

**phn**  
WESTERN NSW

An Australian Government Initiative

# healthcare service providers: disaster preparation guidelines



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## INTRODUCTION

**Western Health Alliance Limited**, trading as the **Western NSW Primary Health Network (WNSW PHN)**, is one of 31 Primary Health Networks across Australia, established to support frontline health services and increase the efficiency and effectiveness of primary health care. The WNSW PHN is a not-for-profit organisation primarily funded by the Australian Government.

WNSW PHN's focus is patients who are at risk of poor health outcomes and working to improve the coordination of their care, so that these patients receive the right care in the right place at the right time. WNSW PHN works closely with general practices, other health care providers, Local Health Districts, hospitals and the broader community to align services with the health needs of the region.

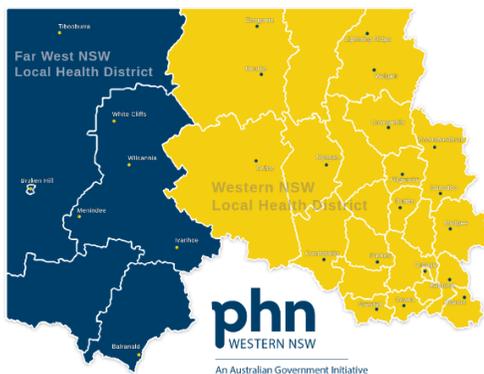
The region covered by the WNSW PHN includes both the Far West and Western NSW Local Health Districts across a total area of 433,379 square kilometres over 26 local government areas (please see the map right).

The total population within WNSW PHN is estimated to be over 309,900 people, with 18.5% over the age of 65 years (ABS, 2016). Approximately 10.5% of people in the region identify as Aboriginal and Torres Strait Islander. WNSW PHN supports 405 General Practitioners that operate from 110 practices within the region.

WNSW PHN's Vision is to support, **strengthen and shape a world class person-centred primary health care system in Western NSW.**

The table below lists WNSW PHN's Priority Areas:

|                          |                                   |  |
|--------------------------|-----------------------------------|--|
| Aboriginal Health        | Maternal and Child Health         | Workforce                                |
| Chronic and Complex Care | Mental Health and Substance Abuse | Access to Services                       |
| Older Person Care        | Risk Factors/Prevention           | Coordination, Integration, Collaboration |



## BACKGROUND AND CONTEXT

Disasters take many forms in the WNSW PHN region, including droughts, bushfires, and supercell storms. Disasters also include incidents where demand is in excess of what can be delivered by the healthcare service providers, including train derailment, bus crashes, plane crashes and mass gathering events for example Bathurst 100 and Elvis Festival.

The table below show the types of disasters and emergencies that may occur within WNSW PHN in which healthcare service providers (GPs, pharmacists, paramedics, local hospitals, nurse practitioners, mental health nurses and psychologists) need to be prepared for and are ready to respond to:

|                  |                    |
|------------------|--------------------|
| Bushfires        | Flu pandemic       |
| Supercell storms | Extreme heat       |
| Snowstorm        | Transport accident |
| Power outages    | Mine accident      |
| Dust storm       | Droughts           |
| Windstorm        | Floods             |

It is important that healthcare service providers are 'disaster-ready' and prepared for not just one or some potential disasters but any and all potential disasters.

Recent disasters such as the 2019 Tasmanian bushfires (affecting the towns of Geeveston and Dover), and the Sir Ivan bushfire at Dunedoo in NSW, had major impacts on the healthcare service providers in their attempt to provide continued care to the community during and after these disasters. WNSW PHN has reviewed and incorporated the lessons learned from these disasters into the development of its Disaster Management Plan and these Guidelines to assist primary healthcare service providers in the region to adequately prepare for a disaster that has the potential to impact them.

The healthcare service providers within WNSW PHN's region also face challenges in providing care to the community. The area within WNSW PHN is predominately rural. Therefore, the ability to get to people within the community and provide care, can be difficult due to distance, logistics and landscape. Further, due to the continual high turnover of staff within the primary healthcare facilities (GPs, nurses and practice staff), it can be difficult for the healthcare service providers to be able to supply care to the community. It is thus critical to document disaster/emergency methodology.

Having an awareness of the types of disasters that could affect healthcare service providers in the region and knowing and reassessing the environment in which health care is provided within the region assists in preparing for a disaster or emergency.

## HEALTHCARE SERVICE PROVIDERS: BECOME DISASTER READY

There are three stages to becoming 'disaster ready'



Local level disaster preparation, by working through each of the stages above, is critical in ensuring as far as possible, that arrangements are in place locally to be able to respond to and recover from a local or regional disaster.

The following information has been developed to **assist healthcare service providers** in assessing their preparedness and readiness for a potential disaster.

### PLAN – preparing for a disaster

|  |   |
|--|---|
| <b>Proactive engagement with emergency planning stakeholders in the area</b>                   | <ul style="list-style-type: none"> <li>Seek representation on or build links with the local emergency planning committee in collaboration with WNSW PHN to obtain information on disaster preparedness.</li> </ul>  |
| <b>Roles and responsibilities</b>  | <ul style="list-style-type: none"> <li>Review the roles and responsibilities in the event of a disaster/emergency which provide support to healthcare service providers in the planning, response and recovery stages. Please refer to the <i>roles and responsibilities</i> section of these guidelines.</li> </ul>  |
| <b>Business continuity planning information is up-to-date, relevant and easily retrievable</b> | <ul style="list-style-type: none"> <li>Develop and embed business continuity plans and any other key emergency documentation and review annually, such as the RACGP Emergency Response Planning Tool (ERPT) – see <b>RACGP resources</b> section below.</li> <li>Nominate a '<i>primary</i>' contact and '<i>secondary</i>' contact within the healthcare provider service in the event of a disaster/emergency.</li> <li>Store hard copies of business continuity plans and any other key emergency documentation – at least one onsite and one offsite.</li> <li>Document and maintain local information so that it can be made available to assist first responders in the event of a disaster/emergency such as: <ul style="list-style-type: none"> <li>The local geography/environment (such as rivers, soil, landscape that may present challenges).</li> <li>The local community (location and contact details) including indigenous community, people with mental health issues, the aged community, and people with disabilities (including support accommodation for adults) .</li> </ul> </li> </ul> |
| <b>RACGP resources</b>   | <ul style="list-style-type: none"> <li>Utilise the ERPT, which is a cloud based, practical online tool that assists general practices to better prepare for, respond to and recover from the impacts of emergencies and pandemics. The tool guides users through a series of planning templates where critical information about the practice can be entered and saved. The information is used to create an emergency response plan which is individually tailored to the general practice. The customised plan is then saved and stored in the cloud and can also be printed as a hard copy resource at any time. A modest, annual subscription is required to access the tool.</li> <li>Review and keep up to date on the RACGP's resources, such as the factsheets on specific emergency related topics.</li> </ul>   |
| <b>Emergency/disaster medical kit</b>  | <ul style="list-style-type: none"> <li>Store an emergency/disaster medical kit ready for GPs in the event of an emergency which supplements the doctor's bag and would assist them in their role in an emergency/disaster.</li> </ul>   |
| <b>GP and Pharmacist Volunteer Register</b>  | <ul style="list-style-type: none"> <li>Create and hold locally an up-to-date GP and Pharmacist Volunteer Register for use in the event of a disaster/emergency.</li> </ul>  |

### RESPOND – during a disaster

|   |  |
|---|--|
| <b>Activation of the ERPT or other business continuity plan</b> | <ul style="list-style-type: none"> <li>Review the process for activation of the ERPT or other business continuity plan to ensure that in the event of a disaster/emergency this will be carried out quickly and efficiently.</li> </ul>          |
| <b>Information bulletins and other relevant information</b>     | <ul style="list-style-type: none"> <li>Review and keep up to date the contact details provided to WNSW PHN to ensure that information bulletins and other relevant information is received from WNSW PHN during a disaster/emergency.</li> </ul> |

### RECOVER – after a disaster

|                              |  |
|------------------------------|--|
| <b>Post disaster debrief</b> | <ul style="list-style-type: none"> <li>Review, in collaboration with WNSW PHN a means of obtaining a debrief after the disaster/emergency has occurred.</li> </ul>   |
| <b>Post disaster support</b> | <ul style="list-style-type: none"> <li>Review, in collaboration with WNSW PHN, a means of obtaining support after the disaster/emergency has occurred, such as: <ul style="list-style-type: none"> <li>Accessing information regarding the reimbursement of out of pocket expenses.</li> <li>Promoting good mental health and available strategies / plans.</li> <li>'Checking-in' with the community to reassess and determine their needs in relation to medicine and mental health care.</li> </ul> </li> </ul> |

## WHAT WNSW PHN IS DOING TO SUPPORT DISASTER MANAGEMENT

The table below sets out **WNSW PHN's roles and responsibilities** in preparing, responding and recovering from a disaster. This allows for a collaborative, efficient and planned approach in an endeavour to achieve the best possible outcomes in the event of an emergency/disaster.

| STAGE  | RESPONSIBILITIES  |
|--|---|
| <b>PLAN</b><br>               | <b>OBJECTIVE ONE: COMMUNICATE, ADVOCATE AND NETWORK</b>   |
|  | Promote disaster planning to all healthcare service providers within WNSW PHN   |
|  | Build networks with other PHNs to share skills, experience and knowledge regarding disaster planning  |
|  | Communicate with the Far West Local Health District (LHD) and the Western NSW LHD to build relationships and share information  |
|  | Liaise with first responder agencies to ensure that local community considerations are included within their emergency/disaster planning  |
|  | Actively network with the Regional Emergency Management Committee (REMC) and Local Emergency Management Committees (LEMCs) to request formal representation on Committees                             |
|  | Liaise with the Far West Emergency Management Officer and District Disaster Manager at the Far West LHD to advocate for WNSW PHN to be included in any relevant existing disaster management planning |
|  | Develop strategies to pursue legislative and policy change across Government regarding emergency and disaster management related issues   |
|  | <b>OBJECTIVE TWO: PROMOTE LOCAL PLANNING</b>  |
|  | Encourage healthcare service providers to have adequate and up-to-date business continuity plans (BCPs) in place such as the RACGP tool   |
|  | Encourage healthcare service providers to store local information on geography/environment and the local community  |
|  | Build capacity amongst local healthcare service providers on preparing for a disaster   |
| Encourage GPs and pharmacists to create and hold locally, an up-to-date GPs and Pharmacists Volunteer Register |   |
| <b>RESPOND</b><br>          | <b>OBJECTIVE THREE: COMMUNICATE AND ESCALATE</b>  |
|  | Enact lines of communication to representatives in other organisations/agencies involved in the event of a disaster/emergency   |
| <b>RECOVER</b><br>          | <b>OBJECTIVE FOUR: DEBRIEF, SHARE LEARNINGS AND EVALUATE</b>  |
|  | Facilitate a 'hot' post disaster debrief (within 24 hours) and a 'cold' post disaster debrief (within three months) to:   |
|  | <ul style="list-style-type: none"> <li>The service providers within WNSW PHN</li> <li>PHN staff</li> <li>The community (as appropriate)</li> </ul>  |
|  | Provide appropriate support to those who assist in a disaster / emergency   |
|  | Review and evaluate the effectiveness of WNSW PHN's role in a disaster  |

## DOCUMENT MANAGEMENT

### APPROVAL HISTORY

| STAGE                   | DATE     | COMMENT               | REFERENCE |
|-------------------------|----------|-----------------------|-----------|
| Original Plan           | Dec 2019 | Endorsed by the Board | Version 1 |
| Current Plan (in force) | Dec 2019 | Endorsed by the Board | Version 1 |
| Next review             | Dec 2020 |                       |           |

### OWNERSHIP AND APPROVAL

| RESPONSIBILITY | ROLE                        |
|----------------|-----------------------------|
| Owner          | The Chief Executive Officer |
| Approver       | The Board                   |

For further information on the disaster preparedness measures that can be taken to become 'disaster ready' please contact WNSW PHN using the details below.



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