

Strathbogie Shire Influenza Pandemic Plan

This Influenza Pandemic Plan is a sub-plan of the Strathbogie Shire Municipal Emergency Management Plan, and is located at Appendix J of the MEMP.

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Author: Steve Crawcour
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Reviewed: Caroline Harlow

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1: Introduction

Authority of the Chief Executive Officer (CEO) and role allocation of Strathbogie Shire Council

As part of its Emergency Management planning process, the Strathbogie Shire Council developed this Influenza Pandemic Plan in 2009. A comprehensive review has been conducted in 2013 resulting in this updated version of the Influenza Pandemic Plan. Whilst the likelihood of an influenza pandemic is low, the impact on this organisation in such an event could be devastating.

Roy Hetherington, Director Asset Services is nominated as the Pandemic Coordinator for the municipality, and will work with all business units and sections in identifying critical staff and functions.

David Woodhams, Director Corporate & Community will assist Roy Hetherington, and be the Deputy Pandemic Coordinator.

All business units and sections are required to offer their assistance to the Pandemic Coordinator and provide as much information as is necessary. This will enable the maintenance of a robust plan, reducing the local impacts of an influenza pandemic and providing support and recovery assistance to our affected community, throughout the duration of the pandemic.

The plan will be reviewed annually and as part of the Municipal Emergency Management Plan review schedule. Desk-top exercises will be carried out to test the plan and make any identified revisions.

It is emphasised that the pandemic plan is to work in conjunction with the municipality's emergency management plans.

I trust all business sections will offer as much assistance as is required.

Steve Crawcour
Chief Executive Officer
1/7/13

2: Framework and Background

Commonwealth plans

- National Action Plan for Human Influenza Pandemic – Council of Australian Governments July 2007
- Australian Health Management Plan for Pandemic Influenza – Australian Government Department of Health and Ageing May 2006

State plans

- Victorian Human Influenza Pandemic Plan – Victorian Government April 2007
- Community Support and Recovery Sub Plan – Victorian Department of Human Services March 2008
- Victorian Health Management Plan for Pandemic Influenza – Victorian Department of Human Services July 2007

Local Government Influenza Pandemic Plan

- Strathbogrie Shire Influenza Pandemic Plan
- Strathbogrie Shire Emergency Management Plan
- Strathbogrie Business Continuity Plan

Pandemic influenza background

For more information, please refer to pg. 4–7, Victorian Health Management Plan for Pandemic Influenza.

Disease description

Influenza is an acute respiratory disease caused by influenza type A or B viruses. Symptoms usually include: fever, cough, lethargy, headache, muscle pain and sore throat. Infections in children, particularly type B and A (H1N1) may also be associated with gastrointestinal symptoms such as nausea, vomiting and diarrhoea.

The incubation period for influenza is usually one to three days. Adults have shed the influenza virus from one day before developing symptoms, to up to seven days after the onset of the illness. Young children can shed the influenza virus for longer than seven days. Generally, shedding peaks early in the illness, typically within a day of symptom onset. The influenza virus remains infectious in aerosols for hours and potentially remains infectious on hard surfaces for one to two days.

Transmission

Human influenza virus is mainly by **droplet transmission**. This occurs when droplets from the cough or sneeze of an infected person are propelled through the air (generally up to 1 metre) and land on the mouth, nose or eye of a nearby person. Influenza can also be spread by **contact transmission**. This occurs when a person touches respiratory droplets that are either on another person or an object—and then touches their own mouth, nose or eyes (or someone else's mouth, nose or eyes) before washing their hands.

In some situations, **airborne transmission** may result from medical procedures that

produce very fine droplets (called fine droplet nuclei) that are released into the air and breathed in. These procedures include:

- intubation
- taking respiratory samples
- performing suctioning
- use of a nebuliser.

History of influenza pandemics

Previous pandemics have started abruptly without warning, swept through populations with ferocious velocity, and left considerable damage in their wake.

The 20th century had three recognised influenza pandemics (Spanish influenza 1918–19; Asian influenza 1957–58; and Hong Kong influenza 1968). All three pandemics were associated with increased mortality rates in Australia. The influenza pandemic of 1918–19 was unprecedented in terms of loss of human life—between 20 and 40 million people died worldwide, with the highest numbers of deaths among those aged between 20 and 40 years.

The Asian influenza of 1957–58 had infection rates reported to range between 20 to 70 per cent, but case fatality rates were low, ranging from one in 2000 to one in 10,000 infections. Age-specific mortality rates showed that those aged over 65 years were most affected. The Hong Kong influenza was similar, with the highest mortality rates appearing in those over the age of 65. Infection rates were around 25 to 30 per cent.

The differences in past pandemics show the need for flexible contingency plans, capable of responding efficiently to any pandemic threat.

3: Aims and Objectives

Aims

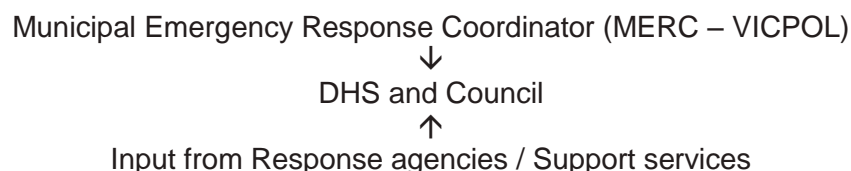
- assist in reducing the impacts of an influenza pandemic on the Municipality
- provide support and recovery assistance throughout the duration of the influenza pandemic
- ensure response activities are consistent across whole of government

Objectives

- *preparedness* – have arrangements in place to reduce the pandemic impact
- *containment* – prevent transmission, implement infection control measures, provide support services to people who are isolated or quarantined within the municipality
- *maintain essential municipal services* – provision for business continuity in the face of staff absenteeism and rising demand on local government services
- *mass vaccination* – assist in providing vaccination services to the community, if an influenza pandemic vaccine becomes available
- *communication* – develop media and communication messages, in line with whole of government messages, to inform the community and staff of any changes to normal municipal service delivery
- *community support and recovery* – ensure a comprehensive approach to emergency recovery planning in the municipal emergency management plan, with specific focus on influenza pandemic. (Refer to the priority tasks recommended in the Community Support and Recovery Sub Plan of the Victorian Human Influenza Pandemic Plan).

Procedure for activating the plan

In the event of an influenza pandemic, the Strathbogie Shire’s Municipal Emergency Management Plan would be activated as follows:



The initial response period will be relatively short however recovery will be long-term.

Recovery will therefore be the primary focus of the Municipal Emergency Coordination Centre (MECC).

Key Council personnel involved in response and recovery will be:

- Pandemic Coordinator (MERO)
- Deputy Pandemic Coordinator
- Municipal Resource Officer
- Municipal Recovery Manager
- Deputy Municipal Recovery Manager
- Environmental Health Officer

Predicted impact of an influenza pandemic

Modelling the potential impacts of influenza pandemics involves a high degree of uncertainty. Factors such as the virulence and infectivity of the next pandemic strain limit our abilities to characterise the next pandemic with any accuracy. It is, however, possible to model various pandemic scenarios given a series of pre-determined assumptions and limitations. Modelling provides a tool for guiding planning.

The attack rate in humans is estimated to be 40 per cent, with a case fatality rate of 2.4 per cent (i.e. of the 40 per cent ill, 2.4 per cent would die).

How a pandemic may impact on the Municipality

For Strathbogie Shire, it is expected that 4,000 people would be infected with pandemic influenza, and of those 96 would die. Other assumptions that have been considered when planning for a pandemic include:

- every person will be susceptible to a pandemic influenza virus
- some people will become infected but not develop significant symptoms, possibly transmitting the infection and developing immunity to subsequent infection
- depending on the severity of the pandemic, absenteeism due to illness, the need to care for others and fear of infection may reach 50% of the workforce during the peak time of an outbreak. Lower rates of absenteeism are expected during the weeks before and after the peak
- certain public health measures such as closing schools and quarantining the households of infected individuals are likely to increase rates of absenteeism
- the typical incubation period (interval between infection and onset of symptoms) for influenza is approximately 2 days
- on average, infected people will transmit infection to approximately two other people
- on average, infected people will be absent from work for approximately 2 weeks
- assuming that a vaccine can be developed, it could take up to 6 months for enough vaccines to be developed to immunise all Australians
- a pandemic outbreak will last about 6 to 8 weeks
- multiple outbreaks or waves of illness could occur with each wave lasting 6 to 8 weeks. These waves could continue for up to two years
- typically the largest waves of general flu illness have occurred in autumn and winter, however the seasonality of a pandemic cannot be predicted with certainty
- while a pandemic will not affect the physical stability of buildings and other infrastructure, there could be significant disruption of public and privately owned critical infrastructure including transport, commerce, utilities, public safety, agriculture and communications due to the absence of critical staff.

The role of local government in planning

The Emergency Management Act 1986 requires Council to have arrangements in place to prevent, respond to and recover from any emergencies that could occur in the municipality.

The Public Health & Wellbeing Act 2008 states that Council's function is to 'seek to protect, improve and promote public health and wellbeing within the municipal district.'

In Victoria, an Influenza pandemic constitutes an emergency under the *Emergency Management Act 1986*.

Local Government is the closest level of government to the community and is often the first point of contact for assistance, advice and information. It is therefore expected that local government will provide a level of leadership during a pandemic and establish partnerships with respective service providers within its community. This role can be best described under four distinct areas:

1. Community support and recovery
2. Public health
3. Business continuity and
4. Essential services

Community support and recovery

Planning for community support and recovery is outlined in detail in the Municipal Emergency Management Plan – Section 6 Recovery Arrangements and Section 7 Support Arrangements. The Municipal Recovery Manager (MRM) and supporting staff has key responsibility for relief and recovery activities. Referrals to appropriate support services will be coordinated by the MRM.

The Department of Human Services plays a key role in providing support to communities and will be contacted by the MRM to ensure adequate support is provided in Strathbogie Shire after an emergency event.

Public health

Planning for public health is outlined in the Municipal Public Health and Wellbeing Plan. Council ensures that agencies are aware of their obligations to report actual or suspected communicable diseases as part of its role in Environmental Health.

The Department of Health plays a key role in providing support during an Influenza Pandemic and will be contacted by the MRM to ensure adequate support is provided in Strathbogie Shire during a pandemic event.

Business continuity

Planning for business continuity is outlined in the Strathbogie Shire Council Business Continuity Plan. This plan outlines the key strategies and actions that Council will put in place in the event of major impact on business operations of Council. Council will activate the Business Continuity Plan and/or Disaster Recovery Plan when deemed necessary by the CEO.

Essential services

Planning for essential services is outlined in the Municipal Emergency Management Plan – Section 5 Response Arrangements, Section 6 Recovery Arrangements, Section 7 Support Arrangements and Section 8 Contact Directory.

Council's response to an Influenza Pandemic will include formation and activation of the Influenza Pandemic Planning Sub-Committee to ensure Council's response remains relevant and this Influenza Pandemic Plan is reviewed.

Influenza Pandemic Planning Sub-committee membership and contact details

Name	Business area	Level of authority	Primary contact	Alternative contact
David Woodhams	Corporate and Community	Emergency Manager	0418 520 770	
Caroline Harlow	Community Development	Municipal Recovery Manager	0437 680 303	5790 3378
Lyn Nichols	Community Development	Deputy Municipal Recovery Manager	0418 657 066	5790 3385
Purdey Wikman	Communications	Manager Communications	0418 336 078	5795 0155
Gary Abley	Organisational Development	Manager Organisational Development	0437 455 356	5798 1326
Connor Jackson	Environmental Health	Environmental Health Officer	5795 0000	
Lisa Norman	Corporate and Community	Governance and Risk Officer	5795 0026	5795 3536
John Morris	Ambulance Vic	Regional Duty Manager	5762 6173	0447 337 236
Harvey Ballantyne	Department of Health	Program Advisor- Public Health	0419 347 566	02 6055 7771
Leo Ryan	Department of Human Services	Acting Manager Emergency Management - East Division leo.ryan@dhs.vic.gov.au	0417508187	58321530

4: Community Profile

This information is contained in Section 2 Area Description of the MEMP.

Population

Strathbogie Shire has a population of approximately 10,000. The population is concentrated in and around the towns of Euroa, Nagambie, Violet Town and Avenel.

Vulnerable communities

Vulnerable communities within the Strathbogie Shire include the frail aged, the very young and some elements of the multicultural community. Other groups identified as particularly vulnerable include:

- People with disabilities
- Immune system compromised individuals
- Single adult families
- Isolated communities
- Locked down facilities (i.e. nursing homes)
- People living alone
- People who are homeless
- People speaking limited English

Industry

Primary industries in Strathbogie Shire are farming (wool, grain, cattle production, forestry); vineyards and equine. Secondary industries are health and community services, government services and retail.

Municipal events and facilities

Events: The Shire has a range of natural and cultural attractions and over holiday periods is a popular location for tourists. Peak tourism areas are Nagambie Lakes and numerous Bed and Breakfast establishments.

Major events include rowing on Lake Nagambie, Show and Shine Car Show, Euroa Show, and Nagambie on Water plus Monthly Markets at Violet Town, Nagambie, Avenel and Euroa.

Current events are listed on Council's website.

A list of municipal facilities is outlined below. This information is contained in the Municipal Emergency Management Plan. This is not a complete list of all municipal facilities.

Facility	Capability	Capacity	Contact
Strathbogie Shire Offices	MECC	As per MEMP	As per MEMP
Violet Town Community Centre	Municipal Relief and Recovery Centre	160	Pam Ellis 5798 1415 0428 981 000
Euroa Primary School	Municipal Relief and Recovery Centre	30	Tony Fahey 5762 4734 0407 952 211
Peranbin Primary School Violet Town	Municipal Relief and Recovery Centre	200	Peter Matthews 5823 2591 0427 330 132

St Johns Primary School Euroa	Municipal Relief and Recovery Centre	120	Sonia Jones 0439 045 945
Nagambie Senior Citizens	Municipal Relief and Recovery Centre	60	Lindsay Moore 5794 2988 0428 858 834
Nagambie Recreation Reserve Committee	Municipal Relief and Recovery Centre	200	Fiona Smith 5794 2446 0418 942 446
Longwood Community Centre	Municipal Relief and Recovery Centre	200+	Tom Brodie 5798 5280 0409 579 852
Violet Town Recreation Reserve Committee	Municipal Relief and Recovery Centre	200	Gary Abley 0437 455 356 5798 1326
Violet Town Bush Nursing Centre	Municipal Relief and Recovery Centre	40	Felipe Rodriguez 57366302

Communications infrastructure

Council has a range of communications infrastructure available to assist in communicating to the community. These include:

- mobile phones – with some limited coverage in some areas of the Shire, most notably south of the Hume Freeway in the Strathbogie area;
- satellite phone;
- landlines with capacity to install additional lines in accordance with Section 7 Support Arrangements of the MEMP;
- local radio; website and local television
- social media

All external communications will be coordinated and approved by the Pandemic Coordinator (MERO) in consultation with the Communications Manager.

A list of media contacts is included in Section 8 Contact Directory of the MEMP.

Health services

Refer vulnerable persons list Appendix L MEMP

Facility	Function	Capacity	Contact
Euroa Health	Private Hospital and residential aged care	67 aged residential and 24 acute hospital	Elena McShane, CEO BH 5795 0200 0429 494 024
Nagambie HealthCare	Private Hospital and residential aged care	39 aged residential and 10 acute hospital	Amanda Fieldhouse CEO BH 5736 2900 0421 011 474
Violet Town Bush Nursing Centre	Private Hospital and residential aged care	64 beds	Felippe Rodriguez CEO BH 5798 1324 0409 981 324

Council is a member of the Strathbogie Health and Community Services Consortium with its partners, Euroa Health, Nagambie HealthCare and Violet Town Bush Nursing Centre and has developed this plan in consultation with the Consortium.

Each of the member agencies is aware of their responsibilities in the event of a Pandemic.

5: Staff Support

Procedure	Available		Action
	Yes	No	
Facilities for people to wash their hands frequently	✓		Hand washing facilities available at all toilet and sink amenities
Promotion of basic hygiene practices, including good hand washing and cough etiquette (refer or link to our posters)	✓		Posters and email promotion of hygiene undertaken (use of DOH and Victorian Government posters)
Tissues and no-touch receptacles for used tissue disposal	✓		Tissues available for all staff, and all bins have liners suitable for disposal
Conveniently located dispensers of alcohol-based hand rub	✓		Alcohol hand rub available in kitchen areas
Soap and disposable towels for hand washing where sinks are available	✓		Hand washing facilities available at all toilet and sink amenities
Provision of disposable surgical masks for use by persons who are coughing/sneezing—persons displaying these symptoms will need to be sent home	✓		Masks have been purchased and are in stock for use. Staff already advised to stay at home if they have any flu symptoms Posters placed around building
Provision of protective barriers such as glass or Perspex to protect staff who have frequent face-to-face contact with the public		✓	Tables to be placed in front of the reception counter to create a distance barrier PPE and antiseptic hand wash provided to staff
Staff travel management plans in place		✓	Staff to be encouraged to avoid the following: public transport car pooling public places If use is necessary, then masks can be provided and a minimum of 1 metre social distancing is advised Staff to advise when returning from overseas travel and medical clearance required
Restricting entry to the workplace by staff and visitors with influenza symptoms		✓	Staff have been identified who will be requested to stay at home (levels 2 to 4) PPE will be provided to all staff who are required to maintain a service at the council Those staff remaining to provide emergency service have identified back up staff All staff who have any flu like

			<p>symptoms will be requested to leave the workplace</p> <p>Signage will be placed at public entry to building advising that an emergency service only is available</p> <p>Signage advising that visitors with flu symptoms are not to enter the building and provide contact information for local health services</p> <p>Staff who have been overseas have been requested not to return to work until after incubation period</p>
Increased cleaning regimes		✓	Cleaners have been provided with information in relation to appropriate cleaning regimes
Illness Reporting Scheme		✓	All managers have been requested to provide details to the Manager Organizational Development (and other identified key staff) of all staff illnesses that they are aware of which have flu-like symptoms, as well as staff who they know have been exposed (caring for family, etc.)

The Victorian Department of Human Services will decide which groups will be provided with antiviral medicines, as per the antiviral policy in the Australian Health Management Plan for Pandemic Influenza.

The Commonwealth Department of Health and Ageing has produced a DVD entitled 'Prepared and Protected' to assist a range of organisations with influenza pandemic planning.

6: Health Services Planning for Managing Affected Individuals

Influenza streams

Patients with suspected pandemic influenza may present to any health service in a variety of ways. Health services need to develop a process for separating, triaging and admitting people with influenza-like illness, to prevent cross-infection. This may involve setting up a separate area, such as an influenza triage or influenza clinic. Any issues raised with Strathbogie Shire Council relating to patient presentations/needs will be referred to the Department of Health.

Designated hospitals (Flu Clinics)

To prevent the spread of pandemic influenza infection within hospitals, the Department of Human Services will implement a Designated Hospital Model. This model implements influenza clinics as patient numbers increase, to minimise impacts on hospital emergency departments and GP clinics. The Department of Human Services has identified 16 designated hospitals in Victoria. They have been designated based on:

- location
- isolation facilities (for example, negative pressure rooms)
- infectious diseases expertise.

The decision to transfer suspected cases to a designated hospital will be made by the Department of Human Services, in consultation with the health service. Clinical or other considerations may preclude patient transfer.

Designated hospital	Address	Facility details	Contact
<i>Goulburn Valley Health</i>	<i>Graham Street Shepparton</i>	<i>size – 280 bed facility accessibility- fully accessible parking – on site and on-street (source – website www.gvhealth.org.au/AboutUsOurServices.aspx)</i>	<i>Street address: Graham Street, Shepparton 3630 Main switchboard: (03) 5832 2322 Fax: (03) 5821 1648 Email: enquiry@gvhealth.org.au</i>
<i>Northeast Health Wangaratta</i>	<i>Green Street Wangaratta</i>	<i>size – 220 bed facility accessibility- fully accessible parking – Limited on street and a staff/visitors car park is located in Docker Street, opposite the Thomas Hogan Centre. Short term parking for the drop off/collection of patients is available at the</i>	<i>Street address: 35-47 Green Street, Wangaratta 3677 Postal address: PO Box 386, Wangaratta Victoria 3676</i>

		<p><i>front of the hospital. Disabled car parking spaces are also available in this area- stickers must be displayed.</i></p> <p><i>(source: website www.ourhealthservice.com.au/Victoria/Public-Hospitals/Northeast-Health-Wangaratta.html)</i></p>	<p><i>Main switchboard: (03) 5722 5111</i></p> <p><i>Fax: (03) 5722 5109</i></p> <p><i>Email: corporate@gvhealth.org.au</i></p>
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Designated hospitals listed on pg 51 of the *Victorian Health Management Plan for Pandemic Influenza* are:

Bayside Health	The Alfred	<i>Commercial Rd Prahran VIC</i>
Austin Health	Austin Hospital	<i>Studley Rd Heidelberg VIC</i>
Ballarat Health Services	Base Hospital	<i>Drummond St North Ballarat VIC</i>
Bendigo Health	Bendigo Hospital Campus	<i>Lucan St Bendigo VIC</i>
Eastern Health	Box Hill Hospital	<i>Nelson Rd Box Hill VIC</i>
Peninsula Health	Frankston Hospital	<i>Hastings Rd Frankston VIC</i>
Barwon Health	Geelong Hospital	<i>Ryrie St Geelong VIC</i>
	Goulburn Valley Health	<i>Graham St Shepparton VIC</i>
	Latrobe Regional Hospital	<i>Princess Highway Traralgon West VIC</i>
Southern Health	Monash Medical Centre, Clayton Campus	<i>Clayton Rd Clayton VIC</i>
	Northeast Health Wangaratta	<i>Green Street Wangaratta VIC</i>
Northern Health	The Northern Hospital	<i>Cooper St Epping VIC</i>
	The Royal Children's Hospital	<i>Flemington Rd Parkville VIC</i>
Melbourne Health	The Royal Melbourne Hospital	<i>Grattan St Parkville VIC</i>
St. Vincent's Health	St. Vincent's Hospital	<i>Princes St Fitzroy VIC</i>
Western Health	Western Hospital	<i>Gordon St Footscray VIC</i>

7: Public Health Control Measures

Council's Community Education Strategy will centre on provision of information to the community about Influenza through this Influenza Pandemic Plan; via the Council website; through the MPH&WB Plan; via Council's Manager Communications at the time of an outbreak and through the MEMP. Communicating information to the community at the time of an outbreak or emergency is detailed in Section 12 of this plan and Section 7 Support Arrangements of the MEMP.

Community Support by way of an isolation and quarantine process and management strategy will be developed in consultation and under advice of the Department of Health.

In relation to Council services in Home and Community Care and Maternal and Child Health, workers exhibiting signs of influenza will not provide services in the home until the influenza pandemic is declared over.

All workers will use face masks if services must be provided – for example for critical personal care and post-natal visits. Advice from Council's Environmental Health Officer and the Department of Health will form the basis for decisions about staffing to ensure minimal spread of disease.

Measures to increase social distancing

Another strategy to protect staff is minimising their contact with others. Crowded places and large gatherings of people should be avoided, whether inside or outside.

Because the virus can travel up to one metre when someone sneezes or coughs, a distance of at least one metre could reduce the propensity to be infected. Visiting or other contact with people who are unwell should be avoided, wherever practicable.

How to minimise contact

- avoid meeting people face to face – use the telephone, video conferencing and the internet to conduct business as much as possible, even when participants are in the same building
- avoid any unnecessary travel and cancel or defer non-essential meetings/gatherings/workshops/training sessions
- if possible, arrange for employees to work from home or work variable hours to avoid crowding at the workplace
- practice shift changes where one shift leaves the workplace before the new shift arrives. If possible, leave an interval before re-occupation of the workplace. If possible, thoroughly ventilate the workplace between shifts by opening doors and windows or turning up the air-conditioning
- avoid public transport: walk, cycle, drive a car or go early or late to avoid rush hour crowding on public transport
- bring lunch and eat it at your desk or away from others (avoid the cafeteria and crowded restaurants). Introduce staggered lunchtimes so numbers of people in the lunch room are reduced
- do not congregate in tearooms or other areas where people socialise. Do what needs to be done and then leave the area

- if a face-to-face meeting with people is unavoidable, minimise the meeting time, choose a large meeting room and sit at least one metre away from each other if possible; avoid shaking hands or hugging. Consider holding meetings in the open air.
- set up systems where clients/customers can pre-order or request information via phone/email/fax and have the order or information ready for fast pick-up or delivery
- encourage staff to avoid large gatherings where they might come into contact with infectious people.

8: Mass Vaccination/Immunisation

Advice on the process of mass vaccination is provided in the Mass Vaccination Guide, which forms Appendix 8 of the *Victorian Health Management Plan for Pandemic Influenza*. The guide was developed to provide advice to all organisations undertaking vaccination during a pandemic, as well as those setting up mass vaccination centres. It details the:

- national medical stockpile
- vaccination strategy (priority groups)
- routine vaccination in the inter-pandemic periods
- mass vaccination centres—session structure and management (administration, documentation, consent etc.)
- logistics
- various *pro forma* documents (immunisation consent form, record of administration and report of suspected adverse events).

In line with the Victorian Influenza Plan, Local Government health services will play a role as an immunisation provider during a pandemic, and will provide pandemic influenza vaccination sessions to groups according to the agreed priority list, as a vaccine becomes available.

It is anticipated that DOH will provide the vaccine in batches according to the storage facilities available and the frequency and duration of immunisation sessions.

As vaccines are classified as Schedule 4 drugs, they must be administered by a medical practitioner, or an accredited immunisation nurse. Council currently contracts its immunisation service, which only uses accredited immunisation nurse vaccinators.

In Victoria, it has been recognised that the most effective way to deliver mass immunisation is through existing local government structures. The Victorian Health Management Plan for pandemic influenza (www.health.vic.gov.au/ideas/regulations/vic_influenza) outlines mass vaccination in an event where it is necessary to vaccinate or provide anti-viral prophylaxis to a large group of people in Victoria during an influenza pandemic.

The Victorian Health Management Plan for pandemic influenza outlines that Local Government immunisation teams will be responsible for providing pandemic vaccine, when it is available, to the identified priority groups/high risk groups.

A vaccine to combat a strain of influenza could take up to six months to develop. Once the vaccine becomes available there will not be enough initially to immunise everyone. Priority target groups will be therefore identified by the Department of Health that will be offered the vaccine first.

It is highly likely that the priority groups that will include essential services personnel (such as health care workers), groups at high risk of severe morbidity and mortality, groups in which the virus spreads rapidly (e.g. children) and groups without risk factors for complications (e.g. general public).

Proposed mass vaccination/immunisation centres in Strathbogie Shire are outlined below:

Venue name	Address	Facility details	Contact
<i>Wesley Hall</i>	<i>Bury Street Euroa</i>	<ul style="list-style-type: none"> • <i>capacity 200</i> • <i>signage – will be erected at the time</i> • <i>fully accessible</i> • <i>on street parking</i> • <i>separate toilets and kitchen for hand washing</i> 	Pandemic Plan Coordinator
<i>MCH Centre Euroa</i>	<i>Bury Street Euroa</i>	<ul style="list-style-type: none"> • <i>20</i> • <i>signage – will be erected at the time</i> • <i>fully accessible</i> • <i>on street parking</i> • <i>separate toilets and kitchen for hand washing</i> 	Pandemic Plan Coordinator
<i>MCH Centre Avenel</i>	<i>Avenel Hall, Queen Street Avenel</i>	<ul style="list-style-type: none"> • <i>10</i> • <i>signage – will be erected at the time</i> • <i>fully accessible</i> • <i>on street parking</i> • <i>separate toilets and kitchen for hand washing</i> 	Pandemic Plan Coordinator
<i>MCH Centre Violet Town</i>	<i>Hyacinth Street Violet Town</i>	<ul style="list-style-type: none"> • <i>10</i> • <i>signage – will be erected at the time</i> • <i>fully accessible</i> • <i>on street parking</i> • <i>separate toilets and kitchen for hand washing</i> 	Pandemic Plan Coordinator
<i>MCH Centre Nagambie</i>	<i>Vale Street Nagambie</i>	<ul style="list-style-type: none"> • <i>10</i> • <i>signage – will be erected at the time</i> • <i>fully accessible</i> • <i>on street parking</i> • <i>separate toilets and kitchen for hand washing</i> 	Pandemic Plan Coordinator
<i>Nagambie HealthCare</i>	<i>Church Street Nagambie</i>	<ul style="list-style-type: none"> • <i>100</i> • <i>signage – will be erected at the time</i> • <i>fully accessible</i> 	Amanda Fieldhouse CEO BH 5736 2900 0421 011 474

		<ul style="list-style-type: none"> • <i>on street parking separate toilets and kitchen for hand washing</i> 	
<i>Violet Town Bush Nursing Centre</i>	<i>Cowslip Street Violet Town</i>	<ul style="list-style-type: none"> • 10 • <i>signage – will be erected at the time</i> • <i>fully accessible</i> • <i>on street parking separate toilets and kitchen for hand washing</i> 	Felippe Rodriguez CEO BH 5798 1324 0409 981 324
<i>Euroa Health</i>	<i>36 Kennedy Street Euroa</i>	<ul style="list-style-type: none"> • 20 • <i>signage – will be erected at the time</i> • <i>fully accessible</i> • <i>on street parking separate toilets and kitchen for hand washing</i> 	Elena McShane, CEO BH 5795 0200 0429 494 024

Vaccinations packs sourced from the National Medical Stockpile will be given to affected municipalities by the Department of Human Services. These packs will include syringes and needles, alcohol swabs, sharps containers, disposable dishes and disposable gloves, hazardous waste bags and band-aids.

A media strategy to advertise session details will be developed by the Manager Communications, in line with Section 7 Support Arrangements of the MEMP and Section 12 of this Influenza Pandemic Plan.

Council will develop a process to ensure vaccination of priority groups is adhered to in line with advice from Council’s Environmental Health Office and the Department of Health.

A contact list of available staff and rostering plan for initial operations will be put in place according to the MEMP.

If support is required from neighbouring municipalities it will be the responsibility of the MERO to coordinate with their counterparts at the relevant Council.

As part of this plan there will be a requirement to call on community members who can be trained quickly and easily e.g. nurses to provide additional resources where required.

It should be noted that when calling on these people for assistance it must be verified that they have not been allocated to undertake different tasks, and therefore will be unavailable under this sub-plan. This will be coordinated by the Pandemic Coordinator.

All existing occupational health and safety procedures will remain and it is paramount that the health and wellbeing of council staff is maintained.

Personal protective equipment

Strathbogie Shire Council has decided not to invest in PPE (gloves, face masks, and protective body wear). This will be purchased when required. A modest stock of PPE is available via the HACC program stores.

Guidelines for PPE are contained with the Australian Health Management Plan for Pandemic Influenza – Interim Infection Control Guidelines for Pandemic Influenza in Healthcare and Community Settings.

9: Mass Fatality Plan

For more information please refer to Appendix 4 pg 58–59 Victorian Health Management Plan for Pandemic Influenza July 2007.

Identify and list capacity of funeral homes, cemeteries and crematoria within the municipality (including burial and cremation capacity).

Funeral business	Address	Capacity and plans for increased capacity	Contact
Mark J Floyd	107 Binney Street Euroa 3666	Up to 20; will refer to the Coronial Service Centre, South Melbourne for support in instances requiring greater capacity	5795 1086
Avenel Cemetery Trust	28 Queen Street Avenel 3664		Joyce White - Secretary 5796 2398
Violet Town Cemetery Trust			Yvonne Hargraves 5795 3387
Nagambie Cemetery Trust	376 High Street Nagambie 3608		George Pianta Secretary 57942557 Elaine Lodding
Longwood Cemetery Trust			Kerrie Tubb 5798 5387
Euroa Cemetery Trust	37 Hunter Street Euroa		5795 2335
Strathbogie Cemetery Trust			Anne Flynn 5790 5385 Andrew Barns 5790 5305

Religious and social considerations

There are no groups identified within the Strathbogie Shire that may require specific social or religious consideration.

The following is a list of community leaders and organisations that may be able to assist.

Name	Organisation	Role	Primary contact	Alternative contact
Rev. Patti Matthews Father Norman Hart	St Paul's Anglican Church, Euroa St Dunstan's Violet Town St Andrew's Longwood	Pastoral Care	5795 1335	
Fred Jungwirth	Victorian Council of Churches	Emergency Management Area Coordinator	5795 2021	0408443288
Pastor Bob Bruce	Euroa Baptist	Pastoral Care	5795 1896	

Father Tony Hill	Catholic Church St John's Euroa St Malachy's Nagambie St Attracta's violet Town St Patrick's Longwood	Pastoral Care	5795 3048	
Rev. Ken Martin	Balmattum Presbyterian Church	Pastoral Care	5762-6275	
George Deeble	Euroa Christian Fellowship	Pastoral Care	5795 3336	
Rev. Mark Blackwell	Violet Town Uniting Church Strathbogie Uniting Church	Pastoral Care	0458 366 136	
Helen Barton	Euroa Uniting Church	Secretary (Will alert minister who is to be appointed soon)	5795 1480	
Heather Tingay	Avenel Uniting Church	(Will alert minister who is to be appointed soon)	5796 2455	
Pastor G Grayden	Church of Jesus Christ Kelvin View Mission	Pastoral Care	57981259	

10: Delivery of Local Food Services

Identify and list facilities to prepare and deliver council food services and contact details. Include number of meals currently produced or anticipated to be required, where possible.

Euroa Health

All food suppliers come from Melbourne allowing for a constant supply of food into Euroa Health. The contractor, United Hospitality, can provide a range of staff from other sites if necessary. Satellite kitchens are available to supplement or replace Euroa Health if necessary.

All mobile/additional equipment necessary is already available and stored at Euroa Health.

Nagambie HealthCare

Capacity to produce an additional 100 meals, however in the event of 50% or more staff absence, this capacity would be reduced. A request would be made to Shepparton Villages to provide food, and pre-packaged food would be purchased with volunteers to assist in preparation. Volunteers (from Lions/Ladies Auxiliary etc.) would be asked to deliver meals to the community.

Facility/supplier	Role	Estimated food prep. time	Primary contact
Euroa Health	Food production	4 hours and daily food production	CEO Elena McShane 57950200 0429 494 024
Violet Town Bush Nursing Centre	Food production	4 hours and daily food production	CEO Felipe Rodriguez 5798 1324 0409 981 324
Nagambie HealthCare	Food production	3 hours and daily food production	CEO Amanda Fieldhouse 5736 2900 Mob 0421 011 474 Hotel Services Supervisor: Carolyn Fox Mob: 0428 819 162
Mi Kitchen	Food production	4 hours and daily food production	Business owner Peter McPhillamy 0438 354 785

List of delivery schedules—daily/weekly

Facility/supplier	Delivery type	Delivery time	Receiving facility
Euroa Health	Fruit, Vegetables, Bread	3 times per week	Stand up fridges – Euroa Health kitchen Storage containers and chest freezer Stand up fridges
	Dry goods and freezer		
	Meats and Chicken		
Violet Town Bush Nursing Centre	Fruit, Vegetables, Bread	3 times per week	Stand up fridges Storage containers and chest freezer
	Dry goods and freezer		
	Meats and Chicken		

Nagambie HealthCare	Fruit, Vegetables, Bread Dry goods and freezer Meats and Chicken	3 times per week	Stand up fridges Storage containers and chest freezer
Mi Kitchen	Fruit, Vegetables, Bread Dry goods and freezer Meats and Chicken	3 times per week	Stand up fridges Storage containers and chest freezer

Major suppliers to the municipality –

Suppliers on whom the municipality depend for services/ products	Contact person	Contact details	What effect will loss of services from this supplier have on the municipality?	What can the municipality do to lessen the reliance on this supplier?	Is a business continuity plan in place?
Violet Town Bush Nursing Centre	CEO Felipe Rodriguez	5798 1324 0409 981324	Major impact Provides Meals on Wheels for HACC clients in Violet Town Provides residential care services	Insert clause in Meals on Wheels contract for contractor to source alternative supply in emergency As a residential care provider, there should be provision in the organisation's emergency plan for food supply	Refer MEMP
Nagambie HealthCare	CEO Amanda Fieldhouse	5794 2666 0421 011 474	Major impact Provides Meals on Wheels for HACC clients in Nagambie Provides residential care services	Insert clause in Meals on Wheels contract for contractor to source alternative supply in emergency As a residential care provider, there should be provision in the organisation's emergency plan for food supply	Refer MEMP
Mi Kitchen	Business owner Peter McPhillamy	0438 354 785	Major impact Provides Meals on Wheels for HACC clients in Euroa	Insert clause in Meals on Wheels contract for contractor to source alternative supply in	Refer MEMP

				emergency	
Euroa Health	CEO Elena McShane	57950200 0429 494 024	Major impact Provides residential care services	Insert clause in Meals on Wheels contract for contractor to source alternative supply in emergency As a residential care provider, there should be provision in the organisation's emergency plan for food supply	Refer MEMP
Burtons Supermarket	Store Manager/Owner	Office number 5795 2004	Major impact – only supermarket in Euroa	Council is unable to influence this factor	
IGA Nagambie	Store Manager/Owner	Office number 5794 2943	Medium impact – only supermarket in Nagambie – however 15 minutes to Seymour which has three major supermarkets	Council is unable to influence this factor	
IGA VT	Store Manager/Owner	Office number 5798 1304	Medium impact – only supermarket in Violet Town however 15 minutes to Benalla which has three major supermarkets	Council is unable to influence this factor	

11: Business Continuity

Considerations have been made in Council's Emergency Management Plan to address significant staff shortages during a pandemic.

It is expected that most departments should be able to function for prolonged periods as required, however customer service and response times will be extended. Some non-critical facilities may face closure e.g. pools and sporting facilities.

Staff should be sufficiently trained to enable them to cover prolonged staff absences.

Staff may need to be redeployed from non-critical to critical service areas.

Instruction manuals should be available for each department, detailing roles and responsibilities. They should also detail how to carry out the core function of the relevant department.

All contractor based services are expected to have their own business continuity plan in place. A list of Council's contractors is maintained in the Municipal Emergency Management Plan.

If essential services were unable to continue operating Council would rely on DHS for support and direction.

Supporting staff and their families

During a pandemic, employees will likely be concerned and preoccupied about the well-being of their families. Their commitment, or ability, to work may not be their major concern. In the event of a pandemic, Council will consider the following requirements:

- allowing staff to have regular contact with their families to ensure they are safe and well
- investigate the possibility of providing periods during the day when staff can go home to check on their family
- the possibility of work from home arrangements
- the provision of paid and unpaid leave arrangements

Communication

Council through its ICT Department will ensure that Email and telephone services remain operational during a pandemic. Council will also ensure that its IT systems and data bases are functional and maintained to enable core services and particularly essential services to operate effectively.

Currently Council has some capability that enables a small number of staff to work remotely or from home. Should the need arise due to the introduction of 'Social isolation' requirements, preference shall be given to staff deemed by the Council's Emergency Management Group and Chief Executive Officer to be critical to the ongoing operation of Council's essential services.

Financial Implications

The extent to which Council would be affected by a pandemic depends on a range of factors, including geographical proximity, and the length and severity of the pandemic. Although

Council business activity may be reduced, costs would remain static in a number of areas (if no special arrangements are put in place) such as:

- staff salaries and wages, including paying leave entitlements
- rent and leasing costs
- payments to suppliers for contractual purchases
- loan repayments
- taxes (GST and FBT)

In the event of a pandemic, financial institutions may limit credit availability. Relying on credit arrangements with suppliers or financial institutions may result in extra pressures if creditors seek to protect their own financial positions. These scenarios are unlikely; however Service Units which would be relying on the continued supply of goods or services during a Pandemic would need to plan accordingly.

Service Units need to consider the following:

- supply shortages may lead to short-term price increases for uncontracted business inputs
- suppliers may be unwilling to provide goods or services without early up-front payment
- potential increase in requests for waivers from ratepayers

Finance, Procurement, Emergency Management and other Council Subject Matter Experts are expected to provide advice and assistance to Managers regarding provision of goods and services and purchase plans during a pandemic.

Insurance

Council has confirmed with our insurers that our insurance policies do not include business interruption coverage associated with a pandemic, but does provide limited cover for infectious or contagious disease, subject to policy wording criteria.

In the event of a pandemic in Australia, funding may be granted from State and/or Federal Governments. However, this cannot be relied upon and may or may not be announced or granted. A few adverse impacts of an influenza pandemic may be covered by some insurance policies. None of these insurances are currently held or have been held by Council. If an individual Service Unit determines this insurance is necessary for their operation, the Manager/Coordinator should discuss insurance needs with the Governance and Risk Officer.

Cleaning

Council reserves the right to suspend the use of its contracted cleaners, if it suspects this may further spread contamination. In this instance, staff will be expected to take responsibility for hygiene cleaning within their work area/office and other known communal places where there is a need to be thoroughly cleaned and disinfected. Communal area cleaning will be the responsibility of managers and overseen by Environmental Health Officers.

Air-conditioning

There is scientific and medical evidence to suggest that influenza can spread in internal spaces that are not adequately ventilated. All internal spaces should be well ventilated, preferably by fresh air via opening windows, or otherwise by properly designed and maintained air-conditioning systems.

As part of Councils' essential services and safety provisions maintenance program, contractors will be engaged to maintain the air conditioning systems regularly on a bi-annual basis.

In the event of an air conditioning failure during the pandemic, Council reserves the right to suspend the use of air conditioning and its contractors, if it suspects this may further spread contamination.

Vaccination

Council will promote and actively encourage annual influenza vaccinations for staff.

The following table identifies the essential business functions provided by and operating within the municipality.

Business Unit	Operational element/ function	What support systems/ groups are critical to these business functions?	What is being done to ensure this critical function will be maintained?
Information technology	Service and support, security, communications	IT systems including: Corporate Applications Email Corporate Records System (InfoXpert) Open Office - Community Confirm Exponare Website Intranet IPFX PABX Cisco phone system Department Applications Spear PM2000 (current, will change late 2013) OpenOffice - Health Manager MECC Central Cambron Xpedite City Manager Xpedite MCH Powerbudget Enviromon	Disaster Recovery Draft plan will be ready late 2013
Customer Service	Service information to the public	Outlook Confirm Website IPFX	Disaster Recovery Plan and virtual call centre implementation
Waste management	Collection of household garbage, facilitate transfer stations, recycling	Landfill sites Trucks staff able to drive the trucks	Contractors used for collection of waste & recycling; transfer stations can be

			supported by Council's workforce Equipment can be leased
Maternal and child health services	New births – initial home visits Breastfeeding – support and information Enhanced Services – for families with complex needs Key ages and stages visits – development of child	Xpedite Access to MCH Centres	Xpedite system maintenance can be done remotely by Software Owner Telephone consultations PPE for visits that must be face to face – only if nurses are not infected MAV support if staffing levels are unable to be maintained DHS Support for nurse staffing if required
Aged services: Home and Community Care	Domestic assistance Personal Care Respite Services Home Maintenance Social Support (PAGs) Meals on Wheels	Volunteers CCWs staffing Admin staff to roster Xpedite City Manager Software	Provide PPE to volunteers and staff Cancel non-essential services Cancel PAGs If necessary source alternative sources for meals
Essential traffic management services	Roads, Bridges, footpaths, maintenance & construction, buildings, reserves	GIS; IT systems; outdoor staff; equipment	Use of contractors if required Lease of equipment
Legislative functions (e.g. environmental health services)	Permits, inspections, health warnings, risks, compliance	Staff	Use of additional contract staff
Local Laws/Rangers	Pound, Fire Permits, Animal welfare, Animal strays & cruelty, footpath trading, parking, regulatory services compliance	Access to pound Access to property Contractors and staff Foresight (contractor)	Request support from DPI and RSPCA Use of additional contract staff
Emergency management functions	Municipal Emergency Management Plan Business Continuity Plan Disaster Recovery Plan Heatwave Plan Pandemic Plan	MECC Central Emergency management planning group	Plans are available as hard copies and also on intranet and internet via MECC Central Manual processes available if no internet access
Human Resources	Payroll; Personnel information & Files,	Payroll system Standard IT systems to access	Staffing levels and cross-functional

	EAP, Income Protection, EBA, Recruitment, Policies & Procedures, Workcover, Employee agreements/contracts, Training, Development	information	training – Managed by OD Manager
Finance	Rates, Debtors, Creditors, Grants	Finesse Standard IT systems	Manager Finance to arrange backfill; coverage of staff and systems if required

The below list provides details of the core people required to keep essential parts of the municipality operating. It identifies and lists core skills they require in the role

Name	Role	Core skill
Keira Bodycoat	Payroll	Payroll processing
Purdey Wikman	Communications	Media management
Greg Underhill	IS/IT coordination	Network support
Kelli Hill	Aged Care Rosters	City Manager rosters
Jane Davey	MCH Nurse	MCH nursing for new mothers; Assessment and support for babies/children with health or related needs Advice to parents Breastfeeding support
Andrea Richards	Manager Customer Relations	Customer Service
Contractor EHO	Environmental Health	Assessment
Contractor After Hours Service	AH Customer Service	Administration/referral of AH queries

Replacements for these people and skills if there is a high level of staff absence

Primary role	Identified staff member	Identified back up staff member	Contact
Payroll	Keira Bodycoat	Rebekah Smyth	HR have contact details
Communications	Purdey Wikman	Sophie Anderson	HR have contact details
IS/IT support	Nicole Hose	IS/IT user application support	Nicole Hose
Aged Care Rosters	Kelli Hill	Lyn Quattrochi Lyn Nichols Marietta Martin	HR have contact details
MCH Nurse	Jane Davey	Janet Haensel Barb Smith Judy Duff	HR have contact details MCH Nurses have contact details
Customer Service	Andrea Richards	Kylie Dowell	HR have contact details
EHO	Contractor	Contractor to supply	Contact in MEMP

After Hours Service	Contractor	Contractor to supply	Contact in MEMP
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Impacts of staff shortages on municipal and other business.

Business area	Number of essential staff	Estimated impact of staff shortage
Payroll	1	Unable to process payroll
Communications	1	Unable to manage media; emergency messages; enquiries; key messages
IT	1	Risk to IT systems Break downs of hardware Impact on all areas of council completing essential tasks
Aged Care	12 – minimum required for rostering and delivering services	Cancellation of non-essential services Inability to roster services Impact on processing – payroll, invoicing for services
MCH Nursing	1	Babies and mothers may be at risk if they have high needs or complications Breastfeeding problems may go unaddressed Some families at risk may not be referred appropriately or obtain sufficient support
Customer Service	2	Unable to process enquiries from public; cause customer complaints; urgent referrals not made; direct impact on customers and community; loss of reputation
After Hours Service	1	Urgent queries not handled in timely way; hazards not dealt with quickly; loss of reputation to Council

In addition to the back-up staff identified, and to avoid unnecessary duplication Council relies on its MEMP to call up extra staff / volunteers where required. The MEMP also lists time critical and business continuity functions.

Arrangements to coordinate/operate staff business tasks remotely, using telephone, fax and email are described in the Business Continuity Plan with technical details of the infrastructure outlined in the Disaster Recovery Plan.

The systems that rely on periodic physical intervention by key individuals to maintain minimum function are:

Corporate Applications

- Email
- Infovision *
- Open Office - Community
- Confirm *
- Exponare
- Website

- Intranet *
- IPFX PABX
- Cisco phone system

Applications

- Spear
- PM2000
- OpenOffice - Health Manager
- MECC Central
- Cambron
- Xpedite City Manager
- Xpedite MCH
- Powerbudget
- Enviromon

The estimated length of time these identified systems are able to function without attention is listed in the Strathbogie Shire Council IS/IT Disaster Recovery Plan.

Infrastructure to support changes in business operation (e.g. computer networks or internet access) is identified in the Strathbogie Shire Council IS/IT Disaster Recovery Plan.

As part of the planning process, it is important that each contracted agency understands their roles and responsibilities in the event of a pandemic.

Contractor-based services that may be impacted and the estimated extent of impact on service delivery are outlined in the tables above and in the MEMP. At this stage, the contracts for each contractor do not include a requirement to outline their role and responsibility in the event of a pandemic. Future action will be taken to ensure that new contracts of critical services include an appropriate clause that delivers this outcome. Future reviews of this Pandemic Plan will outline the details of each contractor delivering critical functions; the clause in their contract that shows the impact of failure on their function; the primary contact and alternative contact; and their capacity to sustain service delivery.

The Pandemic Coordinators will consider the plans and alternative arrangements together, with the organisations' interdependents, such as suppliers, customers, or other key stakeholders affected by the loss of the municipality's essential services or critical infrastructure at the time of a Pandemic. Actions will be developed by the Pandemic Sub-Committee.

12: Strategy for Community Information Provision

Strathbogie Shire Council has developed media and communication messages that inform the community and staff of any changes to normal municipal service delivery.

Key messages in the communication plan include:

- What Council is doing about influenza pandemic planning
- Accurate information about hygiene and pandemic awareness
- Any changes in arrangements for service delivery to the community by Council
- Immunisation / vaccination programs

Media Contacts are listed below:

Community Bulletins:

Violet Town Online: lynndarr@bigpond.net.au

Nagambie Voice:

ncv@live.com.au

Ruffy Community Newsletter:

jjmhagen@yahoo.com.au

Tableland Talk:

f.a.townsend@activ8.net.au

Village Voice Violet Town:

terryf@activ8.net.au

Regional Newspapers:

Shepparton News:

editor@sheppnews.com.au

Seymour Telegraph

telegraph@mcmedia.com.au

Benalla Ensign

beneditor@benalla.net.au

Euroa Gazette

editor@euroa-gazette.com.au

Shepparton Adviser

editorial@sheppartonadviser.com.au

Metropolitan Newspapers:

Herald Sun:

newsdesk@heraldsun.com.au

The Age

newsdesk@theage.com.au

The Australian

nsw@theaustralian.com.au

The Weekly Times

sellarsp@theweeklytimes.com.au

Radio:

Dowling.matt@abc.net.au

pattison.gaye@abc.net.au

jess.allison@abc.net.au

Graham.narelle@abc.net.au

Longmore.justine@abc.net.au

Jacinta.Bolling@macsc.com.au

Leanne.Hulm@macsc.com.au

gm@fm985.com.au

Television

Seven News:

melbnews@seven.com.au

jtwhite@seven.com.au

Nine Network:

gtnnews@nine.com.au

Ten Network

news@scten.com.au

ABC News

tvnews.abcvic@abc.net.au

Target Audience	Communications Systems	Key Messages	Information Resources
Key Agencies and Stakeholders	<ul style="list-style-type: none"> • Fax • Direct mail • Email • Direct discussion (meetings) • Website • Telephone message 	<ul style="list-style-type: none"> • Relevant information on the pandemic response & current status of the pandemic • Notice of all public communications 	As determined by the Pandemic Influenza Management Committee (MEMPlan)
Health Care Providers	<ul style="list-style-type: none"> • Fax • Direct mail • Email • Direct discussion (meetings) • Website • Telephone message 	<ul style="list-style-type: none"> • Relevant information on the status of the pandemic • Notice of all public communications • Vaccination & antiviral priorities & rationale • Recommended control measures • Recommended monitoring of adverse vaccine events and mechanisms for reporting 	As determined by the Pandemic Influenza Management Committee (MEMPlan) plus: <ul style="list-style-type: none"> • Fact sheets for patients on influenza, vaccine, antiviral • Schedules for community clinics • Protective measures and contact numbers
Council Resident and affected populations within the municipality	<ul style="list-style-type: none"> • Media releases, press alerts • Press conferences • Extended hours of telephone services and / or recorded message • Website both Council and State • Public presentation and community forums 	<ul style="list-style-type: none"> • Relevant information on the status of the pandemic • General information on influenza, protective measures, vaccine and antiviral • Announcements regarding public health measures being taken (school closures, travel restrictions, etc.) • Rationale for priority groups for vaccine and antiviral • Schedules for mass vaccination clinics • Announcements regarding changes in provision of health care / emergency services • Actions people can take to cope with the effects of influenza 	As determined by the Pandemic Influenza Management Committee (MEMPlan) including Fact sheets relevant to groups in the municipality such as: <ul style="list-style-type: none"> • High risk (based on epidemiology data), children, health care workers and emergency service providers • General community on influenza, vaccine, antiviral, protective measures and contact numbers

The Victorian Government has developed a communication strategy to strengthen pandemic preparedness at state, regional and local level and ensure that timely, informative and consistent messages are provided to the wider community. The strategy supports the Australian Government Department of Health and Ageing Communication Strategy, while accommodating Victorian circumstances.

For further information on this strategy, refer to:

<http://www.health.gov.au/internet/panflu/publishing.nsf/Content/comms-strategy-1>

Excerpt from the Human Influenza Pandemic Whole of Victorian Government Communication Strategy Overview available at:

www.health.vic.gov.au/pandemicinfluenza/downloads/wovg_communication_strategy_overview.pdf

Municipal communication plan

Objectives	Messages	Approach
<ul style="list-style-type: none"> • clarify operational responsibilities • equip and encourage municipality to prepare • ensure communication channels are clear and two-way 	<ul style="list-style-type: none"> • There is a Victorian Influenza Pandemic Plan • You are crucial • You should do your business continuity planning now • Scenario plan for 30 per cent employees absent • We will support you; here's how • Tell us now what else you need 	<ul style="list-style-type: none"> • Partner with Local Government Victoria (LGV) and Municipal Association of Victoria (MAV) • Where possible, ensure that a single source in DHS is communicating with local government CEOs • Hold operational and communication dry-runs to ensure channels are open and seriousness is clear • Provide tools for them to disseminate to local groups and individuals • Provide checklists that stress the importance of hand hygiene and cough etiquette

13: Community Support and Recovery

Please refer to the Victorian Human Influenza Pandemic Plan: Community Support and Recovery Sub Plan and Part 4 of the Emergency Management Manual Victoria—State Recovery Arrangements for more information.

Potential social and economic impacts:

- increased levels of uncertainty, fear and anxiety
- breakdown of community support mechanisms
- increased numbers of vulnerable people and emergence of new groups
- high workforce absenteeism
- wide spread economic disruption

Identify the range of impacts that an influenza pandemic may generate in the municipality.

Impact as a result of an influenza pandemic	Consequence to the community
Staff absenteeism	Reduced ability to deliver basic services, including HACCC, MCH, Customer service, mobile services, asset/road maintenance
Community Concern	Need for accurate and consistent information and messages to minimise rumours and misinformation

Identify the range of services that may be required to support a community affected by an influenza pandemic.

Recovery service	Organisation	Role	Primary contact	Alternative contact
Municipal Recovery Manager	Strathbogie Shire Council	Coordination	Caroline Harlow 0437 680 303	5790 3378
Deputy Municipal Recovery Manager	Strathbogie Shire Council	Coordination	Lyn Nichols 0418 657 066	5790 3385
Deputy Municipal Recovery Manager	Strathbogie Shire Council	Coordination	Robbie Rae 0499445979	5795 2121
Deputy Municipal Recovery Manager	Strathbogie Shire Council	Coordination	Anna Clabburn 0409601948	
Deputy Municipal Recovery Manager	Strathbogie Shire Council	Coordination	Andrea Richards 0410326049	5794 2103

List agencies identified to support the affected community

Agency	Recovery service responsibility	Role	Contact
Refer Part 5 Response Arrangements; and Part 8 Contact Directory of Strathbogie Shire Council MEMP			

14: Contact List

This information is contained in the Strathbogie Shire Council Municipal Emergency Management Plan (MEMP). Refer to Part 8 Contact Directory.

15: Review and Exercise Schedule

This Pandemic Plan is a sub-plan of the Municipal Emergency Management Plan prepared under Section 20 (1) of the *Emergency Management Act 1986* and as such is subject to the audit provisions as detailed in Section 20A of the *Emergency Management Act 1986*.

To be prepared for an influenza pandemic, it is important to regularly review and exercise this plan (as part of the Municipal Emergency Management Plan) and make amendments, as required.

The Plan will be exercised annually, in accordance to the Strathbogie Shire Council Municipal Emergency Management Plan review cycle, and as directed by the CEO of Strathbogie Shire Council.

The exercise format will be determined by the Strathbogie Municipal Emergency Management Planning Committee.

Feedback to assist in evaluating the plan will be coordinated by the Pandemic Coordinator and recorded as part of the overall approach to evaluating Strathbogie Shire Council's Municipal Emergency Management Plan.