



WACHS COVID-19 Emergency Management Framework

1. Purpose

The WACHS COVID-19 Emergency Management Framework provides an overarching description of the WACHS response to the COVID-19 pandemic in line with State legislation, policy and direction, including the WA Health COVID-19 Framework for System Alert and Response.

2. Framework

Planning Principles

The key principles applied to managing the COVID-19 pandemic are:

- Vaccination promotion
- Transmission minimisation
- Healthcare worker exposure minimisation
- Initial case and contact management
- Proportionate response
- Key service continuity
- Maintaining safe, quality care
- Risk reduction to vulnerable people
- Robust reporting systems

The planning response to COVID-19 is underpinned by a number of assumptions about COVID-19 and the WA health system:

- Vulnerable risk groups are more susceptible to COVID-19 infection and/or hospitalisation
- COVID-19 infection rates will occur in different locations at different times
- Staff absenteeism may increase due to health issues, carer responsibility, and/or concern and anxiety of the impact of COVID-19 in their community or family
- The pandemic will have multiple impacts for WACHS regions i.e. health, social, economic

Emergency Legislation, Policy and Guidance

This Framework is informed by key legislation, policy and guidelines listed below.

Legislation	National Policy and Guidance	State Policy and Guidance
<i>National Biosecurity Act 2015 (Australia)</i> <i>Emergency Management Act 2005 (WA)</i> <i>Health Services Act 2016 (WA)</i> <i>Public Health Act 2016 (WA)</i>	Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19) Australian Guidelines for the Prevention and Control of Infection in Healthcare (2019) Australian College of Emergency Medicine Clinical Guidelines for the Management of COVID-19 in Australasian Emergency Departments Coronavirus Disease 2019 (COVID-19) CDNA National guidelines for public health units (COVID-19 CDNA National Guidelines) 2008 Ethical Framework by Australian Health Protection Principal Committee (AHPPC)	State Emergency Management Plan State Emergency Management Policy State Hazard Plan Human Biosecurity Western Australia Government Pandemic Plan Infectious Disease Emergency Management Plan, WA Health System, 2017 WA Interim Respiratory Infectious Diseases Emergency Response (RIDER) Plan 2020 WA Department of Health Coronavirus Disease – 19 Infection Prevention and Control in the Hospital Setting

Alignment with the State Emergency Management Planning

The [State Emergency Management Plan \(SEMP\)](#) documents the all-hazard (natural and man-made) emergency management arrangements in the State and identifies public authorities and other organisations with roles and responsibilities under these. The SEMP, State Hazard Plans ('Westplans') and State Support Plans establish roles and responsibilities for the response to an emergency and support the Hazard Management Agency (HMA) in response to the emergency.

The SEMP details four principles of emergency management: Prevention, Preparedness, Response and Recovery, whilst the [Infectious Disease Emergency Management Plan \(IDEMP\)](#) outlines how the WA health system will prepare and respond to COVID-19.

Defining Command, Control and Coordination

In a declared 'emergency' a 'command and control' structure comes into effect and will augment the usual governance and management structures throughout an organisation. Under the principles of disaster management, the emergency management arrangements operate vertically and horizontally include the following elements:

- Command - operates vertically and provides direction to State agencies
- Control - operates horizontally across all organisations and provides overall direction for emergency management activities

- Coordination - operates both vertically and horizontally and brings together organisations and other elements to enable command and control of the response.

With the COVID-19 pandemic, the declared state of emergency is extensive, occurring across government and non-government, throughout the community and private industry.

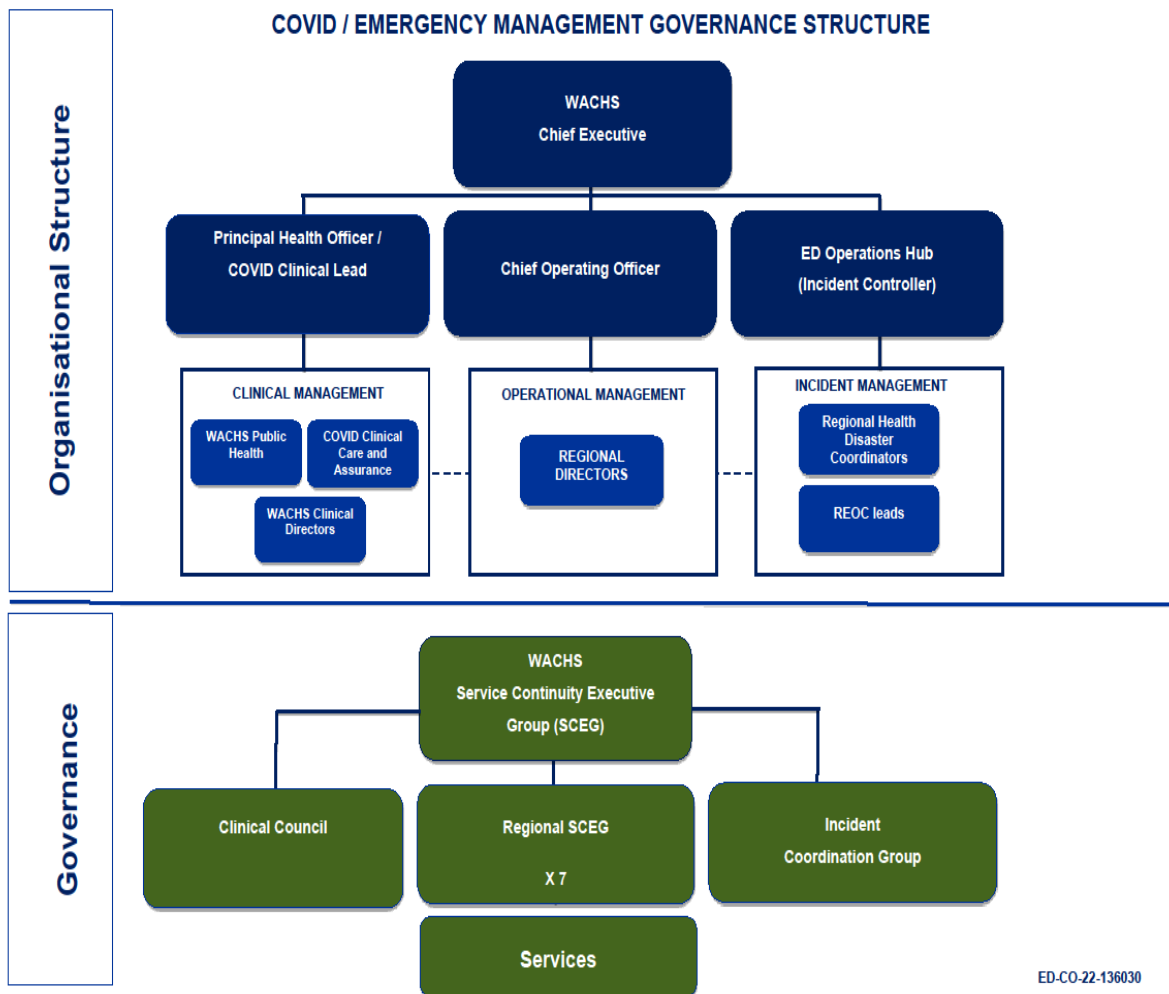
For the WA COVID-19 response, Health is the Hazard Management Agency (HMA) directing the response, and Police is the Coordination agency.

The WACHS COVID-19 Emergency Response Structure

WACHS is an extension of the operational area of the State response (State Incident Management Team) and takes direction from the Incident Coordinator (IC). The WACHS Operations Hub (EOC) coordinates how this direction is applied across the seven regions. The Chief Executive (CE) is responsible for WACHS emergency management arrangements in conjunction with the Executive Director Operations Hub and key Executive leads including Regional Directors.

WACHS Ops Hub (EOC) is agile; resourced to respond and flexible to meet operational requirements. Operations Hub Stream Leads coordinate the essential functions of Ops Hub (EOC) under the coordination of the WACHS Executive Director Operations Hub.

Each WACHS region has a Regional Director responsible for the Regional Service Continuity Group (including REOC lead) which coordinates the regional level response and subsequently Local EOCs operate under the direction of the REOC and are responsible for managing the local response.



The [WACHS Overarching Model of Care for the COVID-19 Pandemic](#) describes the models of care and clinical services provided by WACHS in the context of COVID-19. This document addresses patient flows from attendance/admission to discharge that have been introduced or amended in response to COVID-19. The document provides:

- Overarching COVID-19 response principles
- The patient journey for the duration of COVID-19
- A framework to connect COVID-19 policies, processes and guidance documents that have been developed by the Commonwealth Department of Health, WA Health and WACHS.
- A framework for regional and local site process development

The [WA Health COVID-19 Framework for System Alert and Response \(SAR\)](#) describes the processes and interventions developed for the WA public hospital system to respond to the risks posed by COVID-19.

The SAR provides overarching guidance for public hospitals to manage and mitigate the risks associated with COVID-19 transmission. This will help protect patients and maintain appropriate and safe care to all patients, visitors and staff.

Those leading WA Health's COVID-19 response will use current WA COVID-19 case data, vaccination rates and service delivery intelligence for geographical areas to aid decision making on alert and response levels at a state-wide, regional or local level.

The SAR outlines activities and actions which should be taken by health services in response to changing levels of risk:

GREEN: COVID ready	No to very limited and stable case numbers in the community with satisfactory vaccination rates and testing capacity
AMBER: COVID-19 alert	Disease in community with growing spread and risk and/or concerns over vaccination rates and/or testing capacity
RED: Widespread transmission	Widespread transmission: increasing and high rates of community transmission of COVID-19
BLACK: System at capacity	Service demand exceeds COVID-19 service response capacity

Each WACHS site will be managed in accordance with the SAR level of risk.

To support the regional response WACHS has published a set of COVID-19 Clinical Frameworks. These frameworks are published on the [SharePoint COVID-19 Clinical and Non-Clinical Management Page](#) and support the care of patients within clinical areas including:

- Emergency Department
- Aged Care
- Cancer Services
- Obstetrics
- Outpatients
- Palliative Care
- Renal Services
- Surgical Services
- Mental Health
- Inpatients

Information for Health Clinicians and Other Staff

Regular disease summary updates, clinical updates and situation reports will be provided by WA Health and WACHS to ensure staff have contemporary information. These include:

- [Transition policies and resources for healthcare workers](#)
- [DoH COVID-19 Information for health professionals](#)
- [DoH Clinician alerts](#)
- [SharePoint WACHS Coronavirus \(COVID-19\) Page](#)
- [WACHS COVID-19 Vaccine Program](#)

Infection Prevention and Control (IP&C)

Standard precautions are applied to all patients in healthcare settings and include appropriate hand hygiene, respiratory etiquette, personal protective equipment (PPE) use, sharps management and waste and linen management. Transmission based contact and airborne precautions are implemented for all patients with suspect or confirmed COVID-19. WACHS endorses the use of the:

- [Coronavirus Disease-2019 \(COVID-19\) Infection and Prevention Control in the Hospital Setting](#)
- [Communicable Disease Network Australia \(CDNA\) Coronavirus Disease 2019 \(COVID-19\) National Guidelines for Public Health Units](#)

Workforce Planning

Delivering safe healthcare as well as protecting patients, families and staff is the priority of all WACHS staff. WACHS has developed several resources to ensure service continuity and maintain workforce capacity through the COVID-19 response.

To support workforce stability and to assist in managing the risk of service disruption, WACHS has established a graduated response for enacting Rapid Response Teams (RRTs) at short notice (24-48 hours). The first response will continue to be the BAU process to manage shortfalls. This will continue to be enacted in the first instance and should align with Regional Business Continuity Plans (BCPs) and Surge Plans. The site or unit impacted will look at immediate short-term rostering changes to cover the short notice deficit. If they are unable to find short term local solutions this issue will be escalated to the REOC.

The REOCs will look to manage the shortfall drawing from other sites within the region and referring to the list of staff identified in the WACHS workforce expression of interest. If regionally they are unable to resolve the shortfall the REOC/regional executive can escalate the request for staff to all regions. If unresolved the issue can be further escalated to the Ops Hub, Workforce Stream. There is a pool of staff for rapid deployment and WACHS is collaborating with metropolitan HSPs and the Command Centre for workforce support.

Staff Wellbeing

In the COVID-19 context it is essential that WACHS supports staff mental health and wellbeing. Resources support workforce resilience and capacity to maintain delivery of care in a challenging environment. Resources can be found at:

- [Occupational Health and Safety](#)
- [HR Matters – COVID-19](#)

Surge Planning

All WACHS facilities will have business continuity plans (BCPs) that identify critical activities that must continue to be delivered during the pandemic, and less critical activities that can be temporarily suspended or reallocated to other work areas if workforce and health facility resources are stretched.

Regional COVID-19 surge plans include staged strategies to:

- Increase health facility and hospital bed capacity
- Maximise number of staff available for direct patient care
- Maintain continuity of care for patients with chronic diseases, obstetric and emergency services and other non COVID-19 care
- Review and maintain enough pharmacy, equipment and stores supplies
- Escalate transfer of patients with COVID-19 to designated regional and/or tertiary facilities where clinically indicated

3. Roles and Responsibilities

All Staff are required to work within policies and guidelines to make sure that WACHS is a safe, equitable and positive place to be.

4. Monitoring, compliance and evaluation

Failure to comply with this policy may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Integrity Policy Framework](#) issued pursuant to section 26 of the [Health Services Act 2016](#) (WA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies is mandatory.

5. Document summary:

Coverage:	WACHS-wide
Audience:	E.g. All Staff; Policy Developers, Executive Sponsors
Records Management	Non Clinical: Records Management Policy Clinical: Health Record Management Policy .
Related Legislation:	Health Services Act 2016 (WA) ; Emergency Management Act 2005 (WA)
Related Mandatory Policies / Frameworks	Clinical Governance, Safety and Quality Policy Framework ; Public Health Policy Framework
Related WACHS Policy Documents	WACHS Overarching Model of Care
Other Related Documents	
Related Forms	
Aboriginal Health Impact Statement Declaration (ISD)	This policy document does not stipulate the cultural or clinical needs of Aboriginal people.
National Safety and Quality Health Service (NSQHS) Standards	3.02(g); 3.14(e); 3.16(h)

6. Document control:

Policy Owner:	Executive Director Clinical Excellence
Co-approver:	Executive Director Strategy & Change
Contact:	WACHS Operations Hub
Business Unit:	WACHS Operations Hub
Version:	1.0
EDRMS #:	ED-CO-22-231508
Date Effective:	15 June 2022
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This document can be made available in alternative formats on request.

Appendix A: Acronyms

ACHWA	Aboriginal Health Council of WA
ADF	Australian Defence Force
APTC	Acute Patient Transport Coordination
BAU	Business as Usual
BCP	Business Continuity Plan
CDNA Guidelines	Communicable Diseases Network Australia (CDNA) National guidelines for public health units
CLST	Clinical and Logistics Support Team
DPC	Department of Premier and Cabinet
EOC	Emergency Operations Centre
EM Act	Emergency Management (WA) Act 2005
HMA	Hazard Management Agency
HSP	Health Service Provider
IDEMP	Infectious Disease Emergency Management Plan
LEOC	Local Emergency Operations Centre
OASG	Operational Areas Support Group
PHEOC	Public Health Emergency Operations Centre
REOC	Regional Emergency Operations Centre
RFDS	Royal Flying Doctor Service
RHDC	Regional Health Disaster Coordinator
RIDER	(Interim) Respiratory Infectious Diseases Emergency Response Plan (endorsed)
RSCG	Regional Service Continuity Group
SDC	State Disaster Council
SECG	State Emergency Coordination Group
SEMC	State Emergency Management Committee
SHICC	State Health Incident Coordination Centre
SJAA	St John Ambulance Australia
State EMP	State Emergency Management Plan
(S)IMT	(State) Incident Management Team
SWICC	State Welfare Incident Coordination Centre
WAMAT	WA Medical Assistance Team
WAPHA	WA Primary Health Alliance

WAPOL	WA Police Force
WHO	World Health Organisation
WINGS	WACHS Intrastate Navigation Governance Service