



Staffing for Service Continuity during Disruptions and Emergencies Policy

1. Background

Maintaining high quality health care provision is a priority during disruptions and emergencies. Business Continuity Plans (BCPs) are maintained by each site, and outline how essential services will continue to be provided following a disruptive event or emergency. BCPs are predicated on having an available workforce to maintain service provision in order to meet the community's needs.

2. Policy Statement

2.1 Emergency rostering arrangements

Emergencies may require action to be taken by staff, including remaining on duty to provide continuity of care and service for the duration of the emergency. These include, but are not limited to, bushfires, cyclones, floods, earthquakes and other natural and man-made hazards. WACHS is obliged to provide an ongoing service to the community during emergencies as part of Health system's role as a combat agency under section 26 of the *Emergency Management Regulations 2006*.

WACHS recognises the importance of family and home safety, which poses additional challenges to staffing when an emergency impacts on the local community.

To ensure service continuity the following principles for the rostering of staff apply:

- Staff will be identified as being "essential" or "non-essential" depending on the nature of their duties and the type of emergency.
- Staff will attend all rostered shifts. Staff directed to not attend the health care facility or asked to leave will receive payment for their rostered shifts.
- Essential nominated staff are required to stay at work. Due to the need to ensure safety of staff, non-essential staff will, where time permits, be released prior to the emergency escalating.
- Staff who have been on duty for an extended period will be given priority to return home. Staff will be provided the prescribed break period in their industrial instrument before being required to return for any subsequent rostered shift. Should the next rostered shift commence in the prescribed break period, this shift will be paid as per the roster but staff are not expected to attend work until they have had the requisite time off.

Emergency roster allocation

- If staff are unable to attend the health care facility when the emergency has passed due to family/other commitments (e.g. damage to property) they may request access to leave entitlements. The manager is not to unreasonably withhold or refuse access to leave.

- If staff are rostered but cannot attend the health care facility due to external circumstances (e.g. road cut off, closure to an airport) and staff are able to work from home or another WACHS location (with the approval of the manager) staff will be paid as per the roster. If no approval is given or they are unable to work from home or another WACHS location, the manager may discuss leave entitlements with staff.
- Staff are expected to present for duty as per their roster once the emergency has abated. A staff member who does not present for duty as per this policy may be requested to provide reasons for non-attendance, and may apply to take a form of approved leave for the period of their absence.

Advice on staffing an rostering during cyclones is listed in appendix A.

2.2 WACHS staff members who are emergency services volunteers

Staff in a position that is deemed critical to maintain WACHS service continuity must present ready for duty with WACHS for the hours that they are rostered for, even if they are volunteers to DFES and/or other WACHS recognised emergency services. Non-essential staff must seek permission from their respective Operations Manager/Director to be released from their rostered duty to participate as a volunteer.

2.3 Rostering and Payment Arrangements

Staff rostering arrangements will be managed during times of emergencies appropriate to the level of response required and the anticipated duration of the emergency.

It is expected that staff will make themselves available for duty to support the health care facility to meet service need. It is acknowledged that normal roster planning may not be practicable in all cases due to the unexpected and unplanned nature of emergency situations and that staff not rostered on duty may be asked to attend work.

Non-essential staff who are not able to return home due to unforeseen emergency disruptions should contact local Human Resources to discuss their circumstances in consultation with WACHS Industrial Relations.

Fatigue management and other staff safety and health arrangements will be followed to ensure the safety of WACHS staff.

Industrial instrument provisions will be applied to determine payments to be made to staff for duty undertaken during an emergency. Normal approval processes will apply as per the [WACHS Authorities, Delegations and Directions Schedule](#).

WACHS regions are to maintain a blank cost centre ready for activation in the event of an emergency. This will enable WACHS to easily identify costs that may be reimbursed under the [Disaster Recovery Funding Arrangements WA](#).

3. Definitions

Rostered Hours	means the rostered hours for the staff as per the roster (RoStar)
Non-essential staff	means staff that are not required for duty during the emergency event
Overtime	additional hours as defined by the relevant industrial instrument
Essential staff	<p>It is the responsibility of the hospital/health care facility to determine if a staff member is deemed essential. Consideration should be given to:</p> <ul style="list-style-type: none"> • Essential hospital services i.e. services that need to be available at all times in any circumstance. • The staff and resources critical to ensure the continuity of these services. <p>The designation of essential staff depends on their duties as well as the circumstances of the emergency. Staff will be notified in advance if they are deemed essential and positions identified in emergency management sub-plans.</p>

4. Roles and Responsibilities

The **Chief Executive (CE)** is responsible for oversight of this policy.

Regional Directors are responsible for communicating the requirements of this policy to staff within their regions, and ensuring blank cost centres are maintained in preparation for the occurrence of an emergency or disruption.

Regional Nurse Directors (RND), Health Service Managers (HSM) and Operations Managers are responsible for rostering adequate staff to enable a response in emergency situations. The RND/HSM is responsible for considering staff pay claims relating to the provision of their specific industrial instrument

Regional HR - Regional HR teams are responsible for providing advice to staff and managers when requested about payments applicable to staff required to remain on duty during cyclones and other emergencies.

WACHS Staff - All staff are required to comply with WA Health and WACHS policies and guidelines including this policy. Staff are expected to present for duty as per this policy and to follow procedures designed to protect their health and safety.

WACHS staff members that are emergency services volunteers are responsible for informing their line manager of their volunteer status.

5. Compliance

Compliance with this policy will be monitored by the Emergency Management Executive Subcommittee.

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.

6. Records Management

All WACHS corporate records must be stored in the approved Electronic Documents and Records Management System.

[Records Management Policy](#)

7. Evaluation

Monitoring of compliance with this policy is to be conducted by Regional Directors following a major incident requiring a regional response. Evaluation of the policy effectiveness will be undertaken by the policy owner within three years of endorsement.

8. Standards

[National Safety and Quality Health Service Standards](#) – 1.10f

9. Legislation

[Emergency Management Act 2005](#) (WA)

[Emergency Management Regulations 2006](#) (WA)

[Occupational Safety and Health Act 1984](#) (WA)

[Occupational Safety and Health Regulations 1996](#) (WA)

10. References

[Public Sector Labour Relations Circular No. 02 of 2001 – Paid Leave for Emergency Service Volunteers](#)

[WA Health System Industrial Instruments](#)

WACHS Roster Guidelines during an Emergency

11. Related Forms

Nil

12. Related Policy Documents

WACHS [Emergency \(Disaster\) Management Arrangements Policy](#)

13. Related WA Health System Policies

[Emergency Management Policy](#)

14. Policy Framework

[Risk, Compliance and Audit](#)

**This document can be made available in alternative formats
on request for a person with a disability**

Contact:	Program Manager Disaster and Emergency Management (T. Spicer)		
Directorate:	Operations	EDRMS Record #	ED-CO-14-15319
Version:	2.00	Date Published:	04/03/2020

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