risk Management and Business Continuity Planning](#).

During an emergency such as a pandemic, WA Government agencies are responsible for maintaining core business, as best they can in the circumstances. Individual agency responses would be in line with their business continuity plans, this WAGPP, the [State Hazard Plan – Human Biosecurity](#) and other relevant plans.

To prepare and protect against the impacts of a health emergency decisions may be made prior to a pandemic reaching Western Australia. This may include cancelling non-essential travel and large gatherings, based on advice from health authorities.

WA Government agencies are encouraged to participate in emergency related exercises to test capability to respond. Plans should be reviewed and amended as appropriate.

## 2.6. Western Australian Government human resources and industrial relations issues

A pandemic may result in WA public sector organisations experiencing additional workforce pressures such as increased absences from work. Public sector employers should take a pragmatic and precautionary approach to managing work absences, with a view to promoting health and safety for individuals, others in the workplace and the public generally.

The Public Sector Commissioner and Executive Director, Public Sector Labour Relations, Department of Mines, Industry Regulation and Safety, may issue instructions and circulars setting out additional measures to assist public sector employers in responding to pandemic-related workforce issues. Such measures will be informed by evidence about risk and agency demands, be authorised by the *Public Sector Management Act 1994* (WA), the Government directly or under Premier's Circular 2017/03 as appropriate, and will have undergone consultation with employers, other central agencies and unions as required.

Publication, revision, and withdrawal of any instruction or circular will be clearly communicated to CEOs and agency human resources and employee relations contacts. Circulars are published on the Public Sector Labour Relations website [www.commerce.wa.gov.au/labour-relations/circulars-departments-and-organisations](http://www.commerce.wa.gov.au/labour-relations/circulars-departments-and-organisations). Commissioner's instructions and associated material will be published on the Commission's website at [www.publicsector.wa.gov.au](http://www.publicsector.wa.gov.au).

## 2.7. Planning for Local Governments

Under the EM Act local governments are responsible for ensuring that effective local emergency management arrangements are prepared and maintained for their district and for establishing Local Emergency Management Committees (LEMCs). The role of LEMCs includes advising and assisting local governments in relation to local emergency management arrangements, and liaising with public authorities and other persons in the development, review and testing of those arrangements.

Local governments have a critical role in endeavouring to continue delivering services and supporting the community at the local level during an emergency, representing the needs of local communities and businesses, and managing recovery afterwards.

## 2.8. Building community and individual resilience

Whilst no amount of preparation can prevent emergencies from happening, being prepared assists communities to respond to, and recover more swiftly from, an emergency. The [National Strategy for Disaster Resilience](#) (the Strategy) recognises that resilience to emergencies is a shared responsibility for individuals, households, communities, and governments.

Everyone has a responsibility to be prepared for and to assist in managing emergencies that may affect them, as well as having an important role in reducing the impacts and consequences. The WA Government encourages individuals, families and community groups to prepare for a pandemic.

### 2.8.1 Individuals and households

Western Australian households are encouraged to plan for all emergency situations that may affect them, including a pandemic, and consider how they can best prepare. It is suggested that households prepare for a possible prolonged stay at home by considering how they ensure there is two weeks' supply of food and medication on hand for all residents and pets. It is expected that the drinking water supply will be unaffected during a pandemic.

Western Australians are encouraged to undertake good hygiene practices at all times, including proper hand washing techniques, and etiquette around coughing and sneezing. More good hygiene information can be found in Appendix B: Pandemic Planning Websites and Information.

Western Australians are also encouraged to access support networks, including neighbours, during an emergency such as a pandemic. Emergencies impact on the mental health of individuals in varying ways and individuals should seek and provide support where appropriate. Links to additional information can be found in Appendix B: Pandemic Planning Websites and Information.

### 2.8.2 Community

Local communities, the not-for-profit sector and relevant businesses should develop plans to enable continued delivery of community support services, particularly those where greater needs or risks may be present during a pandemic. Such plans may encompass a broad range of needs fundamental to minimising the impacts of a pandemic, including information, food, income support, debt management, counselling and personal support needs.

### 2.8.3 At-risk groups

At-risk groups and those with special needs could be especially vulnerable during a pandemic. At-risk groups will be confirmed by the Communicable Diseases Network Australia when more is understood about a virus, however it is expected that at-risk groups will be at an increased risk of complications of a pandemic due to pre-existing health conditions, locality, communication challenges for example.

According to the Australian Immunisation Handbook (10th Edition 2015), and as reflected in the Australian Health Management Plan for Pandemic Influenza (AHMPPI), at-risk groups may include<sup>5</sup>:

- Pregnant women;
- People who are immunocompromised;
- People with:
  - Chronic respiratory conditions
  - Cardiac disease
  - Downs syndrome
  - Diabetes mellitus
  - Chronic renal failure
  - Chronic neurological conditions
  - Alcohol dependence
  - Haemoglobinopathies (for example haemophilia and sickle cell disease)
  - Chronic inherited metabolic diseases;
- People who are obese;
- Children receiving long-term aspirin therapy;
- Aboriginal and Torres Strait Islander peoples;
- Children aged less than five years; and
- People aged over 65 years.

People living in close communities, such as prisons, nursing homes and boarding homes may also be more vulnerable, as may people living in remote communities, and people from culturally and linguistically diverse backgrounds.

## 2.9. Planning for business, industry and non-Government organisations

All Western Australian businesses and organisations are encouraged to ensure that their business continuity management practices incorporate pandemic planning. Pandemic planning and preparedness resources and links for business, industry and non-Government organisations are available in Appendix B.

A pandemic may impact the availability of staff, including staff required to maintain critical functions. A pandemic may also result in disruptions to the availability of supplies, materials and services from subcontractors or other suppliers. Demand for services may also be affected. Fuel and energy supplies to some locations may be disrupted at times, and the movement of people, imports and exports may be restricted or delayed by quarantine measures, both within Australia and overseas.

It is important for businesses and organisations to consider the health, safety, and welfare of employees before and during an emergency, and ensure strong, timely communications to staff and clients, customers and stakeholders.

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<sup>5</sup> Drawn from the Australian Health Management Plan for Pandemic Influenza, available from <https://www1.health.gov.au/internet/main/publishing.nsf/Content/ohp-ahmpipi.htm>

## **2.10. Preparedness for regional and remote Western Australia**

Western Australia's regional and remote communities face particular challenges in preparing for a pandemic, including in relation to transport, health service delivery and communications.

Western Australia has a number of rural and remote Aboriginal communities in the State's far north and eastern Goldfields. On average, Aboriginal and Torres Strait Islander people have significantly poorer health than the general population and, if exposed, may be more likely to develop infections such as pandemic influenza than other Australians. Remote communities also face challenges with road access, housing, essential services (such as water, power and sewerage) and access to telecommunications.

A number of State agencies have a role in the development and implementation of plans to manage a pandemic affecting remote Aboriginal communities in Western Australia. The Department of Health provides primary health care for Aboriginal and Torres Strait Islander people in many remote communities. The Department of Communities manages housing for remote Aboriginal communities in Western Australia, also has direct service access into these communities.

Under the EM Act, local governments are responsible for ensuring that effective local emergency management arrangements are prepared and maintained for their districts, including arrangements for remote Aboriginal communities within their local government areas.

LEMCs and District Emergency Management Committees (DEMCs) established under the EM Act have a key role in emergency management planning for Aboriginal communities. These Committees bring together representatives of key government and non-government organisations within a district to assist in the development of effective local emergency management arrangements.

## **2.11. Surveillance, monitoring and reporting**

The emergence and spread of a pandemic overseas is monitored by the Australian Government Department of Health. When a novel virus emerges either overseas or within Australia, the Western Australian Department of Health (WA Health) will use pre-existing monitoring and surveillance networks to help detect, report and monitor possible cases within the State. Definitive laboratory tests will be used to detect and characterise the new virus subtype and to differentiate a pandemic strain from other circulating infections.

## **2.12. Border control**

Enhanced border surveillance may be instituted in Western Australia when there is sufficient evidence of the occurrence of human-to-human transmission of a novel virus anywhere in the world. This will involve the implementation relevant plans by the Australian Border Force and WA Health.

WA Health undertakes preparedness activities, in support of Australian Government quarantine planning, including training border nurses to undertake screening at key air and sea ports.

All Western Australians are advised to refer to the Australian Government's Department of Foreign Affairs and Trade's Smartraveller website at [www.smartraveller.gov.au](http://www.smartraveller.gov.au) for information about international travel advice and restrictions.

## 3. Response

### 3.1. Response strategies

All individuals and organisations have an important role to play in reducing the impacts and consequences of an emergency. It is important all Western Australians support the response to a human pandemic by monitoring official information sources such as the Australian Government and WA Health websites, and by complying with official directions from WA Health and emergency management authorities.

Once the WA Government is informed about the emergence or the potential for the emergence of a human epidemic, arrangements set out in the State Hazard Plan – Human Biosecurity and other health emergency plans may be activated.

The WA Government will manage its response in accordance with advice from the WHO, the State Human Epidemic Coordinator and WA Health and the State Emergency Coordination Group. This will be done in consultation with the Australian Government and other jurisdictions.

The health response will be managed by WA Health within the Western Australian public health and emergency management arrangements. The objective of the health response is to minimise cases and deaths until such time as a customised vaccine is developed and administered to the Western Australian population.

The roles and responsibilities of WA Government organisations with respect to human epidemics / pandemics are outlined in [Appendix A](#). These roles and responsibilities are drawn from emergency management arrangements and whole of government responsibilities.

Western Australia's high-level pandemic response governance arrangements are outlined in [Figure 1](#).

Implementation of measures would consider what is known about the virus, the vulnerability of the community, and current resource availability. Decisions would be made with guidance and support from AHPPC, the Australian Government, Chief Health Officer and other relevant parties. The WAGPP supports these response arrangements, and will not require formal activation as such as many of the arrangements are occurring on a continuing basis.

As outlined in 1.2.5 (Emergency management framework) above, the key priorities for the response stage within the [National CD Plan](#) are:

- implement and support health sector response;
- maintain essential government services;
- inform and engage the public, key community groups and spokespeople;
- maintain essential services and liaise with providers of critical infrastructure;
- implement business continuity plans as necessary;
- assess impacts and revise plans as needed; and
- implement measures to restore emotional and psychological wellbeing.



### 3.1.1. Entry of a pandemic into Australia

Once a pandemic virus enters Australia, the first step will be an attempt to contain the outbreak and to minimise transmission of the virus and its impacts. Many of the actions taken as part of the prevention and preparedness stage will continue into the response stage for as long as Australian Government and relevant State Health authorities consider necessary.

Border screening and control measures may be increased to respond to a growing pandemic. Travel restrictions may be put in place and travellers may be unable or unwilling to return to their home countries. The Western Australian Department of Communities, which is responsible under the State's emergency management arrangements for the management of welfare services during emergencies, will, upon formal request, support the Department of Foreign Affairs and Trade in coordinating support to stranded travellers in affected areas. WA Health will continue monitoring and surveillance.

In the response stage, the focus of communications and public information will be on health promotion campaigns, the location of designated health care facilities, help and emergency numbers and websites, and the introduction of any social distancing measures including those affecting schools, events and other crowded places.

### **3.1.2. Infection control**

Health authorities advise that there are simple steps that everyone can take to minimise the spread of infection during a pandemic. These include frequently washing hands with soap and water or using a hand sanitiser, staying away from people who are coughing and sneezing and avoiding touching one's face.

Information can be found on the WA Health's website [www.health.wa.gov.au](http://www.health.wa.gov.au). WA Health will provide updated information on preventative measures once more is known about the epidemiology and behaviour of a virus.

### **3.1.3. Social distancing**

'Social distancing' refers to reducing normal physical and social interaction in order to slow the spread of a pandemic. Such measures may either be prescribed by government or voluntarily adopted by individuals or organisations. Possible social distancing measures include:

- temporary closure of child care facilities and schools, and/or changes to business as usual events such as cancellation of large gatherings such as sports carnivals;
- restrictions on, or cancellation of, public transport;
- cancellation or postponement of public events where many people gather;
- special arrangements for shopping hours to avoid overcrowding; and
- encouragement for people to avoid crowded places, keep at least one metre distance from others, and practise personal infection control measures.

It is likely that the implementation of social distancing measures will vary amongst jurisdictions depending on the nature and location of an outbreak. The rationale for implementing such measures will, however, be consistent across jurisdictions where practicable.

In the event of a pandemic, the WA Government's approach will be to continue normal operations for as long as feasible in order to minimise the impact of social distancing measures. For example, the closure of child care services and schools will have an immediate impact on the community and economy if parents are unable to attend work. Closures and restrictions will only be implemented if and when, on the basis of expert health advice, they are deemed necessary to protect the health and safety of the Western Australian community.

All businesses and organisations are encouraged to review working from home arrangements, leave provisions and other employment arrangements as part of their business continuity planning, to ensure that they are prepared and able to implement social distancing in their workplace.

### **3.1.4. Arrangements for schools and other educational facilities**

Decisions relating to management of schools and other educational facilities in Western Australia during a pandemic could have significant social community and economic impacts. When a pandemic strain is circulating overseas, school trips to affected countries may be postponed or cancelled to minimise risk, or educational facilities may be closed.

The Department of Education develops and implements pandemic planning for public schools, and manages public education sector response to directions for school closures during a pandemic, as well as liaising with the private and independent education sectors.



The following information is intended to assist Western Australian schools, Vocational Education and Training (VET) institutions and tertiary institutions to develop their own plans to prepare for, and respond to, a pandemic:

- Decisions on closures of educational facilities in Western Australia during a human pandemic are the responsibility of the WA Government, and will only be made if and when necessary. The WA Government will work with the non-government school sector.
- Decisions on closures of educational facilities will be based on assessment of the risk of spread of infection and the severity of the illness, not in response to a pre-determined trigger, and will be periodically reviewed with the aim to reopen facilities as soon as possible to minimise social, community and economic impacts.
- Closures may need to be implemented early and robustly to be effective in minimising the spread of a pandemic, but this will only be done upon expert advice.
- Closures may be to a single school, groups of schools or all schools in Western Australia.
- Communication and engagement with stakeholders and the community will be undertaken where possible, to support the decision-making process.
- Closure of educational facilities does not necessarily mean a complete cessation of educational programming for students. Educational facilities should plan to continue education delivery by remote means to the greatest extent practicable.
- During a period of school closure, school facilities will only be used for pandemic response activities where that is the best available option. Appropriate hazard management processes will be in place to ensure that it is safe for students and staff to return when appropriate.

### **3.1.5. Western Australian Government financial and supply arrangements**

During pandemic response or recovery activities Western Australian public sector bodies are initially required to absorb the cost of these activities into their existing budgets. If emergency management agencies involved in response and recovery activities are unable to absorb costs associated with these activities, it is possible that other arrangements can be made in accordance with the arrangements set out in the [State Emergency Management Policy](#) and the [State Emergency Management Plan](#).

Where public sector bodies are unable to absorb these costs, an application for supplementary funding may be made. *Treasurer's Instruction 302 – Supplementation of Appropriations* sets out these arrangements and may be found in the [Financial Administration Bookcase](#). To make these arrangements, early and regular engagement between the affected public sector bodies and the Department of Treasury should occur.

Public sector bodies should consider any additional expenditure pressures they may expect to face in a pandemic in the preparedness stage and plan appropriately.

In the case of supply chain shortages, agencies can request priority assistance for the supply of critical goods or services. The State Emergency Coordination Group will prioritise agencies with the highest need and advise the Department of Finance of these priorities. The Department of Finance would work with agencies and whole of government suppliers in line with these priorities.



## **3.2. Health case management**

Health plans outline how people who are infected with a pandemic illness, or who are exposed to others infected by pandemic illness, will be cared for. Information on the assessment and treatment of pandemic cases will be widely publicised by WA Health.

### **3.2.1. Home quarantine and isolation**

In the early stages of a pandemic, people confirmed to be at risk or infected with the virus may be given antiviral medicine (if available) and required to stay at home or, if severely ill, isolated in a hospital until recovered. The nature and scale of these measures will be based on the severity of the pandemic. Health authorities may trace recent contacts of people infected with pandemic illness, provide them with antiviral medicine (if available) and advise them to stay at home for a specified period. Quarantine or isolation measures could play a significant role in reducing the risk of transmission between infected and non-infected individuals.

Families and households should ensure that they have emergency supplies on hand that will assist them to respond to and recover from any emergency from which they are at risk. This includes being prepared to stay at home if needed for a period in quarantine or isolation.

During a human biosecurity emergency, the [State Emergency Welfare Plan](#) (interim) may be activated to assist with the provision of welfare support services. These services may be extended to those individuals, their family household, and others who have been placed under home isolation or quarantine as part of the emergency response. The provision of these services will be prioritised by the Department of Communities in consultation with WA Health.

Further, everyone can play an important role in helping family members, friends, neighbours and vulnerable people in their communities. This could include assisting with delivery of meals, food and other supplies and staying in regular phone contact.

### **3.2.2. National Medical Stockpile**

The Australian Government Department of Health is responsible for the deployment of equipment and medication from the National Medical Stockpile, in accordance with nationally agreed principles. Access to medication and equipment in the stockpile will be based on the level of risk of exposure to the pandemic illness and the ability to contain its further spread.

### **3.2.3. Vaccination**

The time needed to develop and produce a customised vaccine in sufficient quantities is likely to be many months in a pandemic situation. Western Australia will then receive a supply proportionate to the population and risk. Once a vaccine available, vaccination will be carried out by health care providers and, if established, public vaccination clinics.

WA Health will distribute and administer the pandemic vaccination program in accordance with the national arrangements. Priority groups to receive the initial doses of vaccine will be determined at the time, taking into account the infectiousness of the pandemic virus and its impact on different population groups.

### **3.2.4. Community support**

A severe pandemic could create a high level of demand for community support services in all affected areas. Many community support services provided by WA Government bodies, local governments and non-government organisations will need to continue, including personal care and delivery of food supplies to the elderly and disabled. Less essential community services, such as children's playgroups, youth centres and recreational activities, may not be able to continue due to social distancing measures or staff absenteeism. All organisations which provide community services should maintain business continuity plans which identify their essential services and develop strategies to maintain them during a pandemic.

In addition to regular users of community support services, there is likely to be increased demand due to those directly affected by the pandemic. This may include people who need support to remain in home quarantine; financial and other support for people who have suffered a loss of income due to workplace closures or business shutdowns; and bereavement and grief counselling. Community support providers should identify means to increase essential service capacity, to the greatest extent possible, in the event of a pandemic.

As the resources of service providers may be under significant strain during a pandemic, the provision of community support will be a shared responsibility between individuals, the community, the Department of Communities under the State Emergency Welfare Plan (interim), and all levels of government.

To this end, all Western Australians should take responsibility for preparing to care, not only for themselves, but also for their family and vulnerable people in their community to the greatest extent possible.

During the response phase, the State Emergency Welfare Plan (interim) may be activated to coordinate emergency welfare support to individuals and families who are in significant need during a pandemic and do not have the necessary support networks. Depending upon the scale of the pandemic this support may require prioritisation on the basis of the greatest need of assistance.

The emergency welfare arrangements are supported by a number of volunteer organisations. Volunteer management during a pandemic, including registration and placement of new volunteers over a prolonged period, will require cooperation between government and non-government organisations.

### **3.3. Communications and public messaging**

Communication that is clear, consistent, regular and reliable, is a key component of the WA Government's arrangements for each stage of a pandemic. This includes public information activities, information sharing and engagement with stakeholders and sectors, and communications within WA Government.

Clear, accurate and timely information is essential to support communities. It's important the public understand the current situation, risks and what they need to do to protect themselves. Communication that provides advice and assurance about the continuity, changes to, and recovery of both government and essential services is critical.

Key communication principles, drawn from the National CD Plan<sup>6</sup>, include:

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<sup>6</sup>[https://www1.health.gov.au/internet/main/publishing.nsf/Content/DD8490093CA39594CA25834D0014EF99/\\$File/Nat-CD-Plan-Nov18.pdf](https://www1.health.gov.au/internet/main/publishing.nsf/Content/DD8490093CA39594CA25834D0014EF99/$File/Nat-CD-Plan-Nov18.pdf)

- openness and transparency;
- regular and timely provision of tailored information;
- two-way communication;
- specific engagement methods with vulnerable groups; and
- flexible selection of methods appropriate to the situation at the time.

Western Australia's whole of government communications strategy for a particular pandemic will apply these principles.

Under the State's emergency management framework, the HMA for Human Epidemic, (the State Human Epidemic Coordinator, Department of Health) is responsible for the development, management, and coordination of public health information during a public health emergency. The HMA will be supported by the public information coordination arrangements in the State's emergency management framework. Public communications will be consistent with any public statements issued by the AHPPC, and Western Australians will be encouraged to utilise National and State telephone information lines and websites.

Information sharing is also critical to provide a consistent and effective whole of government response by supporting better resource coordination and providing relevant, informed information and advice to decision makers. Communication with the broader public sector is also important to ensure all public servants receive the most up to date advice on human resources related issues and prevention methods etc.

Information to specific groups in the community will need to be coordinated and tailored depending on needs. Special consideration will need to be provided for at risk groups, or those with specific needs.

Communications through public information channels, such as the media and digital media, play an important role in shaping the narrative and therefore perception of risk. It is an important tool for community awareness and response.

Throughout the process the communication strategy will be adapted and refined to reflect and address identified issues, feedback and concerns.

## 4. Recovery

### 4.1. Recovery approaches

Recovery is the coordinated process of supporting communities affected by an emergency in the reconstruction of infrastructure and the restoration of emotional, social, economic and physical well-being. Unlike most emergencies, a pandemic will spread over a wide geographic area, over a period of months. Assistance may therefore need to be provided to affected people and communities over an extended period of time. Long-term recovery may also be complex and protracted. The focus of recovery activity will not be clear until the impacts of the pandemic are known.

Recovery will require government, businesses, community and individuals to work together to support those affected. The focus of recovery will be to:

- restore services and provision of basic functions such as food, water, shelter, income and utilities where these have been disrupted;
- assist communities to access those basic functions; and
- promote community and individual wellbeing and resilience.

The EM Act prescribes that local governments are responsible for managing recovery following an emergency affecting the community in their districts. Local emergency arrangements should include local recovery plans to maximise the effectiveness of recovery efforts following an emergency.

In the event of an emergency requiring State-level coordination of the recovery, or an interstate or international emergency that impacts on Western Australian communities, the WA Government will assume responsibility for coordinating recovery process in accordance with the arrangements set out in the [State Emergency Management Policy](#) and the [State Emergency Management Plan](#). This higher-level coordination will ensure that all affected local government areas have equitable and appropriate access to available resources. The management of recovery activity will still be determined at the local level.

The WA Government will also work with the Australian Government and other States and Territories to coordinate national approaches to recovery.

Following a pandemic, the WA Government will undertake a review of the State's pandemic response. Each emergency situation varies and requires tailored responses, however, there will be key lessons Western Australians can learn and apply in future situations.

#### 4.1.1. Community recovery

Measures to support community recovery following a severe pandemic may include:

- ensuring a return to normal delivery of services as soon as possible, consistent with risk and capacity. Steps such as re-opening schools and child care services after a period of closure will have a significant impact in restoring normal social functioning;
- providing care and support to vulnerable groups; and
- maintaining essential community services.

#### **4.1.2. Economic recovery**

The goals of economic recovery are to maintain or restore household incomes, assist businesses in maintaining or restoring their operations, and assist people who have lost their livelihoods through retraining and re-employment. The actual economic impacts of a pandemic will depend on the nature and severity of the pandemic, and recovery will require flexible responses that take account of local impacts.

The WA Government will work collaboratively with other governments to support economic recovery should a pandemic have significant economic impacts. Building resilience through the promotion of business continuity management and an awareness of the risk and possible impacts of an influenza pandemic will help to support economic recovery following a pandemic. Strategies include:

- encouraging the development and implementation of business continuity plans by Western Australian businesses (see [Appendix B](#));
- income assistance (as co-ordinated by the Australian Government); and
- maintaining effective communications with business and industry throughout, and following a pandemic.

By putting recovery plans in place early, Western Australians will be better prepared to meet the challenges that may arise from a human influenza pandemic and will help return to normal life as quickly as possible.

# Abbreviations

AHMPPPI	Australian Health Management Plan for Pandemic Influenza
AHPPC	Australian Health Protection Principal Committee
Cth	Commonwealth
CMO	Chief Medical Officer of Australia
COVID-19 Plan	Australian Health Sector Response Plan for Novel Coronavirus (COVID-19)
DEMCs	District Emergency Management Committees
EM Act	<i>Emergency Management Act 2005 (WA)</i>
HMA	Hazard Management Agency – for Human Epidemic the HMA is the State Human Epidemic Coordinator
LEMCs	Local Emergency Management Committees
National CD Plan	Emergency Response Plan for Communicable Disease Incidents of National Significance
PH Act	<i>Public Health Act 2016 (WA)</i>
SDC	State Disaster Council
SEC	State Emergency Coordinator (Commissioner of Police)
SHEC	State Human Epidemic Coordinator, Department of Health
SECG	State Emergency Coordination Group
SEMC	State Emergency Management Committee
WA	Western Australia
WAGPP	Western Australian Government Pandemic Plan
WHO	World Health Organization

# Appendix A: Roles and Responsibilities

## Emergency management and pandemic planning structures and statutory positions in Western Australia

As outlined in the *Emergency Management Act 2005 (WA)*, State Emergency Management Police, State Emergency Management Plan and other documents:

**State Disaster Council** (established if a State of Emergency is declared) – s.64 of the EM Act

- liaise with the State Government and the State Emergency Coordination Group in relation to the state of emergency
- provide prompt and accurate advice to the Government and the State Emergency Coordination Group in relation to the state of emergency
- to provide support for the Government and the State Emergency Coordination Group in relation to the state of emergency
- to liaise with the Australian Government as required
- to perform any other functions as directed by the Premier

**State Emergency Coordinator** (Commissioner of Police)

- Coordinate the response to an emergency during a state of emergency
- Provide advice to the Minister in relation to emergencies
- Provide advice to the State Disaster Council during a state of emergency
- Provide advice and assistance to the Hazard Management Agency as appropriate
- Carry out other emergency management activities as directed by the Minister

**State Emergency Coordination Group** (activated by the State Emergency Coordinator if a state of emergency is declared (s.26(1) of the EM Act) or by the State Emergency Coordinator at the request of or in consultation with the HMA if an emergency occurs or is imminent (s.26(2) of the EM Act)

- Ensure the provision of coordinated emergency management by public authorities and other persons
- Provide advice and direction to public authorities and other persons to facilitate effective emergency management
- Liaise between emergency management agencies and the Minister

**State Emergency Management Committee** – s.14 of the EM Act

- Advise the Minister on emergency management and the preparedness of the State to combat emergencies
- Provide direction, advice and support to public authorities, industry, and the community in order to plan and prepare for an efficient emergency management capability for the State
- Provide a forum for whole of community coordination to ensure the minimisation of the effects of emergencies
- Provide a forum for the development of community-wide information systems to improve communications during emergencies
- Develop and coordinate risk management strategies to assess community vulnerability to emergencies
- Perform other functions given to the SEMC under the EM Act or prescribed by regulation

### **State Recovery Coordination Group**

- assess the assistance required by the affected communities
- assist the local government(s), local recovery coordinator(s), and Local Recovery Coordination Group(s) to implement the local recovery plan

### **State Welfare Emergency Committee**

- Enable inter-agency collaboration and joint approaches to providing personal support to the whole community

### **District Emergency Coordinators – s.30 of the EM Act**

- Provide advice and support to District Emergency Management Committees for the in the development and maintenance of emergency management arrangements
- Carry out emergency management functions in accordance with the directions of the SEC

### **District Emergency Management Committees**

- Assist in the establishment and maintenance of effective emergency management arrangements for the district

### **Local Emergency Coordinators – s.37(4) of the EM Act**

- Provide advice and support to Local Emergency Management Committees in the development and maintenance of emergency management arrangements
- Assist the Hazard Management Agency in the provision of a coordinated response during a pandemic emergency in the local district

### **Local Emergency Management Committees – s.39 of the EM Act**

- Advise and assist the relevant local government in ensuring that local emergency management arrangements are established for its district
- Liaise with public authorities and other persons in the development, review and testing of local emergency management arrangements
- Carry out other emergency management activities as directed by the SEMC or prescribed by the regulations.

### **Local government authorities**

- Ensure that effective local emergency management arrangements are prepared and maintained for their districts
- Manage recovery following an emergency affecting the community in their districts
- Ensure continuity of essential local government services
- Work with the WA Government in supporting national arrangements outlined in the [National CD Plan](#).

### **Public Health Emergency Operations Centre (PHEOC)**

- Oversee the public health activities of the Metropolitan and Regional Human Epidemic Coordination Centres, including oversight of disease surveillance, data management, and public health management of infected persons, and supports the SHEC and the SHETAG.

### **State Health Incident Coordination Centre**

- address strategic management of an incident/disaster as well as facilitating management of state-wide events
- during a human epidemic, hospital, clinical health service, and non-public-health sector responses will be coordinated by the State Health Incident Coordination Centre, in conjunction with the State Human Epidemic Controller



- develop a State-Level Recovery Plan specifically for the emergency and coordinate the most effective use of government and non-government resources to implement that plan
- advise the Premier, Minister Controlling Agency/HMA and the State Emergency Coordinator (SEC) on the conduct and progress of recovery
- identify and recommend, if necessary, specific assistance measures for consideration by the State government
- coordinate the State-level non-government organisations, in consultation with the LRCG(s)

## **Western Australian Government bodies and other relevant organisations – key and responsibilities for a pandemic**

Roles and responsibilities listed below reflect key agency responsibilities in support of broader whole of government preparedness and planning for a pandemic as well as specific roles and responsibilities assigned under the State’s emergency management arrangements as they relate to a pandemic.

### **All Public Sector Bodies**

- Undertake a structured risk management process and develop business continuity plans to support the continuity of critical organisational functions in the event of emergencies as required by the [Public Sector Commissioner’s Circular 2015-03 Risk Management and Business Continuity Planning](#).
- Review agency plans and develop specific measures to address the likely impacts of a pandemic on staff health and absenteeism
- Participate in or appoint liaison officers to emergency management committees and groups in accordance with the State’s emergency management framework, as required

### **Australian Red Cross Blood Service (ARCBS – WA)**

- Provide blood and blood products if required for the treatment of infected individuals
- Assess the transmissibility of the epidemic agent by blood transfusion, and take action to prevent transmission
- Provide specialist consultation on transfusion medicine if required.

### **Australian Health Protection Principal Committee**

- Provide national coordination of emergency operational activity in health responses to disasters and health protection issues of national significance, including epidemics.

### **ChemCentre WA**

- Provide, maintain and operate a mobile response laboratory and provide expert technical advice
- Provide a written report and/or participate in post operation debriefs on the emergency, as required

### **Communicable Diseases Network Australia**

- Develop national policy and coordination of national response to communicable disease threats.
- Provide expert technical and scientific advice regarding control of communicable diseases in humans

### **Department of Communities**

- Provide staff and operate welfare emergency coordination centres at the State and local-level
- Coordinate all welfare resources used during emergencies
- Supply welfare-related assistance to affected communities and coordinate other welfare and non-government support agencies, as required
- Assist people who have been placed under home quarantine or isolation, their family household and others during a human epidemic
- Prioritise the care of children and dependents of deceased or seriously ill individuals
- Coordinate services requested through the Australian Government Plan for the Reception of Australian Citizens and Approved Foreign Nationals Evacuated from Overseas
- Activate and chair State Welfare Emergency Committee as required
- Liaise with child care service providers to support response to directions to close during a pandemic
- Develop and implement planning for continuity of essential disabilities services including care facilities and group homes

### **Department of Education**

- Develop and implement pandemic planning for public schools
- Assist with the provision of information to school leaders, school staff, students and parents
- Assist with the provision of health services including but not limited to use of school facilities for mass vaccination and medication distribution
- Support implementation of disease control measures such as home isolation and home quarantine
- Liaise with the Catholic Education Office and the Association for Independent Schools in Western Australia to allow a collaborative education sector approach

### **Department of Finance**

- Support agencies in the procurement of emergency goods, services and, if required, appropriate temporary building facilities
- Maintain effective communications with business and industry throughout, and following a pandemic

### **Department of Fire and Emergency Services**

- Coordinate State-level recovery arrangements
- Chair State Recovery Coordination Group, if established
- Assist ChemCentre WA personnel with respect to contaminated site entry, sample collection and agent identification
- Facilitate contaminated site entry for ambulance personnel to undertake, patient triage, treatment and rescue
- Undertake mass decontamination procedures, as required

### **Department of Health**

- Manage the health system (including the laboratory response) during a pandemic
- Develop policy and strategy on pandemic health-related issues
- Perform surveillance, monitoring, and reporting activities
- Advise on infection control and social distancing measures appropriate to the pandemic strain of influenza
- Ensure cases and contacts receive appropriate medical management
- Develop and maintain a State medical stockpile and develop policy for, and co-ordinate the distribution and use of, the national and State medical stockpiles in Western Australia
- Support Australian Government border control and quarantine measures

- Provide public information
- Represent WA on Australian Health Protection Principal Committee and National Crisis Committee (Chief Health Officer)
- Undertake all assigned functions and roles under [State Hazard Plan – Human Biosecurity](#)

#### **Department of Justice**

- Develop and implement planning for continuity of the judicial system and correctional facilities in the event of a pandemic, including youth justice

#### **Department of Mines, Industry Regulation and Safety (Public Sector Labour Relations)**

- In consultation with stakeholders, determine and advise measures to assist public sector employers in responding to pandemic-related workforce issues

#### **Department of Primary Industries and Regional Development**

- Alert CDCD to new, emerging or notifiable infectious diseases in agricultural stock which are potentially transmissible to humans.
- Contain the spread of infectious diseases in animal stock which may be transmissible to humans, consistent with the Animal Health National Response arrangements and [State Hazard Plan – Animal and Plant Biosecurity](#).

#### **Department of the Premier and Cabinet**

- Support the Security and Emergency Committee of Cabinet and State Disaster Council, if activated
- Coordinate and support whole of government response and communications in the event of a pandemic in support of WA Health and emergency management arrangements, as necessary
- Participate in relevant inter-jurisdictional coordination forums, such as the National Crisis Committee
- Participate in the SECG as required
- Maintain and review this Plan and support State-wide coordinated planning for a pandemic
- Maintain and review the *Continuity of Executive Government Plan*
- Coordinate and contribute to whole-of-government exercises
- Liaison with Australian Government and other jurisdictions

#### **Department of Training and Workforce Development**

- Develop and implement pandemic planning for the Public Training Provider sector

#### **Department of Treasury**

- Maintain access to sufficient liquidity, through available cash balances in the Public Bank Account (and elsewhere), and through short-term borrowings from financial markets (assuming these are still functioning)
- Ensure the normal disbursement (or, if necessary, accelerated disbursement) of appropriation funding to agencies
- Administer requests for financial resources associated with pandemic preparedness, response and recovery measures
- Support government supply chain management (procurement etc)

#### **Department of Water and Environmental Regulation**

- Provide advice on minimisation of impacts on the environment, including containment, confinement and clean-up, decontamination, minimisation of wastes, and waste disposal
- Coordinate post-incident environmental sampling and provide interpretation of environmental monitoring data and results where required

### **Local Government**

- Provide Environmental Health Officers to Metropolitan and Regional Human Epidemic Coordination Centres, as required
- Assist with the investigation of human epidemics
- Assist with monitoring of food safety
- Assist with the safe disposal of contaminated waste
- Assist with the control of vermin or insect infestations, including reservoir elimination programs
- Provide support with other local resources as requested by the SHEC or local State, Metropolitan or Regional Human Epidemic Control Centres

### **Main Roads Western Australia**

- Close and open roads when requested to do so by the HMA.
- Communicate road closures to the public
- Assist with quarantine and movement control as required (e.g. road blocks and checkpoints)

### **Metropolitan Cemeteries Board**

- Work with partner agencies to develop strategies to accommodate a rapid increase in the number of deceased, if needed

### **Public Sector Commission**

- Disseminate information to public sector CEOs on public sector-wide policies and required or recommended actions
- Work with Department of Mines, Industry Regulation and Safety (Public Sector Labour Relations) to support development of measures to assist public sector employers in responding to pandemic-related workforce issues

### **Public Transport Authority**

- Develop and implement business continuity and pandemic planning for public transport services
- Assist with the provision of transport for infected persons, their contacts and health staff, as required
- Coordinate the use of public transport services at the request of the SHEC

### **Small Business Development Corporation**

- Provide advice and guidance to small business owners to assist pandemic planning

### **St John Ambulance Australia (Western Australia) Inc**

- Provide an Ambulance Commander and assume site control functions at the request of the Incident Controller for location (s) in cases where there is an actual or impending spillage or release or escape of a biological substance
- Coordinate and provide ambulance services if required for the transport of infected individuals or other persons in the course of the human epidemic or human biosecurity emergency

### **Synergy, Western Power, and Horizon Power**

- Develop and implement plans for continuity of electricity supply during a pandemic

### **Universities**

- Develop and implement pandemic planning for each university

**Water Corporation**

- Develop and implement planning for continuity of water and wastewater services during a pandemic
- Sample drinking water supplies for testing and provide alternative safe drinking water if needed
- Monitor the adequacy of waste water disposal
- Provide alternative safe methods of waste water disposal if needed

**Western Australia Police Force**

- Develop and implement planning for continuity of law enforcement services during a pandemic
- Undertake all emergency management coordination functions assigned under the State's emergency management legislation and framework
- Assist with isolation, quarantine and evacuation, if agreed, to deal with a human epidemic
- In the event of mass casualties, provide Disaster Victim Identification capability
- Maintain public order where required

# Appendix B: Pandemic Planning Websites and Information

## International

- The **World Health Organization (WHO)** monitors the threat of an influenza pandemic and coordinates the global response once it emerges. General information can be found at the WHO homepage:  
[www.who.int/en/](http://www.who.int/en/)
- The WHO's Pandemic Preparedness website includes the Whole-of-Society Pandemic Readiness: WHO guidelines for pandemic preparedness and response in the non-health sector:  
<https://www.who.int/influenza/preparedness/pandemic/en/>  
[https://www.who.int/influenza/preparedness/pandemic/2009-0808\\_wos\\_pandemic\\_readiness\\_final.pdf?ua=1](https://www.who.int/influenza/preparedness/pandemic/2009-0808_wos_pandemic_readiness_final.pdf?ua=1)

## National

- The **Australian Government Department of Health** website contains information about the Australian Government's pandemic influenza planning and preparedness and material for the public:  
[www.health.gov.au](http://www.health.gov.au).
- The Department of Foreign Affairs and Trade **Smartertraveller** website contains advice and alerts on travel safety:  
[www.smartertraveller.gov.au](http://www.smartertraveller.gov.au)
- **Australian Health Management Plan for Pandemic Influenza (AHMPPI)**  
[www1.health.gov.au/internet/main/publishing.nsf/Content/ohp-ahmppt.htm](http://www1.health.gov.au/internet/main/publishing.nsf/Content/ohp-ahmppt.htm).
- The **Emergency Response Plan for Communicable Disease Incidents of National Significance: National Arrangements** (National CD Plan) outlines how agencies across Australian, state, territory and local governments will work together when facing a threat of a major communicable disease incident.  
[www1.health.gov.au/internet/main/publishing.nsf/Content/ohp-nat-CD-plan.htm](http://www1.health.gov.au/internet/main/publishing.nsf/Content/ohp-nat-CD-plan.htm)

## State – Western Australia

- The Western Australian Government website includes information, updates and resources sourced from all WA government agencies:  
<https://www.wa.gov.au>
- The **Department of Health** website includes public health management information and guidelines:  
[https://ww2.health.wa.gov.au/Articles/F\\_1/Influenza](https://ww2.health.wa.gov.au/Articles/F_1/Influenza)
- **Public Sector Labour Relations**, Department of Mines, Industry Regulation and Safety provides guidance to public sector employers:  
<https://www.commerce.wa.gov.au/labour-relations/public-sector-labour-relations>
- The **State Emergency Management Committee** website contains information about the State's emergency management framework, State Emergency Management Plan, and State Hazard Plans including Human Biosecurity:  
<https://semc.wa.gov.au/emergency-management/plans>  
<https://semc.wa.gov.au/emergency-management/plans/state-hazard-plans/Documents/StateHazardPlanHumanBiosecurity.pdf>

## WA public sector

- **Employee Assistance Program (EAP) Providers.** Please refer to the EAP agencies contracted by your agencies.
- The Public Sector Commissioner's Circular 2015 Risk Management and **Business Continuity Planning** outlines the requirement for Western Australian public sector bodies to have appropriate business continuity plans in place:  
[https://publicsector.wa.gov.au/sites/default/files/documents/2015-03\\_risk\\_management\\_and\\_business\\_continuity\\_planning\\_0.pdf](https://publicsector.wa.gov.au/sites/default/files/documents/2015-03_risk_management_and_business_continuity_planning_0.pdf)

## Information for business

- The **Trusted Information Sharing Network** has produced some resources to assist energy sector organisations plan for a pandemic:  
[www.tisn.gov.au/Documents/The+ESG+Pandemic+Guide+2010.pdf](http://www.tisn.gov.au/Documents/The+ESG+Pandemic+Guide+2010.pdf)
- The Australian Standard for Risk Management AS ISO 31000:2018 can be purchased through the **Standards Australia** website:  
[www.standards.com.au](http://www.standards.com.au)
- Information relating to Australian workplace laws:  
<https://www.fairwork.gov.au/>

## Mental Health Support

- The **WA Mental Health Commission** provides services for people who require mental health assistance:  
[www.mhc.wa.gov.au](http://www.mhc.wa.gov.au)
- **Lifeline** provides telephone crisis support, suicide intervention and prevention, mental health support service – 13 11 14 or [www.lifeline.org.au/get-help/topics/crisis-support](http://www.lifeline.org.au/get-help/topics/crisis-support)
- **Kids Helpline** – Free telephone and online counselling service for young people between 5 and 25 years – 1800 551 800 or 1800 654 432 (parents) or  
[www.kidshelp.com.au](http://www.kidshelp.com.au)
- **Mental Health Emergency Response Line** – advice for mental health emergencies from Western Australian clinicians - 1300 555 788 (Metro) or 1800 676 822 (Peel) or 1800 720 101 (Country), <https://www.mhc.wa.gov.au/getting-help/helplines/mental-health-response-line/>
- **Beyond Blue** – help and support for general mental health, depression and anxiety - 1300 224 636 or [www.beyondblue.org.au](http://www.beyondblue.org.au)

# ANNEXE 1: Information relating to COVID-19

The WA Government is working closely with Federal and inter-jurisdiction counterparts on the delivery of information to the public. Information on COVID-19 is rapidly evolving as we learn more about the virus. To keep up to date with the current status, the websites below provide the most recent information:

## International

### World Health Organization (WHO)

- Information and guidance from WHO regarding the current outbreak of coronavirus disease (COVID-19) that was first reported from Wuhan, China, on 31 December 2019: [www.who.int/emergencies/diseases/novel-coronavirus-2019](http://www.who.int/emergencies/diseases/novel-coronavirus-2019)

## Australian Government

### Australian Government Department of Health

- The Australian Government is providing updated information and resources. It includes what you need to know about COVID-19 — what it is, how it spreads, who is most at risk, what you can do to help stop it spreading, and home isolation and care: <https://www.health.gov.au/>  
<https://www.health.gov.au/resources/collections/novel-coronavirus-2019-ncov-resources>

### Australian Health Management Plan for Pandemic Influenza (AHMPPI)

- The Australian Health Management Plan for Pandemic Influenza (AHMPPI) outlines Australia's strategy to manage an influenza pandemic and minimise its impact on the health of Australians and our health system: [www1.health.gov.au/internet/main/publishing.nsf/Content/ohp-ahmppl.htm](http://www1.health.gov.au/internet/main/publishing.nsf/Content/ohp-ahmppl.htm)

### Australian Health Sector Emergency Response Plan for Novel Coronavirus (the COVID-19 Plan)

- The COVID-19 Plan) guides the Australian health sector response: [www.health.gov.au/resources/publications/australian-health-sector-emergency-response-plan-for-novel-coronavirus-covid-19](http://www.health.gov.au/resources/publications/australian-health-sector-emergency-response-plan-for-novel-coronavirus-covid-19)

## Western Australian Government

### Western Australian Government

- The Western Australian Government website includes information, updates and resources sourced from all WA government agencies: <https://www.wa.gov.au/>

### Western Australian Department of Health

- The Department of Health website [health.wa.gov.au/coronavirus](http://health.wa.gov.au/coronavirus) includes:
  - information about the Department's planning and preparation for coronavirus; and
  - information for a broad range of stakeholders, including industry.

### Public Sector Labour Relations

- Public Sector Labour Relations, Department of Mines, Industry Regulation and Safety provides guidance to public sector employers: <https://www.commerce.wa.gov.au/labour-relations/public-sector-labour-relations>



- Advice for the Public Sector:  
<https://www.wa.gov.au/organisation/department-of-the-premier-and-cabinet/covid-19-coronavirus-public-sector-advice>

## **Travellers**

### **Department of Foreign Affairs and Trade Smartraveller**

- Advice and alerts on travel safety including current travel advice relating to COVID-19:  
[www.smartraveller.gov.au/news-and-updates/coronavirus-covid-19](http://www.smartraveller.gov.au/news-and-updates/coronavirus-covid-19)

## **For employers/employees**

### **Coronavirus and Australian workplace laws**

- The Fair Work website provides information about workplace entitlements and obligations if businesses are affected by the outbreak of covid-19, including information about stand downs from work, working arrangements impacted by school closures, and pay and sick leave entitlements.  
<https://coronavirus.fairwork.gov.au/>