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

2. Purpose
The purpose of this policy is to ensure the Department of Health develops and maintains a capability, supported by effective risk-based plans and arrangements, to prevent, prepare for, respond to and recover from disasters and emergency incidents.

3. Scope
The principles and requirements in this policy align to the principles and accountabilities in the Queensland Office of the Inspector-General Emergency Management’s Emergency Management Assurance Framework. This policy applies to all employees, contractors and consultants within the Department of Health’s divisions and commercialised business units.

4. Principles
Leadership

- The Department of Health is primarily responsible for leading and coordinating health related aspects of disasters and emergency incidents across the state.
- Leadership at all levels of the Department of Health is demonstrated through responsible and effective governance and strategic planning that supports this responsibility.

Safety

- The safety and security of staff, patients and the broader community is the foundation for disaster and emergency incident plans and arrangements.

Partnerships

- Cooperative partnerships drive clear roles and responsibilities and promote collaboration between all stakeholders.

Performance

- A culture of excellence produces outcomes where effectiveness is evaluated, analysed and continually improved; and evidence-based, contemporary practice is identified, shared and embedded.

5. Requirements
The Disasters and Emergency Incidents Standard associated with this policy further outlines how these requirements are to be achieved.

Governance

5.1 Roles, responsibilities and accountabilities of entities and positions involved in health-related disaster and emergency incident management and operations are documented, agreed and enacted.
5.2 Decisions at all levels are documented and underpin effective management and operational activities and actions.

**Doctrine**

5.3 Effective disaster and emergency incident plans and arrangements:
- are based on risk priorities
- are as consistent as practicable with required legislation, plans and standards
- provide for the responsibility and functions of Queensland Health as outlined in the *Queensland State Disaster Management Plan.*
- consider and align with plans for continuity of critical business functions, where practicable.

**Enablers**

5.4 Communication, information and resource management systems and procedures:
- are documented and shared with all relevant internal and external stakeholders
- are consistent and compatible with state-level disaster management arrangements
- are developed and implemented through cooperative partnerships:
  - within and between the divisions and branches of the Department of Health
  - with Hospital and Health Services
  - with state-level disaster management groups and other stakeholders.

**Capabilities**

5.5 The Department of Health is prepared for, and has the capability and capacity to undertake activities relating to disaster and emergency incident operations.

**Performance**

5.6 The content and effectiveness of plans and arrangements are monitored, evaluated and reviewed annually through exercise or activation.

5.7 Lessons identified through debrief, post event or exercise evaluation are shared and inform improvement activities.

**6. 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]

**7. Supporting documents**

- Emergency Management Assurance Framework

---

1 The requirements within this policy directly align to the outcomes to be achieved by Hospital and Health Services in the Disasters and Emergency Incidents Health Service Directive QH-HSD-003:2017, and to the accountabilities contained within the Emergency Management Assurance Framework.
- Queensland Counter-Terrorism Plan
- Queensland Health Incident Management System Guideline (2016)
- Queensland Health Disaster and Emergency Incident Plan (2016) and sub-plans
- Queensland Health Disaster and Emergency Incident Training Framework (2016)
- Queensland Health Operational Briefing and Debriefing Guideline (2016)
- Queensland State Disaster Management Plan (2016).

8. Definitions

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
<th>Source</th>
</tr>
</thead>
<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>
<tr>
<td>Disaster:</td>
<td>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.</td>
<td>Disaster Management Act 2003 (Section 13)</td>
</tr>
<tr>
<td>(Disaster) Event:</td>
<td>• 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.</td>
<td>Disaster Management Act 2003 (Section 16)</td>
</tr>
<tr>
<td>Doctrine:</td>
<td>How an entity’s plans, programs, policies, practices and operational procedures align with its roles and responsibilities: for example plans, procedures, guidelines, policy.</td>
<td>Queensland Emergency Management Assurance Framework (Accountabilities)</td>
</tr>
<tr>
<td>Enablers:</td>
<td>How an entity is using and developing the necessary systems, equipment, resources and technologies to deliver disaster management outcomes.</td>
<td>Queensland Emergency Management Assurance Framework (Accountabilities)</td>
</tr>
<tr>
<td>Governance:</td>
<td>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.</td>
<td>Queensland Emergency Management Assurance Framework (Accountabilities)</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Disaster (and emergency incident) management:</td>
<td>Arrangements about managing the potential adverse effects of a disaster event, including mitigation, prevention, preparedness, response and recovery arrangements.</td>
<td>Disaster Management Act 2003 (Section 14)</td>
</tr>
<tr>
<td>Disaster (and emergency incident) operations:</td>
<td>Activities undertaken before, during, or after a disaster event happens to help reduce the level of serious disruption to the community.</td>
<td>Disaster Management Act 2003 (Section 15)</td>
</tr>
</tbody>
</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 |
<p>| 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 |</p>
<table>
<thead>
<tr>
<th>Version</th>
<th>Date</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Final Draft</td>
<td>February 2018</td>
<td>Next date of review November 2019</td>
</tr>
</tbody>
</table>