



Pandemic Planning Framework

ACT Government
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Australian Capital Territory Government Pandemic Planning Framework

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Australian Capital Territory Government

Pandemic Planning Framework

Background

Pandemics are epidemics of disease which occur on a world wide scale. The World Health Organisation (WHO) has reported that the world is moving closer to an influenza pandemic.

An influenza pandemic occurs when a new influenza virus subtype emerges to which there is little or no human immunity. It is easily spread between humans and is capable of causing severe disease in humans and can rapidly spread across the globe with high numbers of cases and deaths.

Previous Pandemics

Previous influenza pandemics have caused large-scale illness, deaths and socio-economic impacts worldwide. Three pandemics occurred in the previous century:

- "Spanish influenza" in 1918 - estimated 40-50 million deaths;
- "Asian influenza" in 1957 - estimated 2 million deaths; and
- "Hong Kong influenza" in 1968 - 1 million deaths.

It is not possible to predict when the next pandemic will occur or how long it will last. There is, however, concern that an avian influenza virus strain known as H5N1 and commonly known as 'bird flu', may mutate and trigger a human influenza pandemic.

Phases of Pandemic Influenza

The WHO has studied closely the development of previous pandemics and developed a model of the phases of pandemic development which are grouped into three broad periods:

- In the early or **interpandemic period** (phases 0-2), a new form of the influenza virus emerges in animals and the risk of transmission to humans increases.
- In the intermediate or **pandemic alert period** (phases 3-5), the virus is first transmitted to humans and starts to be transmitted between humans in smaller and larger clusters (geographical areas).
- In the **pandemic period** (phase 6), the virus is in final pandemic form and spreads easily between humans, causing widespread illness and possibly deaths.

These phases are shown in Figure 1. The length of each phase is uncertain, but the **pandemic period** (phase 6) could come in several waves of up to 12 weeks each.

Figure 1 World Health Organization (WHO) phases of pandemic influenza

		Period	Global phase	Australian phase	Description of phase	
RECOVERY	PREVENTION AND PREPAREDNESS	Inter-pandemic	AUS 0		No circulating animal influenza subtypes in Australia that have caused human disease	
			1	Overseas 1	Animal infection overseas: the risk of human infection or disease is considered low	
				AUS 1	Animal infection in Australia: the risk of human infection or disease is considered low	
			2	Overseas 2	Animal infection overseas: substantial risk of human disease	
				AUS 2	Animal infection in Australia: substantial risk of human disease	
			Pandemic Alert	3	Overseas 3	Human infection overseas with new subtype/s but no human to human spread or at most rare instances of spread to a close contact
					AUS 3	Human infection in Australia with new subtype/s but no human to human spread or at most rare instances of spread to a close contact
				4	Overseas 4	Human infection overseas: small cluster/s consistent with limited human to human transmission, spread highly localised, suggesting the virus is not well adapted to humans
					AUS 4	Human infection in Australia: small cluster/s consistent with limited human to human transmission, spread highly localised, suggesting the virus is not well adapted to humans
	5	Overseas 5		Human infection overseas: larger cluster/s but human to human transmission still localised, suggesting the virus is becoming increasingly better adapted to humans, but may not yet be fully adapted (substantial pandemic risk)		
		AUS 5		Human infection in Australia: larger cluster/s but human to human transmission still localised, suggesting the virus is becoming increasingly better adapted to humans, but may not yet be fully adapted (substantial pandemic risk)		
	Pandemic	6		Overseas 6	Pandemic overseas: increased and sustained transmission in general population	
				AUS 6a	Pandemic in Australia: localised (one area of country)	
				AUS 6b	Pandemic in Australia: widespread	
			AUS 6c	Pandemic in Australia: subsiding		
			AUS 6d	Pandemic in Australia: next wave		
	RECOVERY					

Current Pandemic Alert

There have been recent outbreaks of the H5N1 avian influenza virus in wild birds and poultry in Asia, Europe and Africa, and transmission from birds to humans in some cases following very close contact.

The WHO has declared that the world is currently in phase 3 – that is, human infection with a new subtype but no human to human spread or at most rare instances of spread following close contact.

Australia is currently at Australian Phase 0 with no circulating animal influenza subtypes causing human disease.

Further information relating to the current status of avian influenza can be obtained at the WHO website http://who.int/csr/disease/avian_influenza/en/index.html

Australian approach to World Health Organisation pandemic phases

The Commonwealth's *National Action Plan for Human Influenza Pandemic* follows the WHO pandemic phases, set out in Figure 1. All states and territories have agreed to work together and approach the emergency management of a potential influenza pandemic using an Australian adaptation of the prevention, preparedness, response and recovery mapped by the WHO pandemic phases.

State and Territory recovery arrangements will focus on implementing strategies to reduce the rate of spread of a pandemic and delay the peak and its effects for as long as possible. Containing the virus will minimise the numbers of sick or dying, minimise the peak demand on health services and allow time for the development of a pandemic vaccine.

Purpose of the Framework

The ACT Government Pandemic Planning Framework describes the strategic approach and preparations which would be required to minimise the impacts on the ACT community should an influenza (flu) pandemic occur.

It outlines the possible impacts of a flu pandemic on the ACT and identifies broad measures and strategies to protect the community.

Aim

The aim of the Framework is to guide and support integrated contingency planning for a flu pandemic to minimise the impact of a pandemic on the ACT community.

Scope

The Framework provides guidance to Government agencies and the community in order to keep essential services operational. It focuses on the occurrence of human cases of pandemic influenza.

The ACT Framework is designed to complement existing emergency management arrangements including:

- **The ACT Health Management Plan for Pandemic Influenza;**
- **The ACT Emergency Plan;** including the following two functional sub plans
- **The ACT Media and Communications Emergency Plan;**
- **The ACT Community Recovery Plan** and
- other specific ACT plans and frameworks including those relating to workforce planning.

It will be important in the event of a pandemic that the Commonwealth and ACT Governments work closely in responding to an influenza pandemic as the ACT is in a unique position given that it plays host to Parliament and a significant proportion of the Australian Public Service.

Planning Objectives

In planning and preparing for an influenza pandemic, the ACT Government's strategic objectives are to:

- assist the community, businesses and ACT Government agencies prepare for and respond to a pandemic;
- minimise the spread of a new virus and limit illness and death;
- maintain community law and order;
- assist maintenance of essential services and preserve continuity of services;
- minimise the economic and social consequences; and
- aid the community's recovery from a pandemic.

It is also recommended that businesses and non-government organisations consider and plan for the impacts that influenza pandemic may have on their operations.

Support for business continuity planning can be found at <http://www.industry.gov.au/pandemicbusinesscontinuity/>.

Planning Assumptions

It is difficult to accurately forecast all of the potential impacts of a flu pandemic. The numbers of people who have died, have needed medical attention or have been unable to work during other pandemics in the past have differed by an order of magnitude.

The following assumptions, informed by international and national research of previous pandemics have been considered in the development of the Framework:

- susceptibility to a pandemic influenza virus will be universal;
- the spread of disease can be limited by prevention and preparedness actions;
- the pandemic may occur in waves with the second wave occurring many months after the first;
- rates of absenteeism can be expected to be in the order of 25% to 40%;
- the development of an effective vaccine may take some months;
- antiviral medications will be in short supply; and
- a pandemic could cause significant economic and societal disruption.

Risk groups for severe and fatal infection cannot be predicted with certainty but are likely to include infants, the elderly, pregnant women, and persons with chronic or immunosuppressive medical conditions.

In a severe pandemic, absenteeism attributable to illness, the need to care for ill family members, and fear of infection may reach 40% during the peak 6 -8 weeks of a community outbreak. Certain public health measures (closing schools, quarantining household contacts of infected individuals) are likely to increase rates of absenteeism.

Implementing a pandemic response relies on the use of existing quarantine and public health powers under Commonwealth and ACT public health and quarantine legislation. The implementation of social distancing and quarantine measures in particular will have human rights implications.

The ACT Government's response to a pandemic will be proportionate, recognising that the limitation of, and derogation from, human rights is appropriate in the particular circumstances of a major disease outbreak.

ACT Government agencies will nevertheless look to ensure that their actions are undertaken with full respect for the dignity, human rights and fundamental freedoms of persons.

The Hazards and Possible Impact on the ACT

The possible effects of an influenza pandemic depend directly on the nature of the strain of virus that emerges and are extremely difficult to accurately quantify.

Should the ACT experience outbreaks of bird flu or other influenza pandemic strains the following impacts are likely to be experienced.

Health Impacts

- A significant proportion of the population will be unwell and unable to undertake normal daily activities.
- Demands for health-care related to the pandemic will be significant.
- Special health-care arrangements will be required to be activated.
- ACT Health will require support from both government and non-government agencies in order to maintain infection control policies (such as home quarantine), provide goods, personnel and security.
- Mental health issues may arise 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.

Community Impacts

- Absence due to the pandemic among employees or their family members, may threaten the supply of critical community services, such as water supply, waste disposal, sanitation, and maintenance of infrastructure.
- If there are a large number of deaths, funeral and burial services may not meet community expectations.
- Orders to close schools, businesses or entertainment venues will disrupt community life.
- School and childcare centre closures will have a disproportionate impact on women and parents.
- Demand may outstrip supply for certain goods.
- Community confidence in government may diminish.
- Some community groups may have difficulty accessing and receiving services during a pandemic – these include, but are not limited to, migrant groups, communities in rural and remote location and aboriginal groups.
- Accommodation and support will be required for those in imposed quarantine or isolation particularly dependent family and friends and isolated tourists.
- Work and community activities will be disrupted.

Social Impacts

- People may choose, or be required to isolate themselves and their families – this may cause general social disruption, impact adversely upon businesses and may lead to voluntary population movement from urban centres to rural areas (social segregation).
- Vulnerable people (the elderly, socially isolated, homeless and people reliant on home based care services) may require increased support, while carers may be unable to perform their usual role.
- A new group of first time carers may emerge without limited experience in the role and requiring additional assistance from carer support services.
- Volunteer services may be impacted on, as will the capacity of recovery services which rely on volunteer resources..
- The work environment may change during a pandemic due to large numbers of staff choosing or requesting to stay at or work from home and there may be changes in work practices and environments to limit the spread of disease.
- People who are sick or required to be in home quarantine will need support to stay at home – both physical (ensuring they have essential needs supplied) and financial (to compensate for loss of income)
- Public transport and private travel may be significantly impacted.
- Law and order issues may arise as people become anxious about the security and safety of their environment
- There will be a strong reliance on government for timely, accurate information, the provision of an effective health response and delivery of priority services.

Economic Impacts

- Business activities may be disrupted which could result in some business failure.
- There is the potential for loss of existing employment.
- Sudden shifts in demand for goods and services may occur.
- There is the possibility of reduced cash flow in the community as people stay at home or have less money to spend due to reduced income.
- Rationing of essential goods and services may need to occur.
- Worldwide economic disruption may have flow on impacts on Australian financial markets.
- There may be an extensive economic recovery period.

Planning for an Influenza Pandemic

The ACT Government's Key Roles and Responsibilities

As set out in the Commonwealth *National Action Plan for Human Influenza Pandemic* the ACT Government is required to:

- determine and maintain pandemic influenza and related policies, legislation and plans within the Territory's jurisdictions;
- work with the Commonwealth Government and other jurisdictions, reporting outbreaks of pandemic influenza and actions taken;
- maintain pandemic influenza response and recovery capability, in line with the *National Action Plan* and the *Australian Health Management Plan for Pandemic Influenza*;
- have primary operational responsibility for animal health monitoring, surveillance and response within the ACT;
- have primary operational responsibility to respond to an outbreak of pandemic influenza in the ACT;
- implement agreed preparedness and prevention strategies in line with the *National Action Plan* and the *Australian Health Management Plan for Pandemic Influenza*;
- seek assistance from or provide assistance to other jurisdictions if required;
- contribute to the national strategy for response and recovery;
- maintain public health surveillance and technical advice;
- maintain business continuity plans to enable the delivery of government essential services;
- maintain cooperative relationships with the owners and operators of critical infrastructure to facilitate industry preparedness, continued operation and recovery from a pandemic;
- administer emergency management arrangements within the ACT;
- work with business, and the community to respond to and recover from an influenza pandemic;
- inform the public of planning and preparation underway and maintain information to the public during the response to and recovery from an influenza pandemic; and
- work with the Commonwealth Government to develop public education material.

In the event of influenza pandemic the *ACT Emergency Plan* in conjunction with the *ACT Health Management Plan for Pandemic Influenza* and the *ACT Community Recovery Plan* will guide response and recovery efforts. National Plans and those developed by the NSW Government will also be important sources of information and guidance.

Health Planning in the ACT

The ACT health sector has been actively preparing for a pandemic since 2003 with the original ACT Influenza Pandemic Plan prepared in 2004.

An updated plan, *ACT Health Management Plan for Pandemic Influenza 2007* has been prepared for release following the significant work undertaken by the ACT Influenza Pandemic Action Committee.

This plan provides an overarching framework which compliments the *Australian Health Management Plan for Pandemic Influenza 2006* (Commonwealth) and provides information on:

- the ACT health sector operational plans and procedures as part of the subplan to the current *Health Services Emergency Management Plan*;
- how the health sector in the ACT is preparing for the possibility of an influenza pandemic; and
- key health-related concepts to assist individuals, community organisations and businesses undertake their own preparations for a pandemic.

In the event of a pandemic ACT Health will be supported by other services, as needed to provide temporary shelter for those waiting to be assessed for health care or vaccination, crowd control, security of medical supplies and staff, transport of goods and service, translation services and provision of infrastructure.

The *ACT Health Management Plan for Pandemic Influenza* can be found at <http://www.health.act.gov.au>

Whole of Government Planning and Coordination in the ACT

In preparation for such an alert an **ACT Influenza Pandemic Interdepartmental Working Group** has been established to guide activities in the prevention and preparedness phase including planning activities relating to matters such as:

- Essential and Emergency Services;
- Communication and Public Education;
- Continuity for Executive Government;
- ACT Public Service Workforce Continuity;
- Community Recovery; and
- Cross border and Intergovernmental arrangements during a pandemic.

Appendix A provides an overview of the issues under consideration relating to ACT Public Sector Workforce Continuity in the Territory in the event of a pandemic.

ACT Government Priorities in the event of a Pandemic

The following are considered to be of the highest priority in the event of a pandemic within the ACT:

- a focussed effort to achieve containment of the pandemic;
- maintenance of health services including hospitals, quarantine facilities, ambulance services, aged care facilities, primary care services, counselling services and services for populations at risk;
- maintenance of mortuary services (identification, certification, religious practices, storage, burials and cremations);
- accommodation and services for displaced persons;
- maintenance of law and order;
- maintenance of key infrastructure, communications networks and municipal services; and
- continuity of Government, cooperation and interdependency between agencies.

The order of priority will be determined according to the scope and severity of the pandemic.

Responsibilities within ACT Government upon Declaration of Global Phase 4

The ACT Government would consider activating ACT legislation and associated provisions should a pandemic alert reach Global Phase 4. The Prime Minister is required to make an official declaration advising of a pandemic once the Global Phase 4 alert is declared by WHO.

It is a first assumption in relation to pandemic that the primary response will be in relation to health services however it will be necessary for all ACT Government agencies to be involved to support whole of government coordination in responding to a pandemic.

Each ACT Government agency will need to refine its business continuity plan to incorporate the specific actions that individual agencies will take in response to an influenza pandemic.

The following broadly outlines agency responsibilities in responding to an influenza pandemic.

ACT Health

- Co-ordinate the health sector response to a pandemic
- Disseminate information on human health through local communication channels
- Advise on infection control and social distancing measures appropriate to the pandemic strain of influenza
- Co-ordinate the distribution and use of the national and territory medical stockpiles in the ACT

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- Disseminate information on human health through the National Health Emergency Media Response Network

The Chief Health Officer has a delegated role (from the Director of Human Quarantine, the Chief Medical Officer) as ACT Chief Quarantine Officer. The Chief Health Officer also has delegations under the *Public Health Act 1997* in regard to taking measures necessary to alleviate the public health hazard/emergency.

Chief Minister's Department

- Support across government arrangements and coordination
- Support the Security and Emergency Management Cabinet and participate in the COAG National Pandemic Emergency Committee
- Provide advice regarding public service business continuity and support dealing with public sector employment issues (leave, work from home provisions, temporary transfer capabilities and entitlements)
- Provide across government communications throughout the emergency

Department of Disability, Housing and Community Services

- Manage and coordinate community recovery responsibilities
- Coordinate the planning for care of vulnerable groups during a pandemic
- Continue to fulfil statutory responsibilities in relation to such matters as licensing of child care centre, children in care and children in detention
- Liaise with the recovery groups regarding extraordinary housing provisions that may be required in an influenza pandemic
- Liaise with community organisations to provide personal support services to individuals affected by the pandemic, including counselling services
- Maintain the *ACT Community Recovery Plan* including links with Commonwealth agencies

Department of Education and Training

- Plan for potential school and other educational facility closures during the response phase of a pandemic
- Identify response support capabilities during a pandemic
- Make accommodation available during a pandemic to support the pandemic response or recovery operations

Department of Justice and Community Safety

- Plan for contingencies and maintain the legal system including courts, tribunals and law making during a pandemic
- Work with respective agencies regarding pandemic health and planning issues
- Provide legal advice to government agencies throughout the phases of a Pandemic
- Work with the judicial/correctional services group regarding pandemic health and planning issues

Emergency Services Agency

- Provide a basis for: emergency management; coordination of emergency service agencies; coordination of Territory, Commonwealth and state agencies; coordination of other entities
- Contribute to planning working groups, especially those regarding public information or those groups considering using emergency services personnel or equipment
- Provide support to ACT Health during pandemic response and recovery

Australian Federal Police – ACT Policing

- Assist with public order issues that may arise from a pandemic
- Plan and implement security of the Territory Medical Stockpile in cooperation with ACT Health

Department of Territory and Municipal Services

- Key point of community contact - Canberra Connect
- Plan to minimise disruption to essential municipal services
- Plan for the potential shut down of the Territory public transport network
- Respond to animal health emergencies resulting from a pandemic

Department of Treasury

- Support across government arrangements and coordination
- Manage budgetary impacts and implications over time
- Process requests for extra financial resources required by Government departments to execute planning or response responsibilities
- Liaise with the Commonwealth regarding financial arrangements for pandemic disaster relief

Shared Service Centre

- support across government ICT services
- maintain human resource and financial services

It is the responsibility of each ACT Government agency to prepare a business continuity plan to ensure that essential services to the ACT community and the executive government are continued.

Continuity across the ACT Public Service

Unlike other disruptive events that business continuity plans normally address, an influenza pandemic may have no direct effect on physical infrastructure and assets. By contrast, an influenza pandemic will directly affect people's health and well-being, and potentially the roles that people perform in the ordinary course of employment and business, and their family and social life.

The full impact of a pandemic on the workplace will depend on the severity of the pandemic, the nature of the agency and its planning preparations. The most significant impact on government and business is likely to be a shortfall in the workforce due to illness, carers responsibilities and social distancing measures.

It is recommended that agencies prepare a list of essential services and the core skills needed to conduct them, as well as a second list of services that can be deferred in an emergency. These lists should also be tested for different parts of the year – end of financial year, Christmas/New Year, school holidays etc.

Further, a list of essential personnel, those who can replace them if necessary and those who can be redeployed to other sections or agencies placed under stress due to an impending or real pandemic. In preparation agencies may wish to implement some crossover training that will enable essential services to be maintained.

Appendix A highlights some of the workforce issues agencies may face in the event of a pandemic.

SUMMARY OF PANDEMIC WORKPLACE CONTINUITY ISSUES

Interagency staff transfer	<p>Powers available to:</p> <ul style="list-style-type: none"> • Move employees within an agency or to an alternative location • Assign employees to temporary duties at higher/lower level • Move employees temporarily between agencies • Enable agencies to engage persons quickly to meet short term needs • Rights of review for an employee in any of these circumstances
Attendance & Supporting Remote Workers	<ul style="list-style-type: none"> • Arrangements for staff who may need to work remotely (IT restrictions and guidelines; setup time and cost) • If public transport is closed some staff may not have access to other transport • Arrangements following the need for workplace closures • Temporary and casual replacement staff arrangements • Payment arrangements to compensate staff for additional work/personal costs • Special payments for out of hours or on call requirements
Absence	<ul style="list-style-type: none"> • Types of leave available to ACTPS during a pandemic • Provisions for emergency pandemic leave • Requirements for medical certificates • Pay issues associated with staff choosing not to attend work • Agency options for sending sick employees home • Increased workload in processing leave applications
OH & S issues	<ul style="list-style-type: none"> • Provision of training for staff undertaking work outside of normal duties • Supporting off site work from home • Issues relating to shiftwork and workload increases following agency Business Continuity Plan Implementation • Accommodation for essential employees • Assessments for home-based work arrangements • Ensuring sick staff are sent home/stay at home • Personal protective equipment requirements • Staff education and personal hygiene training

National Coordination Arrangements

The Commonwealth, State, Territory and Local Governments have agreed to work together, in partnership with the community and business, to minimise the spread of illness, loss of life, social impacts and economic disruption that would be caused by influenza pandemic.

All Governments will cooperate under Australia's emergency plans. To the greatest extent possible, government responses will be consistent nationally, while taking into account local needs and requirements.

Where the need arises and resources are available, the Commonwealth, State and Territory Governments have agreed to support each other through combined resources.

National Planning documents and bodies

In 2006 the Department of Prime Minister and Cabinet released a *National Action Plan for Human Influenza Pandemic*, and in 2007 a series of stand alone appendices, including one focussing on *Pandemic Planning in the Workplace*.

The *National Action Plan for Human Influenza Pandemic* outlines how Commonwealth, State, Territory and local governments will work together to protect Australia against the threat of an influenza pandemic and support the Australian community should one occur. The Council of Australian Governments (COAG) is responsible for the National Action Plan for Human Influenza Pandemic.

In 2006 the Department of Health and Ageing released the *Australian Health Management Plan for Pandemic Influenza and a series of annexes, including pandemic infection control* and clinical guidelines.

Additionally, the Department of Industry, Tourism and Resources released *Being Prepared for a Human Influenza Pandemic – A Business Continuity guide for Australian Businesses*, and an associated kit for small business.

This Framework supports the *National Action Plan* and broadly outlines how individual ACT Government agencies will work together to prepare for, and respond to, an influenza pandemic.

ACT Legislation and Powers

ACT Public Health Act 1997

This Act gives authority to the ACT Minister of Health to declare in writing a public health emergency. The Act allows the Chief Health Officer to take any action that s/he considers necessary to alleviate a public health hazard including a wide range of quarantine measures including segregating or isolating persons.

In addition to the Act, the *Public Health Regulations 2000* (Division 2.5) requires persons with transmissible notifiable conditions, or people responsible for persons with a transmissible condition, to take reasonable precautions (appropriate to the condition) against transmitting the condition.

ACT Emergencies Act 2004

The ACT utilises the same set of management structures to manage all types of emergencies under an ALL HAZARDS APPROACH. This approach means that all types of emergencies, disasters or civil defence matters are dealt with using set emergency arrangements.

In accordance with the *ACT Emergencies Act 2004* this includes but is not limited to, flood emergency, storm emergency, bushfire emergency, urban fire emergency, chemical or hazardous material incident, disease or epidemic emergency, aircraft accident and hospital emergency or evacuation by ambulance and response and management of a terrorist related incident.

The *Emergencies Act 2004* contains a number of strategic mechanisms to manage emergencies and their consequences before, during and after they occur. The Act provides for the Chief Minister to declare a State of Emergency and appoint an appropriate Territory Controller to manage the presenting emergency.

The ACT Emergency Plan

The ACT Emergency Plan outlines responsibilities, authorities and the mechanisms to prevent, or manage emergencies and their consequences within the ACT in accordance with the statutory requirements of the *ACT Emergencies Act 2004*.