1. **Statement**

The Department of Health (the Department) must develop and maintain effective risk-based programs, plans and procedures to support health system-wide preparedness, and the capability to effectively respond to, coordinate and manage health-related aspects of disasters and emergency incidents in Queensland.

2. **Scope**

The requirements in this standard align to and support:

- the principles and requirements in the *Department of Health Policy 28028:2017 Disasters and Emergency Incidents*
- the principles and requirements in the *Health Service Directive QH-HSD-003:2017 Disasters and Emergency Incidents*

This standard applies to all the Department’s divisions and Commercialised Business Units and all employees, contractors and consultants within these.

3. **Requirements**

**Governance**

The Chief Health Officer and State Health Coordinator will:

- Develop and coordinate a strategic policy and planning framework for Queensland Health to support effective disaster and emergency incident management and alignment with Queensland’s disaster management plans and arrangements\(^1\).
- Develop and maintain a health service directive to ensure Hospital and Health Services (HHSs) fulfil legislated and other recognised functions, roles and responsibilities for disaster and emergency incident management, and regularly review and assess the directive to ensure fit for purpose\(^2\).
- Ensure that arrangements are established and maintained between Queensland Health and appropriate health-related departments and committees of the Australian Government\(^3\) with the Department represented as appropriate.

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1. \(^1\) Aligns with QDMC functions DM Act s. 18 (a)(b).
2. \(^2\) Aligns with IGEM functions DM Act s.16C (d)(e).
3. \(^3\) Aligns with QDMC functions DM Act s. 18 (c).
• Establish an executive level disaster and emergency incident management committee that:
  - has clearly documented terms of reference, roles, responsibilities and accountabilities
  - has appropriate membership with the authority to make decisions and commit resources on behalf of department functions or capabilities represented
  - conducts meetings at least bi-annually, with a quorum of at least one half plus one members or proxies, and decisions and business recorded in minutes
  - provides regular reports to the Department’s executive regarding disaster and emergency incident preparedness and activities.

• Establish an operational level disaster and emergency incident management committee, with representatives from across the Department and all HHSs, to act as a collaborative working unit to support the executive committee and promote cohesive and effective health service alignment at all levels of Queensland’s disaster management arrangements.

• Document and maintain information about appointments to internal and external disaster and emergency incident decision making bodies, key roles and positions.

• Ensure the Department is represented on state level disaster management groups, and that representatives contribute to the group on behalf of the health system.

• Ensure the roles and responsibilities of external entities involved in the Department’s response and recovery for disasters and emergency incidents are included in plans and arrangements.

All Divisions and Commercialised Business Units of the Department will:

• Provide appropriate membership to an executive level disaster and emergency incident management committee, an operational level disaster and emergency incident management committee, and other committees established under these as needed.

• Ensure persons appointed to key disaster and emergency incident committees, roles and positions are aware of, accept and fulfil their roles and responsibilities.

• Ensure representatives appointed to state level disaster management groups are aware of their responsibilities to fulfil the legislated functions of the group on behalf of the health system.

• Respond to requests and directions from the State Health Coordinator through the State Health Emergency Coordination Centre (SHECC), when activated.

Doctrine

The Chief Health Officer and State Health Coordinator will:

• Develop effective disaster and emergency incident plans and arrangements, including a Queensland Health Disaster and Emergency Incident Plan, that consider:
  - the Queensland State Disaster Management Plan
  - relevant frameworks and guidelines for disasters and emergency incidents, both within Queensland Health and through the disaster management system
• Ensure disaster and emergency risk management processes are based on recognised methodology and consider:
  - the hazards and functions that are the responsibility of Queensland Health, the Department and/or HHSs in the Queensland State Disaster Management Plan
  - alignment with recognised state-level disaster risk management processes and outputs
  - residual risks identified and escalated to the Department by HHSs.

• In conjunction with appropriate areas of expertise within the Department, facilitate the provision of expert advice to stakeholders through effective plans and arrangements on health related aspects of disasters and emergency incidents, including:
  - health system coordination and medical services
  - public and environmental health
  - mental health
  - emergency medical retrieval
  - mass casualty and mass fatality management4.

• Develop effective plans and arrangements to enable all stakeholders to prepare for, respond to and recover from the hazards for which Queensland Health is the primary agency, namely pandemic, biological (human related), radiological and heatwave5.

All Divisions and Commercialised Business Units of the Department will:

• Ensure the Department’s business continuity policies, plans and processes consider the potential disruptive impact of a disaster or emergency incident to critical business functions and processes.

• Ensure essential services or critical functions provided by the Department to HHSs that support or may impact on disaster and emergency incident response have appropriate plans in place to maintain supply.

Enablers

The Chief Health Officer and State Health Coordinator will:

• Establish and maintain cooperative partnerships to support information and resource management during disaster operations between the SHECC6 and:
  - the Department’s executive and operational disaster and emergency incident committees
  - functional areas of the Department that provide essential services or critical functions to support disaster and emergency incident response within HHSs
  - the Department’s crisis management arrangements, if activated
  - HHSs and Health Emergency Operations Centres (HEOCs)
  - health-related departments, committees, groups and coordination centres of the Australian Government
  - state-level disaster management groups and the State Disaster Coordination Centre.

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4 See roles and responsibilities of Queensland Health in the Queensland State Disaster Management Plan.
5 See hazard specific planning in the Queensland State Disaster Management Plan.
6 If the SHECC is not activated, between the Health Disaster Management Unit and these entities.
Establish and maintain communication and information systems for use in coordinating disasters and emergency incidents that are consistent and compatible with:

- systems and processes in use by the State Disaster Coordinator Centre
- systems and processes in use by HHSs
- systems and processes identified in the *Queensland Health Incident Management System Guideline*.

All Divisions and Commercialised Business Units of the Department will:

Contribute to and maintain cooperative partnerships to support information and resource management during disaster operations between their Division or Commercialised Business Unit and:

- the SHECC
- functional areas of the Department that provide essential services or critical functions to support disaster and emergency incident response within HHSs
- the Department’s crisis management arrangements, if activated
- HHSs and HEOCs.

Establish and maintain processes to:

- identify potential resource gaps (human, financial and material) within their Division or Commercialised Business Unit before, during and after disaster and emergency incident operations
- allocate and coordinate the use of resources during disasters and emergency incidents on request from the State Health Coordinator act on requests for assistance, resources or services from HHSs or HEOCs.

Capabilities

The Chief Health Officer and State Health Coordinator will:

- Ensure a functional SHECC can be activated, resourced and maintained, consistent with the *Queensland Health Incident Management System Guidelines*.
- Develop and maintain the capability to undertake disaster and emergency incident operations through:
  - identifying staff to participate in advisory and operational roles with the appropriate accreditation, skills, knowledge and experience
  - undertaking training of staff in line with the minimum requirements in the *Queensland Health Disaster and Emergency Incident Training Framework*
  - assessing training needs annually and maintaining a training plan
  - exercising plans, functions and capabilities based on identified need, at least annually, including at least one mass casualty scenario involving more than one HHS7.
- Ensure relevant employees and stakeholders are aware of the Department’s preparedness arrangements through information and awareness activities8.

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7 See *Queensland Health Disaster and Emergency Incident Training Framework*; and DM Act s. 55 & 59 regarding reviewing and renewing district and local disaster management plans.
8 See DM Act s. 23 & 30 regarding functions of district and local disaster management groups.
All Divisions and Commercialised Business Units of the Department will:

- Develop and maintain the capability to undertake disaster and emergency incident operations through:
  - supporting release of appropriately skilled staff to participate in advisory and operational roles within the SHECC
  - supporting the training of staff in line with the minimum requirements in the *Queensland Health Disaster and Emergency Incident Training Framework*
  - exercising plans, functions and capabilities based on identified need, at least annually.

**Performance**

The Chief Health Officer and State Health Coordinator will:

- Regularly review the content and effectiveness of Queensland Health disaster and emergency incident plans and arrangements through:
  - identifying and documenting trigger points for reviews
  - reviewing the content of plans and sub-plans annually, with updates as required
  - reviewing the effectiveness of the *Queensland Health Disaster and Emergency Incident Plan* (or part of the plan or its sub-plans) at least annually through exercise and evaluation, or activation and debrief
  - ensuring processes are in place to assess the effectiveness of plans and arrangements following activations in line with the *Queensland Health Operational Briefing and Debriefing Guideline*
  - documenting and sharing lessons identified in reviews, assessments or debriefs, including potential improvement strategies or activities
  - incorporating improvements based on lessons identified into existing governance processes, monitoring and recording decisions and actions taken to promote ‘lessons learned’.

- Regularly review and assess cooperation between areas of the Department responsible for disaster or emergency incident response functions, and between the Department and HHSs, including whether the systems and procedures employed are compatible and consistent.\(^9\)

- Participate on behalf of the health system in multi-agency reviews of the content and effectiveness of state level disaster management plans and arrangements.

All Divisions and Commercialised Business Units of the Department will:

- Participate in the review of content and effectiveness of Queensland Health disaster and emergency incident plans and arrangements, including their application during disaster or emergency incident response.

- Regularly review the content and effectiveness of any plans or sub-plans they have responsibility for, through:
  - identifying and documenting trigger points for reviews
  - reviewing the content of plans and sub-plans annually, with updates as required

\(^9\) Aligns with IGEM functions DM Act s. 16C(c).
- ensuring processes are in place to assess the effectiveness of plans and arrangements following activations in line with the *Queensland Health Operational Briefing and Debriefing Guideline*
- documenting and sharing lessons identified in reviews, assessments or debriefs, including potential improvement strategies or activities
- incorporating improvements based on lessons identified into existing governance processes, monitoring and recording decisions and actions taken to promote ‘lessons learned’.

**Legislation**

- *Disaster Management Act 2003 [Qld]*
- *Disaster Management Regulation 2014 [Qld]*
- *Fire and Emergency Services Act 1990 [Qld]*
- *Hospital and Health Boards Act 2011 [Qld]*
- *Public Health Act 2005 [Qld]*
- *Public Safety Preservation Act 1986 [Qld]*
- *Radiation Safety Act 1999 [Qld]*
- *Work Health and Safety Act 2011 [Qld]*

**Supporting documents**

- Disasters and Emergency Incidents Policy (QH-POL-315:2018)
- Emergency Management Assurance Framework
- Queensland Counter-Terrorism Plan
- Queensland Health Disaster and Emergency Incident Plan (2016) and sub-plans
- Queensland Health Disaster and Emergency Incident Training Framework (2016)
- Queensland Health Incident Management System Guideline (2016)
- Queensland Health Operational Briefing and Debriefing Guideline (2016)
- Queensland State Disaster Management Plan (2016).
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
<th>Source</th>
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<tbody>
<tr>
<td>Capability:</td>
<td>How an entity is using training and exercising to help embed the necessary culture change and improve performance.</td>
<td>Queensland Emergency Management Assurance Framework (Accountabilities)</td>
</tr>
<tr>
<td>Critical business function:</td>
<td>A business function or part thereof identified as essential for survival of the organisation and achievement of its critical objectives.</td>
<td>AS5050:2010 Business continuity – Managing disruption-related risk (Section 1.3 Definitions)</td>
</tr>
</tbody>
</table>
| Disaster:                                 | A serious disruption to a community caused by the impact of an event that requires a significant coordinated response by the state and other entities to help the community recover from the disruption. Serious disruption means:  
- loss of human life, or illness or injury to humans  
- widespread or severe property loss or damage  
- widespread or severe damage to the environment.  
An event may be natural or caused by human acts or omissions. | Disaster Management Act 2003 (Section 13)                                                   |
| (Disaster) Event:                         | • A cyclone, earthquake, flood, storm, storm tide, tornado, tsunami, volcanic eruption or other natural happening  
• an explosion or fire, a chemical, fuel or oil spill, or a gas leak  
• an infestation, plague or epidemic  
• a failure of, or disruption to, an essential service or infrastructure  
• an attack against the state, or  
• another event similar to an event mentioned.  
An event may be natural or caused by human acts or omissions. | Disaster Management Act 2003 (Section 16)                                                   |
<p>| Doctrine:                                 | How an entity’s plans, programs, policies, practices and operational procedures align with its roles and responsibilities: for example plans, procedures, guidelines, policy.                                  | Queensland Emergency Management Assurance Framework (Accountabilities)                       |
| Enablers:                                 | How an entity is using and developing the necessary systems, equipment, resources and technologies to deliver disaster management outcomes.                                                                | Queensland Emergency Management Assurance Framework (Accountabilities)                       |
| Governance:                               | How an entity demonstrates its values and aligns its strategy to achieve disaster management outcomes: for example roles and responsibilities, decision making, reporting, leadership, approval processes.        | Queensland Emergency Management Assurance Framework (Accountabilities)                       |
| Disaster (and emergency incident) management: | Arrangements about managing the potential adverse effects of a disaster event, including mitigation, prevention, preparedness, response and recovery arrangements.                           | Disaster Management Act 2003 (Section 14)                                                   |</p>
<table>
<thead>
<tr>
<th>Disaster (and emergency incident) operations:</th>
<th>Activities undertaken before, during, or after a disaster event happens to help reduce the level of serious disruption to the community.</th>
<th>Disaster Management Act 2003 (Section 15)</th>
</tr>
</thead>
</table>
| Effective (relating to disaster and emergency incident management, operations and plans). | • Scalable – able to be applied to any size or type of event  
• Comprehensive – consider prevention, preparedness, response and recovery phases of disaster management  
• Interoperable – able to operate seamlessly between entities  
• Value for money – enable the best outcome and performance for money spent  
• Adaptive – flexible to the needs of all stakeholders  
Note: Effectiveness can only be determined during application of a plan or arrangement through exercise or activation. | Queensland Emergency Management Assurance Framework (Good practice attributes) |
| Emergency incident: | Any emergency incident that is not considered a disaster under the Disaster Management Act 2003, but that:  
• is confined to activation of a single Health Emergency Operations Centre in a single Hospital and Health Service  
• results in moderate or medium impact on normal operations  
• is able to be resolved through the use of local or first response resources  
• may involve the State Health Emergency Coordination Centre moving to ‘alert’ or ‘lean forward’ level of activation, dependent on situation reporting. | Queensland Health Disaster and Emergency Incident Plan |
| Performance: | How the entity is actively improving the performance of its service delivery: for example through monitoring, review, assessment and continuous improvement activities. | Queensland Emergency Management Assurance Framework (Accountabilities) |
| State Health Emergency Management Committee: | A committee established as a mechanism to support and enable a collaborative approach across the Department of Health and Hospital and Health Services in the development of emergency management arrangements and promote consistency of operations across Queensland Health. | State Health Emergency Management Committee Terms of Reference |

Version | Date | Comments |
---|---|---|
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