



EMV
EMERGENCY
MANAGEMENT
VICTORIA

Victorian action plan for influenza pandemic

**Working in conjunction
with Communities,
Government, Agencies
and Business**

Authorised by the Victorian Government

1 Treasury Place, Melbourne, 3002

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Where the term 'Aboriginal' is used it refers to both Aboriginal and Torres Strait Islander people. Indigenous is retained when it is part of the title of a report, program or quotation.

Thank you to the Department of Health & Human Services for coordinating the development of this plan.



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Abbreviations

COAG	Council of Australian Governments
CHO	Chief Health Officer (Victoria)
PPE	Personal protective equipment
SCRC	State Crisis and Resilience Council
SEMCC	Security and Emergency Management Committee of Cabinet
SEMT	State Emergency Management Team

Definitions

Epidemic	A sudden increase in the incidence of a disease, affecting a large number of people, over a large geographic area.
Influenza (the flu)	A highly contagious disease of the respiratory tract, caused by the influenza virus.
Novel virus	A virus that has never previously infected humans, or has not infected humans for a long time and likely that almost no one will have immunity, or antibody to protect them against the virus.
Pandemic	Epidemic on a global scale. Only type A influenza viruses have been known to cause pandemics.
Social distancing	A community-level intervention to reduce normal physical and social population mixing in order to slow the spread of a pandemic throughout society. Social distancing measures include school closures, workplace measures, cancellation of mass gatherings, changing public transport arrangements and population movement restrictions.

1 Introduction

1.1 Purpose

The *Victorian action plan for pandemic influenza 2015* (the action plan) sets out Victoria's strategic approach to reduce the social and economic impacts and consequences of pandemic influenza on communities.

Every Victorian Government department and agency must have a plan in place to address the possible impacts and consequences of pandemic influenza on their organisations, and their responsibilities to communities.

Local government, businesses and non-government organisations also have a key role in helping to reduce the impacts and consequences of pandemic influenza. This document will help these organisations to prepare and plan.

The action plan helps organisations complete or review their pandemic influenza plans. It sets out:

- the Victorian arrangements for pandemic influenza planning and response
- the key agencies and their roles and responsibilities
- relevant governance structures
- incident response guidance for departments and agencies.

1.2 Objectives

The action plan's objectives are for Victorian Government departments and their agencies (including emergency management agencies), local government, and all sectors of society to:

- plan for pandemic influenza
- undertake preparedness activities to reduce the impacts of pandemic influenza
- take action to contain the disease and assist all sectors of society to continue functioning
- facilitate accurate, timely and helpful communications to and within all sectors of society.

The action plan sets out:

- the potential impacts and consequences of pandemic influenza
- the preparation and response actions to mitigate these risks
- communication considerations to ensure accurate, timely and helpful information is provided to all sectors of society
- resources where further information can be obtained.

1.3 Scope

Victoria has two specific plans for human pandemic influenza:

- *Victorian health management plan for pandemic influenza 2014* (the health management plan)
- this plan, the *Victorian action plan for pandemic influenza 2015*.

The health management plan outlines the health sector's preparedness and response strategies to minimise morbidity and mortality and protect public health and safety.

The action plan is a Victorian government plan to manage pandemic influenza across all sectors of society. The plan was updated in 2015 in light of a revised health management plan and the creation of Emergency Management Victoria. The plan is primarily for Victorian Government departments and their agencies, however other organisations, including local government, businesses and non-government organisations can also use it.

The action plan does not include detail about the operational activities of individual organisations.

1.4 Authorising environment

The *Emergency Management Act 1986* and the *Emergency Management Act 2013* provide the legislative basis to manage emergencies in Victoria. The following legislation is also relevant:

- *Public Health and Wellbeing Act 2008*
- *Essential Services (Year 2000) Act 1999*
- *Local Government Act 1989*.

The *Emergency management manual of Victoria* contains policy and planning documents for emergency management in Victoria, and details the roles different organisations play in the emergency management arrangements.

Part 3 of the *Emergency management manual of Victoria* is the *State emergency response plan*, which outlines Victoria's organisational arrangements for managing the response to emergencies.

This action plan is a subordinate plan of the *State emergency response plan* and has been approved by the Emergency Management Commissioner in consultation with the State Crisis and Resilience Council (SCRC) and the SCRC Capability and Response Subcommittee.

1.5 Activation of this plan

The arrangements in this plan apply on a continuing basis.

1.6 Audience

The action plan is for Victorian Government departments and their agencies (including emergency management agencies), local government and all sectors of society.

1.7 Linkages

The action plan complements and is consistent with:

- the *Australian health management plan for pandemic influenza 2014*
- the *Victorian health management plan for pandemic influenza 2014*
- Victoria's emergency management arrangements, as described in the *Emergency management manual of Victoria*
- business continuity best practice.

Australian health management plan for pandemic influenza

This plan outlines Australia's strategy to manage pandemic influenza and minimise its impact on the health of Australians and the health system. It forms the basis for pandemic influenza planning in all Australian jurisdictions, providing updated authoritative advice for all Australians regarding the likely nature of pandemic influenza, as well as the response measures that the health sector would consider taking.

Victorian health management plan for pandemic influenza

The health management plan is the Victorian reflection of the revised *Australian health management plan for pandemic influenza*, and complements its contents.

The health management plan outlines Victoria's health preparedness and response framework to manage pandemic influenza and minimise its impacts on the health sector and community. It is primarily for the health sector, encompassing health services, primary care, residential facilities (including health planning considerations for schools and education and care facilities), local government and emergency services.

State health emergency response plan

The *State health emergency response plan* (SHERP) is the Victorian pre-hospital and hospital response plan for emergency incidents. It is a sub-plan of the *State emergency response plan*. The SHERP describes the principles, command and coordination arrangements, and roles and responsibilities for a health emergency response that involves pre-hospital care, patient transport, receiving hospitals and other healthcare facilities.

Business continuity

Current best practice standards for developing business continuity policies and procedures are:

- AS/NZS ISO 31000:2009 Risk management – principles and guidelines
- International Standards ISO 22301 Societal security – Business continuity management system – requirements
- International Standard ISO 22313 Societal security – Business continuity management systems – guidance.

1.8 Review

The action plan is current at the time of publication and remains in effect until modified or superseded.

The action plan will be reviewed and updated every three years or sooner if it is applied in a major emergency or exercise, or if there is a change to relevant legislation or arrangements.

2 Context of the emergency

2.1 The pandemic influenza hazard

Influenza is a viral illness, commonly known as the flu.

Influenza epidemics occur every year during autumn and winter in temperate regions. Illness can result in hospitalisations and deaths, mainly among high-risk groups (the very young, elderly and chronically ill). Epidemic outbreaks are managed each year by well-developed health systems and processes.

Influenza pandemics have historically occurred every 10–50 years. During an influenza pandemic, the virus spreads rapidly around the world causing high rates of illness and death – resulting in severe social and economic disruption.

It is difficult to predict how quickly an influenza pandemic will progress. Based on experience from the most recent pandemic, H1N1 in 2009, together with data and assumptions drawn from previous events, it is anticipated that a pandemic could last from seven to 10 months in Australia. However, the consequences of a pandemic could last longer depending on the severity of the virus.

2.2 Level of impact

The level of impact of a pandemic influenza will depend on a number of factors, including the clinical severity of the disease, the transmissibility of the virus between humans, the capacity of the health system, the effectiveness of interventions and the vulnerability of our population.

It will only be possible to quantify the overall impact of the pandemic once it has run its course. However, the State Controller will estimate clinical severity of the disease early in the response, as either low, moderate or high, based on the available evidence and emerging epidemiology.

Clinical severity affects the number of deaths and the level of concern within the community.¹ The State Controller will communicate the clinical severity to help Victorian organisations estimate an overall level of impact and undertake proportionate response actions.

The scenarios described in the *Australian health management plan for pandemic influenza* and the *Victorian health management plan for pandemic influenza* help to illustrate the differences in potential impact at each clinical severity level.

The following scenarios are drawn from these plans, and can be used to guide planning for proportionate response actions (see also the response tables in the guide in Appendix 1):

Scenario 1: If clinical severity is low

The level of impact on the community may be similar to severe seasonal influenza or the 2009 H1N1 pandemic.

The majority of cases are likely to experience mild to moderate clinical features.

People in at-risk groups may experience more severe illness. Strategies to support at-risk groups may be required.

Health services are likely to be stretched.

¹ *Australian health management plan for pandemic influenza*, p. 19.

Scenario 2: If clinical severity is moderate

Young healthy people and people in at-risk groups may experience severe illness.

The number of people presenting for medical care is likely to be higher than for severe seasonal influenza.

Pressure on health services will be intense.

Scenario 3: If clinical severity is high

Widespread severe illness will cause concern and challenge the capacity of the health sector.

Heavy prioritisation will be essential within hospitals to maintain essential services. Mortuary services will be under pressure. Pressure on health services will be more intense.

The community focus of governments, agencies and sectors will be on maintaining essential services.

Absenteeism will be high as staff become ill or have to care for ill family members.

3 Consequences

3.1 Health consequences

In addition to the consequences described in the scenarios, the *Australian health management plan for pandemic influenza* and *Victorian health management plan for pandemic influenza* provide detailed information about the range of potential consequences pandemic influenza will have on the health sector and on public health.

As described in scenario 3, if the clinical severity is high, widespread severe illness will cause concern and challenge the capacity of the health sector. The community focus of governments, agencies and sectors will be on maintaining essential services.

3.2 Social and economic consequences

Pandemic influenza can cause significant disruptions to the way we live as it has the potential to result in high levels of illness and death. The social distancing measures that may be required will have wide-ranging effects, with closure of schools and childcare services, and cancellation of public events. It is estimated that up to 40 per cent² of the workforce may withdraw from work at any one time due to illness, the need to care for family members, or the fear of contracting the virus in the workplace or on public transport.

One study estimated that in a worst-case pandemic influenza scenario, Australia's gross domestic product could suffer a decline of greater than 10 per cent.³

At an organisational level, a pandemic will be unlike any other modern emergency, and therefore it creates unique challenges for business continuity planners. It is impossible to predict the timing or severity of a pandemic; however, it is possible for an organisation to have appropriate management plans in place to continue to function, while also exercising their duty of care to employees to protect their health and safety at work.

3.3 Consequence management

Under the Emergency Management Act, the Emergency Management Commissioner (EMC) is responsible for consequence management for a major emergency. This includes ensuring the potential risks and consequences of emergencies are identified and proactive mitigation strategies applied.

Victoria's consequence management arrangements are described in the *State emergency response plan*. In accordance with the plan, the EMC will appoint a Consequence Manager to lead consequence management across the state.

The Consequence Manager will work through the State Emergency Management Team to ensure agencies prepare to minimise the impact of imminent emergencies on communities, government, agencies and business.

² State Government of Victoria 2014, *Emergency risks in Victoria*, State Government of Victoria, Melbourne.

³ McKibbin WJ and Sidorenko AA 2006, *Global macroeconomic consequences of pandemic influenza 2006*, Lowy Institute for International Policy, Sydney.

4 Community resilience

The *National strategy for disaster resilience*, developed by the Council of Australian Governments, highlights the responsibility of all of society to reduce the impacts and consequences of emergencies such as pandemic influenza. This plan seeks to improve community resilience through measures that will:

- reduce the extent/scale, or likelihood of spreading, of a pandemic
- reduce the potential impact on essential community services of absenteeism
- protect the viability of healthcare operations.

All Victorian Government departments and their agencies (including emergency management agencies), all local government authorities and all sectors of society should:

- plan for pandemic an influenza
- undertake preparedness activities to reduce the impacts of pandemic influenza
- take action to help contain the disease and assist all sectors of society to continue functioning
- facilitate accurate, timely and helpful communications to and within all sectors of society.

4.1 At-risk groups and those with special considerations

The *Australian health management plan for pandemic influenza* and *Victorian health management plan for pandemic influenza* identify at-risk groups and those with special needs because they may be especially vulnerable during an influenza pandemic.

The *Victorian health management plan for pandemic influenza* (Appendices 10, 11, 12, 13, 14 and 17) provides operational guidance for organisations and facilities that play important roles to help minimise potential adverse health consequences of a pandemic, including:

- local government, to develop a pandemic plan for their municipality
- emergency services
- organisations that engage with:
 - children, and where children gather, including schools and childcare
 - people who live in residential facilities, including residential aged care and disability accommodation services
 - custodial facilities.

The *Victorian health management plan for pandemic influenza* also highlights that Aboriginal and Torres Strait Islanders and culturally and linguistically diverse Victorians need tailored planning considerations.

5 Collaboration

The World Health Organization (WHO) advocates multi-sectoral linkage and integration across the whole-of-government and the whole-of-society. Figure 1 shows preparedness and response collaboration for pandemic influenza in Victoria.

Figure 1: Pandemic influenza preparedness and response collaboration



The Commonwealth Government will coordinate national pandemic measures that involve the close coordination of Commonwealth, state and territory ministers, officials and agencies with key responsibilities. The *Australian health management plan for pandemic influenza* and *Victorian health management plan for pandemic influenza* outline national arrangements, including the roles of the committees that would meet to coordinate a pandemic response such as the Council of Australian Governments Health Council, the National Crisis Committee and the Australian Health Protection Principal Committee.

The Victorian Government has primary operational responsibility for responding to pandemic influenza in Victoria, and for developing and maintaining the capability to do so. The Victorian Government plays a key role in the national arrangements, and would coordinate and support local government, businesses, non-government organisations and Victorian communities to manage a pandemic.

Consistent with Australia's and Victoria's approach to emergency management, a pandemic influenza is managed within an ongoing cycle of prevention, preparedness, response and recovery.

The response stage is further divided into three sub-stages: standby; action (initial and targeted); and stand-down. Priorities will change with the different sub-stages and as new information becomes available.

The *Australian health management plan for pandemic influenza*, the *Victorian health management plan for pandemic influenza* and this action plan do not focus on prevention and recovery. Prevention is led by health

sector arrangements and managed on an ongoing basis. In Victoria, recovery arrangements will be undertaken in line with Part 4 of the *Emergency management manual of Victoria: the State Emergency Relief and Recovery Plan*.

Table 1 outlines these stages, sub-stages and the description of the disease that will inform key preparedness and response activities.

Table 1: Description of preparedness and response stages

Stage and sub-stage		Description
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.

5.1 Emergency Management Commissioner

Under the *Emergency Management Act 2013*, the Emergency Management Commissioner has legislated responsibilities across major emergencies in Victoria, with the exception of a warlike act, act of terrorism, a hijack, siege or riot. Influenza pandemic is a class 2 emergency under the Act.

The Emergency Management Commissioner’s responsibilities include response coordination, ensuring effective control arrangements are established, consequence management and recovery coordination.

5.2 Agency and sector roles and responsibilities

Department of Health & Human Services

The Department of Health & Human Services is the control agency for Victoria’s response to a pandemic influenza.

The Department of Health & Human Services, as the Incident Control Agency, will provide overall direction and ensure that adequate planning and logistics are in place to support the response to a pandemic influenza. The Department of Health & Human Services will also ensure that agencies are tasked to support the response, as the situation dictates.

State Controller: Chief Health Officer

The Chief Health Officer assumes the role of State Controller with authority to activate the *Victorian health management plan for pandemic influenza*, including the response stage and each of the standby, action and stand-down sub-stages.

The Chief Health Officer has overall responsibility for emergency response operations during an influenza pandemic.

These responsibilities may include:

- establishing incident control facilities
- assessing emergency causes and impacts
- establishing appropriate incident control system structure, including participation by relevant agencies
- developing incident action plans
- liaising with emergency services organisations and other support agencies
- providing briefings to emergency managers
- allocating tasks to emergency managers
- ensuring safety of personnel involved in response activities
- preparing reports on situation
- managing media and public information requirements
- managing risks associated with incident control
- reviewing the progress of incident control activities.

Other key leadership roles in the Department of Health & Human Services include the State Health and Medical Commander and the State Health Coordinator. The State Health and Medical Commander will direct health and medical resources. The State Health Coordinator is responsible for health coordination (hospital and health service coordination), and will also work closely with Health Commanders (Ambulance Victoria) and the State Controller by contributing to the incident strategy.

State government departments, their sectors and agencies

All state government departments, their sectors and agencies are responsible for preparing for and supporting the response to a pandemic.

Each state government department is required to have in place:

- preparedness arrangements, including a business continuity plan
- a pandemic influenza response plan that outlines operational actions the department will consider undertaking in response to a pandemic. Further information is provided in Appendix 1.

Additionally, state government departments will advocate the need for their agencies to plan for managing pandemic influenza.

Under the *Victorian health management plan for pandemic influenza*, some facilities are given guidance to assist their planning.

Residential aged care services, disability accommodation services and youth justice facilities – Department of Health & Human Services

In addition to its emergency management role, Department of Health & Human Services, its sector agencies and stakeholders have ongoing engagement and particular responsibilities for at-risk groups and those with special needs. Some of these groups may be especially vulnerable in the event of a pandemic.

The *Victorian health management plan for pandemic influenza* (Appendices 12, 13 and 14) provides information for residential aged care services, disability accommodation services, youth justice facilities and disability forensic assessment and treatment services, to assist them to plan for pandemic influenza, and to maintain the care and protection of staff, clients and others who come into contact with these facilities.

Schools and early childhood services – Department of Education & Training

The *Victorian health management plan for pandemic influenza* (Appendix 11) provides schools and early childhood services with guidance on the actions and measures that should be taken in the various stages of a pandemic.

Custodial facilities – Department of Justice & Regulation and Department of Health & Human Services

The *Victorian health management plan for pandemic influenza* (Appendix 14) provides information to correctional facilities, youth justice and Victoria Police (for police cells) to assist them with planning for a pandemic, and to maintain the care and protection of staff, clients and others who come into contact with these facilities.

Emergency services organisations

Emergency services organisations should develop a pandemic influenza plan. The *Victorian health management plan for pandemic influenza* (Appendix 17) provides information to emergency services to assist them to develop this plan.

Local government

Local government is the closest level of government to the community and is often the first point of contact for information, advice and assistance.

Local government has a pivotal role in emergency management. Local governments will provide leadership during a pandemic, and have established relationships within their local community.

Local governments should develop an influenza pandemic plan for their municipality and ensure that business continuity planning includes pandemic considerations. The *Victorian health management plan for pandemic influenza* (Appendix 10) provides a guide to help local government organisations develop this plan. See Appendix 1 of this action plan for planning resources for local government.

Businesses and non-government organisations

By itself, government cannot manage the spread of pandemic influenza or maintain the essential services that businesses and the community will require. Businesses and non-government organisations will also play a vital role to help contain the disease and assist communities to continue functioning.

The Victorian Government encourages all organisations to be prepared. Organisations that provide key services or operate critical infrastructure must be able to continue operations.

Business continuity planning that includes pandemic-specific considerations will help minimise the impact of a pandemic on the organisation, protect staff and contribute to community functioning. Considerations should include the potential for:

- extended loss of personnel
- extended impact on critical supply chains.

Business and non-government organisations should note the Victorian Government's preparedness and response approach in this plan and consider the implications for them.

5.3 Whole-of-Victorian government governance structure

State Controller: Chief Health Officer

The Chief Health Officer assumes the role of State Controller and has the authority to activate the *Victorian health management plan for pandemic influenza*, including the response and each of the standby, action and stand-down sub-stages of the response.

State Crisis and Resilience Council

The State Crisis and Resilience Council is responsible for providing advice to the Minister for Emergency Services, other relevant ministers and the Security and Emergency Management Committee of Cabinet on whole-of-government emergency management policy and strategy, its implementation and any complex or emerging issues. The State Crisis and Resilience Council is not responsible for operational or tactical decisions during an emergency.

Security and Emergency Management Committee

The Security and Emergency Management Committee of Cabinet is the Victorian Government's decision-making body for a major incident requiring whole-of-government coordination.

In the event of a pandemic, the Security and Emergency Management Committee of Cabinet will consider all the consequences of pandemic influenza.

5.4 Communication

Clear communication across stakeholder groups and to Victorian communities will help organisations plan for and respond to pandemic influenza.

It will also help communities understand the risks associated with pandemic influenza and how they should respond. Effective communication during the various stages of a pandemic is vital to help minimise transmission, provide continuity of government and essential services, and provide community support and recovery.

The key communication principles outlined in the *Australian health management plan for pandemic influenza* will be applied to Victoria's whole-of-government pandemic influenza communications strategy. These include 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.

National announcements and messages

National announcements or messages related to the national approach to pandemic influenza in Australia will be shared with states and territories in order to maintain consistency in public messaging.

The Prime Minister (or delegate) will make these announcements, following consultation with states and territories and relevant Commonwealth agencies. Victoria will receive national messages through its participation in the National Health Emergency Media Response Network.

Victoria's whole-of-government communication strategy

A whole-of-government communication strategy will guide all relevant government departments and agencies to develop, adopt and maintain a planned and consistent approach to pandemic influenza. The Chief Health Officer will lead the development of this strategy.

The strategy will provide guidance for communicating with Victorian communities as well as government and non-government sectors. The Victorian strategy will coordinate messages that are tailored and specific to Victorian communities and appropriate to the situation at the time.

The Emergency Management Joint Public Information Committee comprises public information professionals from Victorian Government departments and agencies. The committee plays a key role in supporting the Department of Health & Human Services by coordinating and distributing public information in a timely and accurate manner through member's networks.

State government departments are required to consider communications actions when completing their influenza pandemic plan. Appendix 1 incorporates this consideration.

6 Capability

This action plan highlights that all organisations and sectors of society should be prepared for a pandemic influenza, in order to help contain the disease and assist communities to continue functioning.

Everyone has a key role to play in assisting helpful communications to and within communities.

State government departments must develop pandemic influenza response plans (See Appendix 1), and all organisations are encouraged to develop business continuity plans that specifically consider pandemic impacts, such as significant loss of personnel, and adverse impacts on supply chains.

If clinical severity is high, the community focus will be on maintaining essential services, including banking and finance, police and emergency services, energy, food supply, healthcare, telecommunications, transport, sanitation and waste services and water supply.

Appendix 2 outlines further resources to assist organisations to plan for pandemic influenza.

Appendix 1: Victorian Government department pandemic influenza preparedness and incident response guide

Background

Influenza pandemics have historically occurred every 10–50 years. During these events, the virus spreads rapidly around the world causing high rates of illness and death – resulting in severe social and economic disruption.

It is difficult to predict how quickly an influenza pandemic will progress. Based on experience from H1N1 in 2009, together with data and assumptions drawn from previous events, an influenza pandemic could last from seven to 10 months in Australia. However, the consequences could last longer depending on the severity of the virus.

The level of impact of a pandemic influenza will depend on a number of factors, including the clinical severity of the disease, the transmissibility of the virus between humans, the capacity of the health system, the effectiveness of interventions and the vulnerability of our population.

It will only be possible to quantify the overall impact of the pandemic once it has run its course. However, the State Controller will estimate clinical severity of the disease early in the response, as either low, moderate or high. Clinical severity will help Victorian Government departments and their stakeholders estimate an overall level of impact and therefore undertake proportionate actions.

Scope and purpose

All Victorian Government departments must develop a pandemic influenza plan, incorporating preparedness and an incident response plan.

The purpose of the pandemic influenza incident response plan is to detail the operational aspects of immediate response operations, specifically to:

- ensure timely pandemic information is delivered to the workforce
- minimise the risk of exposure to the virus in workplaces through infection prevention and control measures
- prioritise work services
- plan for adequate workforce availability to deliver the department's essential functions and services

Business continuity

In the case of a pandemic, and depending on the clinical severity, business continuity plans may need to be regularly reviewed to prioritise the department's most essential services and functions.

Pandemic influenza preparedness activities

Preparedness activities for pandemic influenza must include:

- preparing a comprehensive risk management strategy that takes an all-hazards approach and includes pandemic influenza as a specific hazard that needs to be considered
- having business continuity plans that are current
- having in place incident management plans and relevant systems

- regularly reviewed, exercised and updated plans
- communicating pandemic influenza plans with staff
- promoting influenza prevention activities such as:
 - offering workplace seasonal influenza immunisation to staff, which is one of the best ways to protect against influenza
 - good hygiene, which includes hand hygiene and respiratory/cough etiquette
 - staying away from work or public gatherings if symptomatic to minimise the risk of infecting others.

Pandemic influenza response objectives

A departmental incident response plan for pandemic influenza will have the following objectives:

- to reinforce with staff, and consequently their families, the need for thorough hygiene practices to minimise the influenza transmission
- to make workplaces as safe as practically possible for staff through the implementation of containment activities as appropriate to the situation
- to support staff to balance their work and home commitments at this time of potential excessive family support commitments
- to support departments and agencies in endeavouring to ensure all essential services are maintained to meet legislative responsibilities and to support the Victorian community
- to provide staff and stakeholders with accurate and consistent messages, using credible and trusted sources, ensuring the messages are aligned with the Victorian Government's pandemic communications strategy.

A departmental incident response plan should provide:

- operational guidance
- a scalable incident management structure to facilitate effective and efficient return to normal business.

The plan should include:

- clear procedures for the escalation and management of an incident (incident response structure and procedures)
- a communication plan for communication with staff and stakeholders
- plans to resume interrupted services (business continuity plans).

The Australasian Inter-service Incident Management System, Incident Control System (AIIMS ICS) framework provides an optimum solution to meeting the potential pandemic response process.

The resources required and actions suggested to respond to pandemic influenza will depend on the severity of the pandemic event.

The following table outlines the:

- pandemic influenza stages
- alternative clinical severity levels (which indicate overall potential impact of an event)
- suggested departmental actions.

Tables: Guidance for Victorian Government departments and agencies to increase levels of preparedness and incident response

Preparedness stage – no novel strain detected (or emerging strain under initial detection)

Action	<p>The scale and nature of preparedness activities is the same for all possible levels of clinical severity</p> <p>Preparedness activities should be incorporated into normal business.</p> <p>This includes incorporating a comprehensive risk management strategy that takes an all-hazards approach and includes pandemic influenza as a specific hazard that needs to be considered.</p> <p>Regularly review, exercise and update plans.</p> <p>Communicate pandemic plans with staff.</p>
Incident response	
<p>Have incident management plans and relevant systems in place.</p> <p>Use existing appropriate staff to monitor the situation and liaise with the Department of Health & Human Services and other agencies.</p>	
Influenza prevention	
<p>Promote influenza prevention activities such as:</p> <ul style="list-style-type: none"> • offering workplace seasonal influenza immunisation to staff • good personal hygiene – hand hygiene and respiratory/cough etiquette • staying away from work or public gatherings if symptomatic. 	
Communications	
<p>Maintain personal hygiene messages with staff.</p> <p>Maintain seasonal influenza messages as appropriate.</p>	
Travel advisories	
<p>Base on Department of Foreign Affairs & Trade advice (www.smartraveller.gov.au).</p>	
Business continuity	
<p>Ensure all business continuity plans are current at all times.</p>	

Standby response stage – sustained community person-to-person transmission detected overseas

Action	Low clinical severity	Moderate clinical severity	High clinical severity
Incident response			
Use existing appropriate staff to monitor the situation and liaise with Department of Health & Human Services and other agencies.	Apply	Apply	Apply
Hygiene measures			
Reinforce personal hygiene messages with staff.	Apply	Apply	Apply
Communications			
<p>Messages to staff via department Secretary or agency CEO:</p> <ul style="list-style-type: none"> • Explain local status. • Explain desirability of normal hygiene procedure. • Incorporate advice from Department of Health & Human Services. • Promote messages for employees to convey to fellow staff members, friends, family, clients and customers. • Provide link to the Department of Health & Human Services website, which links widely to other sites. <p>Note: The whole-of-government pandemic influenza communications strategy will include key messages.</p>	Apply	Apply	Apply
Travel advisories			
Base on Department of Foreign Affairs & Trade advice (www.smartraveller.gov.au).	Apply	Apply	Apply
Business continuity			
Prioritisation of work functions and work with businesses to ensure adequate workforce availability to deliver the departments essential services to the Victorian community.	Apply	Apply	Apply

Initial action response stage – cases detected in Australia, but information about the disease is scarce

Action	Low clinical severity	Moderate clinical severity	High clinical severity
Incident response			
Use existing appropriate staff to monitor the situation and liaise with Department of Health & Human Services and other agencies.	Apply	Apply	Apply
Implement an appropriate Incident Response Team to activate the organisation's response as appropriate to Department of Health & Human Services advice.	Not suggested	Not suggested	Apply
Hygiene measures			
Reinforce personal hygiene messages with staff.	Apply	Apply	Apply
Ensure germicidal wipes are available in stationary supplies for staff to clean personal workspace.	Apply	Apply	Apply
Communications			
<p>Messages to staff via department Secretary or agency CEO:</p> <ul style="list-style-type: none"> • Explain local status • Explain desirability of normal hygiene procedure • Incorporate advice from Department of Health & Human Services. • Promote messages for employees to convey to fellow staff members, friends, family, clients and customers. • Provide link to Department of Health & Human Services website, which links widely to other sites. <p>Note: The whole-of-government pandemic influenza communications strategy will include key messages.</p>	Apply	Apply	Apply
Containment strategies			
PPE usage – the State Controller will provide advice about the appropriate use of PPE.	Not suggested	Apply	Apply
Travel advisories			
Base on Department of Foreign Affairs & Trade advice (www.smartraveller.gov.au).	Apply	Apply	Apply
Business continuity			
Prioritisation of work functions and work with businesses to ensure adequate workforce availability to deliver the departments essential services to the Victorian community.	Apply	Apply	Apply

Targeted action response stage – cases detected in Australia, and enough is known about the disease to tailor measures to specific needs

Action	Low clinical severity	Moderate clinical severity	High clinical severity
Incident response			
Use existing appropriate staff to monitor the situation and liaise with the Department of Health & Human Services and other agencies.	Apply	Apply	Apply
Hygiene measures			
Reinforce personal hygiene messages with staff.	Apply	Apply	Apply
Communications			
Messages to staff via department Secretary or agency CEO: <ul style="list-style-type: none"> • Explain local status. • Explain desirability of normal hygiene procedure. • Incorporate advice from Department of Health & Human Services. • Promote messages for employees to convey to fellow staff members, friends, family, clients and customers. • Provide link to Department of Health & Human Services website, which links widely to other sites. 	Apply	Apply	Apply
Messages to staff via department Secretary or agency CEO: <ul style="list-style-type: none"> • What we are doing (Department of Health & Human Services reaction response explained). • What you need to do (hygiene, travel and behaviour modifications, source for medical advice). <p>Note: The whole-of-government pandemic influenza communications strategy will include key messages.</p>	Not suggested	Not suggested	Apply
Containment strategies			
Restrict public access to premises	Not suggested	Seek advice	Apply
Social distancing	Not suggested	Not suggested	Apply
PPE usage – the State controller will provide advice about the appropriate use of PPE.	Not suggested	Apply	Apply
Travel advisories			
Base on Department of Foreign Affairs & Trade advice (www.smartraveller.gov.au).	Apply	Apply	Apply
Business continuity			
Prioritisation of work functions and work with businesses to ensure adequate workforce availability to deliver the departments essential services to the Victorian community.	Apply	Apply	Apply

Standdown Response Stage – the public health threat can be managed within normal arrangements and monitoring for change is in place

Action	Low clinical severity	Moderate clinical severity	High clinical severity
Containment strategies			
Replace PPE supplies	NA	Apply	Apply
Business continuity			
Implement business continuity plans for resumption of full business capacity.	NA	Apply	Apply

Appendix 2: Resources

National

Commonwealth of Australia 2014, *Australian health management plan for pandemic influenza*
<http://www.health.gov.au/internet/main/publishing.nsf/Content/ohp-ahmppi.htm>

Australian veterinary emergency plan (AUSVETPLAN):
<http://www.animalhealthaustralia.com.au/programs/emergency-animal-disease-preparedness/ausvetplan>

Smart Traveller website, Department of Foreign Affairs & Trade: <http://www.smarttraveller.gov.au>

Victorian

Emergency Management Victoria, *Emergency management manual Victoria*,
<http://www.emv.vic.gov.au/policies/emmy>

Department of Health 2014, *Victorian health management plan for pandemic influenza*,
www.health.vic.gov.au/pandemicinfluenza

Department of Health 2008, *Preparing for an influenza pandemic: a tool kit (and template) for local government* (currently under review)
http://humanswineflu.health.vic.gov.au/downloads/pandemic_tool_kit_web.pdf

Department of Health 2008, *The community support and recovery sub-plan* (currently under review),
http://humanswineflu.health.vic.gov.au/downloads/pandemic_sub_plan_web.pdf

Department of Health 2013, *State health emergency response plan*, <http://www.health.vic.gov.au/sherp>

Business

Commonwealth of Australia 2011, *Being prepared for a human influenza pandemic: a business continuity guide for Australian business*
<http://www.health.gov.au/internet/main/publishing.nsf/Content/ohp-ahmppi.htm>

Commonwealth of Australia 2006, *Being prepared for a human influenza pandemic: a kit for small business* http://www.jumpjet.info/Emergency-Preparedness/Disaster-Mitigation/NBC/Bio/Small_Business_Pandemic_Preparedness.pdf

Commonwealth of Australia 2009, *Pandemic planning in the workplace*
<http://www.sustainabletourisonline.com/awms/Upload/RISK%20&%20CRISIS/Destination%20Risk%20Australian%20Government%20Pandemic%20Planning%20in%20the%20Workplace.pdf>

Commonwealth Department of Social Services 2008, *Building resilience through business continuity and pandemic planning* <https://www.dss.gov.au/our-responsibilities/communities-and-vulnerable-people/publications-articles/building-resilience-through-business-continuity-and-pandemic-planning>

Commonwealth of Australia, *Emergency management and recovery for business*
<http://www.business.gov.au/business-topics/business-planning/emergency-management-and-recovery/Pages/default.aspx>

Portal for Victorian and national information on pandemic plans and resources:
www.health.vic.gov.au/pandemicinfluenza

Portal for useful business continuity management resources
<http://www.dhs.vic.gov.au/funded-agency-channel/management-toolkit/business-continuity-management>

Portal for influenza immunisation for the workplace resources
<http://www.health.vic.gov.au/immunisation/workplace-immunisation.htm>