

Emergency and Disaster Preparedness Policy

1. Introduction

1.1 Purpose

This Policy and the Policies and Procedures and related documentation set out in section 1.5 below (**Related Documentation**) supports Support Carers to apply the Emergency and Disaster Management NDIS Practice Standard.

1.2 Policy Aims

Support Carers is committed to ensuring that:

- (a) Emergency and disaster management includes planning that ensures that the risks to the health, safety and wellbeing of participants that may arise in an emergency or disaster are considered and mitigated, and ensures the continuity of supports critical to the health, safety and wellbeing of participants in an emergency or disaster.
- (b) Each participant has access to timely and appropriate support without interruption.

1.3 NDIS Quality Indicators

In this regard, Support Carers aims to demonstrate each of the following quality indicators through the application of this Policy and the relevant systems, procedures, workflows and other strategies referred to in this Policy and the Related Documentation:

Emergency and Disaster Preparedness

- (a) Measures are in place to enable continuity of supports that are critical to the safety, health and wellbeing of each participant before, during and after an emergency or disaster.
- (b) The measures include planning for each of the following:
 - (1) preparing for, and responding to, the emergency or disaster;
 - (2) making changes to participant supports;
 - (3) adapting, and rapidly responding to changes to participant supports and to other interruptions;
 - (4) communicating changes to participant supporters to workers and to participants and their support networks.
- (c) Support Carers develops emergency and disaster management plans, consults with participants and their support networks about the plans and puts the plans in place.
- (d) The plans explain and guide how Support Carers will respond to, and oversee the response to, an emergency or disaster.
- (e) Mechanisms are in place for Support Carers to actively test the plans, and adjust them, in the context of a particular kind of emergency or disaster.
- (f) The plans have periodic review points to enable Support Carers to respond to the changing nature of an emergency or disaster.

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- (g) Support Carers regularly reviews the plans, and consults with participants and their support networks about the reviews of the plans.
- (h) Support Carers communicates the plans to workers, participants and their support networks.
- (i) Each worker is trained in the implementation of the plans.

Continuity of Supports

- (a) Day-to-day operations are managed in an efficient and effective way to avoid disruption and ensure continuity of support.
- (b) In the event of worker absence or vacancy, a suitably qualified and/or experienced person performs the role.
- (c) Support is planned with each participant to meet their specific needs and preferences. These needs and preferences are documented and provided to workers prior to commencing work with each participant to ensure the participant's experience is consistent with their expressed preferences.
- (d) Arrangements are in place to ensure support is provided to the participant without interruption throughout the period of their service agreement. These arrangements are relevant and proportionate to the scope and complexity of supports delivered by the provider.
- (e) Alternative arrangements for the continuity of supports for each participant, where changes or interruptions are unavoidable, are:
 - (1) explained and agreed with them; and
 - (2) delivered in a way that is appropriate to their needs, preferences and goals.

1.4 Scope

- (a) This Policy applies to the provision of all services and supports at Support Carers.
- (b) All permanent, fixed term and casual staff, contractors and volunteers are required to take full responsibility for ensuring full understanding of the commitments outlined in this Policy.

1.5 Related Documentation

The application of the above NDIS Practice Standard by Support Carers is supported in part by and should be read alongside the Business Continuity, Emergency and Disaster Preparedness Plan and the Policies and Procedures and related documentation corresponding to this Policy in the Policy Register.

2. Definitions

In this Policy:

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Support Carers means Support Carers Pty Ltd ABN 71 661 466 351

Client means a client of Support Carers (including an NDIS participant).

Emergency Plan means an emergency plan prepared by Support Carers for its business or in collaboration with a Client for the Client's personal safety and wellbeing.

Key Management Personnel means Prakash Dhoj Thapa, Rekha Rekha and other Key Management Personnel involved in Support Carers from time to time.

Legislation Register means the register of legislation, regulations, rules and guidelines maintained by Support Carers.

Policy Register means the register of policies of Support Carers.

Principal means Prakash Dhoj Thapa.

reasonably practicable is that which is, or was at a particular time, reasonably able to be done in relation to ensuring workplace health and safety, taking into account and weighing up all relevant matters including:

- (a) the likelihood of the hazard or the risk concerned occurring; and
- (b) the degree of harm that might result from the hazard or the risk; and
- (c) what the person concerned knows, or ought reasonably to know, about:
 - (1) the hazard or the risk; and
 - (2) ways of eliminating or minimising the risk; and
- (d) the availability and suitability of ways to eliminate or minimise the risk; and
- (e) After assessment, the extent of the risk and the available ways of eliminating or minimising the risk, the cost associated with available ways of eliminating or minimising the risk, including whether the cost is grossly disproportionate to the risk.

Worker means a permanent, fixed term or casual member of staff, a contractor or volunteer employed or otherwise engaged by Support Carers.

3. Business Continuity, Emergency and Disaster Preparedness Plan

Support Carers maintains a Business Continuity, Emergency and Disaster Preparedness Plan which sets out measures that are in place to enable continuity of support that are critical to the safety, health and wellbeing of each Client before, during and after an emergency or disaster. That Plan and this Policy should be read together.

4. Training

- (a) Each Worker completes:

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- (1) Emergency and Disaster Preparedness Training (through Safety Training Australia or another recognised RTO); and
- (2) Infection, Prevention and Control Training (through NDS or another recognised RTO).
- (b) Training should include communication of the Business Continuity, Emergency and Disaster Preparedness Plan and other Emergency Plans established pursuant to this policy to Workers.

5. Support Carers Emergency Plan

- (a) Support Carers will do what is reasonably practicable to ensure that appropriate operational readiness measures are developed, implemented and reviewed at a business level. This includes:
 - (1) emergency management and evacuation procedures for the types of emergencies or disasters relevant to the region in which Support Carers is located;
 - (2) ensuring maintenance of all emergency systems; and
 - (3) having access to a current Emergency Management Handbook.
- (b) Support Carers will prepare for, respond to and recover from emergencies in accordance with the 'all hazards' approach. This includes, but is not limited to, fire, flood, storm, Cyber, Covid-19 and Infection
- (c) In the event of an emergency, Support Carers will use its best endeavours to ensure essential services delivered to Clients by:
 - (1) Support Carers; and
 - (2) other service providers,are maintained as far as is practicable in accordance with our Business Continuity, Emergency and Disaster Preparedness Plan.

6. Supporting Client Emergency Plan

- (a) Support Carers will do what is reasonably practicable to ensure the safety of Clients in emergencies, by ensuring that itself and other service providers encourage and support Clients to undertake personal emergency planning. Where there is recognised bushfire risk, specific bushfire planning will be undertaken in addition to basic personal emergency planning.
- (b) Where the Client does not already have an emergency plan in place, Support Carers will prepare an Emergency Plan with the Client in substantially the same format as its Emergency and Evacuation Plan template.
- (c) The Emergency Plan will include evacuation procedures for the types of emergencies or disasters relevant to the region in which the Client is located and the Client's disability or personal circumstances (to the extent that the buildings in which the residences and buildings are located do not have their own emergency management and evacuation procedures);
- (d) Personal emergency planning shall include ensuring the preparation of an Emergency Kit.

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- (e) Any emergencies and false alarm reports will be deemed an incident for the purposes of the Support Carers Incident Management and Reporting Policy and will be managed in accordance with that policy.

7. Testing of Emergency Plans

- (a) Support Carers will prepare, test and annually review each Emergency Plan it prepares in accordance with clauses 5 and 6 by conducting the following tests:
 - (1) ensuring emergency contact details for key staff who have specific roles or responsibilities under an Emergency Plan, for example, fire wardens, floor wardens and first aid officers are recorded in the Emergency Plan;
 - (2) ensuring contact details for local emergency services, for example police, fire brigade and the poison information centre are recorded in the Emergency Plan;
 - (3) ensuring a description of the mechanisms for alerting people at the residence or building to an emergency or possible emergency, for example sirens or bell alarms are recorded in the Emergency Plan;
 - (4) ensuring evacuation procedures including arrangements for assisting any people with hearing, vision or mobility impairment are recorded in the Emergency Plan (if applicable);
- (b) Information, training and instruction plans will be provided to relevant Workers providing support to a Client at the same time as the Client's support plan is prepared in relation to implementing the emergency procedures. Refresher training in relation to the Emergency Plan will be provided at the same time as a review of the support plan.
- (c) The Emergency Plan, or a summary of key elements of the plan, will be readily accessible by staff and on display in the Client's residence.
- (d) Support Carers will collaborate with the Clients with relation to the preparation of the Emergency Plan and communicate the plan to the Client and their support network.
- (e) The Emergency Plan will include extracts of the below sections of this Policy which are relevant to the Emergency Plan. For example, if the residence or building the subject of the Emergency Plan is in a flood zone, relevant parts of the "Floods" section of this Policy should be included in the Emergency Plan.
- (f) Any emergency plan for a building in which a Client's residence is located must be implemented in an emergency involving the Clients in the residence or building. Directions from emergency services workers must also be complied with.
- (g) Support Carers will review the Emergency Plan for each of its Clients at least annually and prior to then in the case of any of the residences and buildings where it works if:
 - (1) there are changes to the residence or building such as significant repairs, maintenance, improvements, renovations or refurbishments;
 - (2) when there are changes in the number or composition of staff or Clients;
 - (3) there is another significant change to the residence or building; or

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- (4) the Emergency Plan is tested.
- (h) Support Carers will record tests of the Emergency Plans in the Emergency Test Register.
- (i) Support Carers will test and practice each Emergency Plan with staff and Clients (where applicable) at least every 12 months.
- (j) Support Carers will consult with Clients and their support networks about the reviews of the plans and gather their input as part of the review.

8. Compliance with local building laws

Support Carers will use its best endeavours and do what is reasonably practicable to ensure each of the residences and buildings that it works in meet relevant building local laws, regulations or legislation, including provisions that apply retrospectively (for example, in respect of smoke alarms) with respect to emergency readiness and safety measures. Any subsequent building works shall meet the relevant building approval provisions at the corresponding time.

9. Fire Emergency

- (a) Support Carers will do what is reasonably practicable to ensure that fire equipment is installed in each residence or building where it works which is suitable for risks specific to the relevant residence or building.
- (b) Emergency exits will be kept unlocked, unblocked and all exit signs will be maintained and kept illuminated.
- (c) Fire equipment will be placed away from heat sources and regularly maintained.
- (d) All staff working in the residence or building will be trained in how to use fire equipment.
- (e) Management will do what is reasonably practicable fire equipment is regularly tested by local fire authorities or fire equipment suppliers.

10. Floods

In preparation for a flood, Support Carers will:

- (a) obtain a copy of the local council's flood plan, which should show the location of problem areas, evacuation routes and relief centres.
- (b) work out what the safest route to leave each of the residences and buildings where it works would be, and if the route could be cut off by floodwaters.
- (c) ensure arrangements are made to obtain sandbags to protect the residences and buildings where it works.
- (d) know the kind of flooding the general area is prone to.

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- (e) If a flood is likely, tune in to the local ABC Radio station and keep listening for advice and warnings.
- (f) identify the safest route to the nearest relief centre and leave well before roads are closed by water.
- (g) get ready to move vehicles, outdoor equipment, garbage, chemicals and poisons to higher locations.
- (h) work out which indoor items you want to put in a higher spot.
- (i) ensure Clients have prepared an Emergency Kit,
- (j) raise furniture, clothing and other valuables onto beds, tables and into roof spaces.
- (k) empty freezers and refrigerators, leaving doors open.
- (l) turn off power, water and gas.
- (m) lock the residence or building and take the safest evacuation route out of the area.
- (n) assist Clients to evacuate.
- (o) not drive through floodwater.

11. Storms

In preparation for a storm, Support Carers will:

- (a) Check fences, roofs and gutters; make any repairs that are needed.
- (b) Trim branches near power lines.
- (c) Clean gutters and downpipes regularly; also secure loose roof tiles/sheets.
- (d) Move cars undercover and away from trees.
- (e) Put away or secure loose items like outdoor furniture and pot plants.
- (f) Disconnect all electrical items.
- (g) stay tuned to your local ABC Radio station, listen online or via the ABC listen app, and/or check ABC Emergency Twitter and Facebook for updates, warnings and advice.
- (h) While conditions are severe, stay indoors and keep away from windows.
- (i) Check on and assist Clients to see if they are safe and prepared.
- (j) Assist Clients to evacuate.
- (k) Don't drive into flood water.
- (l) Stay clear of creeks, drains and other waterways as there is a risk of flooding, including flash floods.

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- (m) Be careful of fallen trees, powerlines and damaged buildings.

12. Information and cyber security

Support Carers will take the following steps to secure personal information in the event of an emergency:

- (a) website protection measures (such as encryption, firewalls and anti-virus software);
- (b) security restrictions on access to Support Carers's computer systems (such as login and password protection) and cloud based storage;
- (c) controlled access to Support Carers's premises;
- (d) personnel security (including restricting the use of personal information by Support Carers employees to those who have a legitimate need to know the information for the purposes set out above); and
- (e) training and workplace policies.

13. COVID-19

13.1 General

- (a) Support Carers will comply with the state government's advice to home care service providers and residential services (if applicable).
- (b) Support Carers will follow these simple steps to help stop the spread of germs:
 - (1) Staff and volunteers should wash their hands often with soap and running water or use an alcohol-based hand rub. They should also help Clients to do the same.
 - (2) Make sure there are enough tissues and bins available.
 - (3) Help Clients keep a distance of at least 1.5 metres from others where possible.
 - (4) Avoid any non-essential personal care activities that need direct contact with Clients.
 - (5) Clean often during the day, paying particular attention to frequently touched surfaces in common areas.
 - (6) Any staff and volunteers who are sick should not work until they are well again.
 - (7) Limit visitors as much as possible. Visitors who are sick should not visit any of the residences where Support Carers works.
 - (8) Clients who have COVID-19 symptoms should be isolated into a single room straight away. Arrange a medical review as soon as possible.

13.2 Preparation for confirmed, probable or suspected COVID-19 case

- (a) Support Carers will prepare for the possibility of a confirmed, probable or suspected case. The Australian Government has published *Coronavirus (COVID-19) Guide for Home Care Providers*.

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- (b) If a Client or staff member is suspected of having COVID-19, Support Carers must notify the relevant local public health unit straight away.

13.3 Personal Protective Equipment

- (a) Where possible, staff and volunteers should wear a surgical mask, long sleeved fluid-resistant gown or apron, protective eyewear and gloves when providing care to a Client with respiratory symptoms
- (b) If a Client is confirmed to have COVID-19 staff should follow the advice in the *Coronavirus (COVID-19) Guide for Home Care Providers*.
- (c) If usually available resources, like personal protective equipment, are unavailable, staff may apply to the Australian Government Department of Health for additional supplies by emailing agedcarecovidppe@health.gov.au

13.4 Handling Linens

- (a) The handling and laundering of used bed linen, towels and cleaning supplies can result in the virus getting onto the hands or clothing. The risk of getting the disease through touching these items is very low if personal protective equipment is worn. It is recommended that disposable gowns and gloves are worn while handling bed linens and towels. Personal protective equipment needs to be thrown in the general waste bin straight after use. It is important to wash your hands straight after touching soiled laundry as well.
- (b) All used linen should be handled with care to avoid spreading germs to staff or the environment.
- (c) All linen used for a person with confirmed, probable or suspected COVID-19 infection should be managed as for heavily soiled linen.
- (d) For the transport of linen routine established processes should be used.

13.5 Waste disposal

The following guidelines should always be followed when handling waste from a person with confirmed, probable or suspected COVID-19 infection:

- (a) Place waste inside a sealed disposable bag, followed by a second disposable bag before throwing it in the general refuse bin.
- (b) Wear gloves when handling any waste.
- (c) Clean your hands straight after removing waste and taking off gloves.
- (d) Manage sharps containers as per your normal process.

14. Infectious and Hazardous Exposure

14.1 Immediate care of the exposure site

Contaminated clothing should be removed, and the injured area should be washed well with soap and water (an antiseptic could also be applied). Any affected mucous membranes should be flushed with large amounts of water. If the eyes are contaminated, they should be rinsed gently but thoroughly with water or normal saline, while kept open.

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14.2 Evaluation of the exposure

The exposed person should be examined to confirm the nature of exposure and counselled about the possibility of transmission of bloodborne disease.

14.3 Evaluation and testing of the exposed person

The exposed person should have a medical evaluation, including information about medications they are taking, and underlying medical conditions or circumstances. All exposed people should be assessed to determine the risk of tetanus.

Depending on the circumstances of the exposure, the following may need to be considered:

- tetanus immunoglobulin
- a course of adsorbed diphtheria tetanus vaccine, adult formulation (Td) vaccine
- TB booster.

The current edition of *The Australian immunisation handbook* should be consulted for further details.

The exposed person would normally be tested for HIV antibody, HCV antibody and antibody to HBsAg at the time of the injury, to establish their serostatus at the time of the exposure. Expert counselling on the implications of the event, PEP and appropriate long-term follow-up should be offered.

An option that may be offered to healthcare workers who do not wish to undergo testing at the time of the exposure is to have blood collected and stored but not tested. Blood that is collected and stored for this purpose must be retained for a minimum of 12 months.

If the source person is found to be HIV, HBV and HCV negative, no further follow-up of the exposed person is generally necessary, unless there is reason to suspect the source person is seroconverting to one of these viruses, or was a high risk of bloodborne viral infection at the time of the exposure. If the source is positive for one of these viruses, pregnancy testing should be offered to women of child-bearing age who have been exposed and whose pregnancy status is unknown.

14.4 Post exposure counselling

A specialist with knowledge of bloodborne infections should do the follow-up. If it is demonstrated that a person has been exposed to a bloodborne pathogen, they should not donate blood, semen, organs or tissue for 6 months, and should not share implements that may be contaminated with even a small amount of blood (for example, razors or toothbrushes).

For HIV and HBV, the exposed person should be informed of the risk of transmission to sexual and injecting partners for a 6-month period, and be counselled about issues of safe sex and safe injecting.

If PEP is indicated, or if there is a risk of acute infection with HIV, HCV or HBV, advice should be offered on pregnancy and breastfeeding based on an individual risk assessment. In the case of HIV, patients should be advised of the remote risk of seroconversion up to 12 months post-exposure, particularly if specific PEP was undertaken.

14.5 Follow-up for the exposed person

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If the source person is seronegative for HIV, HBsAg and HCV, baseline testing or further follow-up of the healthcare worker is normally not necessary. If the source person has recently engaged in behaviours that are associated with a risk for transmission of these viruses, baseline and follow-up HIV-antibody testing of the healthcare worker should be considered.

When post-exposure	Recommended management actions
Immediately	First aid Relief from duty Risk assessment Post-exposure prophylaxis (PEP) – if significant injury
As soon as possible (same day)	Source assessment Documentation of exposure Prevention of transmission and exposure/pre-test counselling Baseline serology, if agreed to Referral to specialist physician if PEP commenced Support of significant others
1–3 weeks	Post-test counselling with results of baseline serology Occupational health and safety review
3 months	Pre-HIV test counselling Follow-up serology – HIV, hepatitis B virus (HBV), hepatitis C virus (HCV)
6 months	Follow-up serology HBV, HCV HIV (if PEP taken)

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15. General

15.1 Relevant Legislation, Regulations, Rules and Guidelines

Legislation, Rules, Guidelines and Policies apply to this Policy and Related Documentation as set out in the Legislation Register.

15.2 Inconsistency

If and to the extent that the terms of this Policy are or would be inconsistent with the requirements of any applicable law, this Policy is deemed to be amended but only to the extent required to comply with the applicable law.

15.3 Policy Details

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