Municipal Public Health Emergency Management Plan

Sub-plan of the Municipal Emergency Management Plan

2019 - 2021

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Northern Grampians Shire Council

Version Control

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Disclaimer
The information provided in the EHPA Municipal Public Health Emergency Management Sub Plan is compiled from professional knowledge, experience and as well as various sources and literature and has been solely prepared for the purpose of assisting environmental health professionals in preparing for, mitigating and managing public health risks in an emergency and to provide consistency in application across Victorian municipalities.

While all efforts have been made to ensure content accuracy, EHPA is not responsible for any direct or indirect damage or loss arising from the use of this information and material contained within these guidelines and template.

EHPA reserves the right to make any changes to the guidelines at any time without notice.

Contents

Introduction

In any emergency event, public health risks or incidents can add to the hazards confronting the community and emergency services personnel. Plans must be prepared in advance to enable such risks to be effectively eliminated or mitigated.

The Northern Grampians Public Health Emergency Management sub-plan (PHEMP) is a subordinate plan of the Northern Grampians Municipal Emergency Management Plan (MEMP). It exists and operates within the context of Commonwealth, State and municipal emergency management arrangements.

The PHEMP may also operate in conjunction with the regional and/or state public health plans, without activation of other local arrangements.

The PHEMP records local public health emergency management arrangements. This includes notification, identification of available resources and specific instructions as to how resources should be used.

Officers with roles and responsibilities detailed within the PHEMP should have a comprehensive knowledge of the PHEMP, prior to an emergency.

The PHEMP should be read in conjunction with the MEMP and the Emergency Management Manual Victoria (EMMV).

Provisions for appropriate training of EHP's and their participation in the planning process are included in the PHEMP.

Authority

The PHEMP a subordinate plan of the Northern Grampians MEMP, was developed pursuant to the *Emergency Management Act 1986 and 2013*, endorsed by the Municipal Emergency Management Planning Committee (MEMPC) on 7/8/2019 and adopted by Council on 2/9/2019.

Municipal officers and other personnel with roles and responsibilities in emergency management have been authorised by Council through their appointment and delegation of legislated functions and powers of Council.

Municipal officers delegated with this authority may include officers holding any of the following positions (or equivalent):
- Manager Environment and Community Safety
- Coordinator Development Services
- Environmental Health Officers
- Environmental Health Technician

Other officers may also be authorised to perform specific public health functions.

Key legislation covering functions, powers and authorisations of EHP's includes the following Acts and their associated regulations:
- *Local Government Act 1989*
- *Public Health and Wellbeing Act 2008*
- *Food Act 1984*

- S*afe Drinking Water Act 2003*
- *Environment Protection Act 1970*
- *Emergency Management Act 1986 and 2013*
- *Residential Tenancies Act 1997*
- *And any Local Law that may apply*

Reference may also be made to the drinking water guidelines in an emergency. This document along with other relevant guidance material can be located on the Department of Health and Human Services website. https://www2.health.vic.gov.au/public-health/water/drinking-water-in-victoria

Aim

To PHEMP aims to protect the community and emergency management personnel from public health risks generated by an emergency or incident and to be proactive in taking preventative action to minimise the spread of potential public health risks.

Example:
Through the development and implementation of the PHEMP, the Northern Grampians Shire Council aims to mitigate and manage public health risks in emergencies that affect the shire/municipality.

Public health emergency management planning supports the Emergency Management Victoria (EMV) "all communities, all emergencies" approach to municipal emergency management and will provide for relevant information to be recorded in either the PHEMP or the MEMP, as appropriate.

Purpose

The purpose of the PHEMP is to provide for the development and implementation of public health emergency management arrangements. It outlines the municipality's arrangements for the operational management of public health duties.

The PHEMP will be predominantly utilized by municipal environmental health professionals, along with other personnel listed within the PHEMP and provide public health support to the municipality in an emergency.

Municipal employees with responsibility for implementing the PHEMP are expected to have a thorough understanding of emergency arrangements <u>before</u> an emergency arises.

The PHEMP will also be used as a training tool, to develop staff skills and understanding.

The contents of this PHEMP aim to contribute to efficient emergency response in situations of potential, imminent or actual public health risks.

Scope

The PHEMP describes local arrangements for public health emergency management and addresses the following risk areas:

- food safety (including donated food)
- safe and adequate water supply
- infectious disease control
- Emergency shelter and accommodation
- waste collection and disposal
- wastewater management
- emergency toilets and ablution facilities

- vermin and vector control
- pollution of water, land and air
- public health risks from the emergency or incident, including extreme heat events
- Non-major emergencies for example single house fires, building/structure fires incorporating registered premises.

The roles and responsibilities of the disposal of dead stock and other animals is covered in the municipal Animal Welfare Sub-Plan. Agriculture Victoria provides a template for this sub-plan at - http://agriculture.vic.gov.au/__data/assets/word_doc/0008/323747/MUNICIPAL_EMERGENCY_ANIMAL_WELFARE_SUB.docx

The PHEMP applies to emergencies that are a direct consequence of a natural event, such as flood and wildfire, and other emergency events, such as disruption to essential services, major accidents or terrorist activity. It can also be used as a guide for municipalities' support role in specific public health emergencies. It applies to specific settings such as Emergency Relief Centres (ERC's) where public health risks need to be managed.

The PHEMP includes contact directories, activation and communication procedures and the roles and responsibilities of municipal EHP's and other external agencies providing public health and related services in an emergency. It covers planning, training of staff and available resources.

Standard operating procedures (SOPs) address some key activity areas. These are supported by checklists, where necessary (refer to **Appendix K**).

Planning

Outlined below are key public health emergency management planning processes and arrangements for preparing the municipality for a public health emergency.

Risk management process
The MEMPC undertakes a Community Emergency Risk Assessment (CERA) process to identify and rate emergencies within the municipality. These risk ratings are detailed in the MEMP which will determine the requirement for sub-plans relating to specific emergencies to be developed.
Refer to section of the MEMP which identifies the CERA process and community emergency risks.

A risk management approach was used in the development of this PHEMP. A summary of the process and the identified public health risks is outlined in **Appendix A** of this PHEM.

Relevant information includes:
- key data, geographic and demographic information relating to public health in the municipal district
- Identify public health risks
- public health prevention strategies
- information about public awareness and education campaigns and other action taken to increase community resilience

Prevention strategies
A municipality protects public health through ongoing prevention strategies and programs. However, during the emergency management planning process, new prevention strategies have been identified for development and implementation.

The municipality's plan to develop and implement strategies to eliminate and/or reduce potential or actual public health emergency risks has been recorded in **Appendix B** of this PHEMP.

Community resilience

The public health risk management process identified public health risks that could be eliminated or controlled by an informed and resilient community.

Strategies for building a community that is resilient to public health emergency risks have been identified for development and implementation and are recorded in **Appendix B** of this PHEMP.

Training

Training of EHP's is an essential component, and will assist effective and efficient outcomes in relation to public health emergencies.

A training plan to contribute to the development and maintenance of emergency management skills, knowledge and competencies for EHP's is attached at **Appendix C** of this PHEMP.

Exercises

Exercises conducted by the municipality in conjunction with other agencies enhance the training of emergency management personnel and allow for the testing of emergency arrangements.

EHP's will participate in relevant exercises arranged by the municipality and other agencies, in accordance with the MEMP. This is included in **Appendix C** of this PHEMP.

Development of the PHEMP

This PHEMP has been developed to assist with the management, mitigation and abatement of public health risks in an emergency.

The PHEMP adopted by Council has been developed by the municipal EHP's, in consultation with the MEMPC and other internal and external personnel with roles and responsibilities in local emergency management arrangements and public health emergency planning.

EHP's should participate on the MEMPC and representatives will be recorded in the MEMP. Representation will:
- promote an understanding of public health emergency management issues, roles, responsibilities and the emergency capacity of the municipal Environmental Health Department, contribute to the establishment and maintenance of effective working relationships with all relevant emergency management personnel
- contribute to conversations and decisions around public health issues
- contribute to a better understanding of existing and future interagency capacity.

Review

The PHEMP will be reviewed by the Northern Grampians Shire Council and updated as follows:
- at least annually
- following any emergency event involving activation of the PHEMP
- following a briefing or exercise that identifies issues in the PHEMP.

A record of amendments and/or versions will be maintained at the front of this PHEMP.

Distribution

Relevant sections of PHEMP will be distributed to the following emergency management personnel:

- Municipal Emergency Manager (MEM)
- Municipal Emergency Resource Officer (MERO)
- Municipal Recovery Manager (MRM)
- Department of Health Regional Environmental Health Officer (REHO)
- Department of Health & Human Services Senior Divisional Public Health Officer (SDPHO)
- Other internal or external personnel, where appropriate
- Crisisworks file library (council's web-based municipal emergency coordination centre program)

Contact directories will not be distributed with the PHEMP, other than as described in the section titled *Contact directories*. A distribution register is located at **Appendix E** of this PHEMP.

Resources

The municipality will maintain personnel, equipment and services in preparation for public health emergency management activities.

Internal resources, personnel, maintenance procedures and schedules are listed in **Appendix D** of this PHEMP.

Equipment
Personal Protective Equipment (PPE)
Equipment for the personal protection of municipal staff in an emergency will be organised prior to an emergency. Council has a responsibility to ensure that all PPE meets legislative Occupation Health and Safety requirements and relevant Australian Standards.

PPE will not vary greatly from that which is required by an EHP performing their normal duties.

Public Health Emergency Kit
This list includes a range of items that may be required to perform public health tasks.

Communication systems
It is preferable that normal communication arrangements are continued during an emergency. Some situations may necessitate the use of alternative arrangements, such as two-way radios.

Transport
Arrangements for transport, including after hours arrangements, have been developed in conjunction with the Emergency Management Coordinator, MERO, and other council policies.

Maintenance
Equipment maintenance is included in review of the PHEMP. This will ensure that the contents of the kits are in good working order and in appropriate quantities.

External resources and suppliers
A list of resources available from external suppliers is at **Appendix F** (as part of the Public Health Contact Directory). The list includes the contact details for suppliers and will be checked at least annually and following a public health emergency event or incident. The check will include the following:
- appropriateness of listed resources
- accuracy of supplier contact details
- capacity to supply the listed resources, including quantities and potential timelines for supply
- other details that may assist timely resource delivery, including information on formal service agreements or contract arrangements.

Contractors

Local agencies (external) and municipal departments have confirmed that they have systems in place to address public health risks within their area of responsibility and they have the ability to respond and/or assist in an emergency. These contact details are located in **Appendix F** of this PHEMP.

The roles and responsibilities of external agencies are recorded in the Part 7 of the EMMV**.**

Public information resources

Public information resources can help to address the range of public health risks identified by the risk management process.

While generic public information will be available from control agencies, basic *specific* local information has been developed in consultation with control agencies.

These public information resources are located in **Appendix F** of this PHEMP. Also see the '*Disseminating information and warnings'* section. Ensure version control is maintained for any documents produced by Council.

Emergency Management Victoria (EMV), via their Vic Emergency webpage, provide *" incidents & warning*" information and "relief & Recovery" information pertaining to specific incidents.
Refer to https://www.emergency.vic.gov.au/respond/

Emergency Management Common Operating Picture (EM-COP)

EM-COP is a web-based information gathering, planning and collaboration tool that runs on any full screen device with a modern browser such as desktop computers, laptops and tablets. EM-COP is designed to provide authorised users with a simple way to gather, organise, create and share emergency management information between emergency managers at no cost to agencies.

EM-COP can be used in any control centre, shire council, not-for-profit relief organisation, essential service provider or on the ground by an authorised user.

EM-COP is used before an emergency (to help plan and prepare), during and after an emergency (to assist with recovery). EM-COP can also be used to manage planned events
https://cop.em.vic.gov.au/sadisplay/main.seam

Resource sharing between councils

Memorandum of understanding (MOU) (**Resource sharing between councils**)

Any partnerships that have been developed between the municipality and other resource providers for the purpose of supporting the Northern Grampians Shire Council EHP's in emergency planning, preparation, response and recovery functions and activities have been formalised through an MOU or other official documents. Copies of these documents should be contained in the MEMP however an example is provided in **Appendix G** of this PHEMP.

MAV Protocol for Inter-Council Emergency Management resource sharing

This protocol was developed to provide an agreed position between councils for the provision of inter-council assistance in the form of human resources, equipment and/or facilities for response and recovery activities during an emergency. It therefore includes, but is not limited to, resources required to address public health issues associated with emergencies. Councils are requested to formally commit to the protocol by signing and returning the letter template attached to the document on their website https://www.mav.asn.au/what-we-do/policy-advocacy/emergency-management/protocol-for-inter-council-resource-sharing

The protocol details the process for initiating requests for resources from another council and identifies associated operational and administrative requirements. The application of this protocol is expected to enhance the capability of councils to provide the best possible outcomes for emergency management and to support the step up arrangements as detailed in the EMMV.

During a large scale event, agencies such as the MAV or DHHS may call for experienced, qualified volunteers, with permission from management, to be deployed within the state as required.

Public health emergency management responsibilities

Municipal
The tables below summarise the municipality's public health responsibilities in an emergency. Part 7 of the EMMV is the most up to date resource for roles and responsibilities of any agency.

These tables are neither exhaustive nor exclusive. Activities will be determined by the nature of the emergency and the incidents and circumstances arising from it.

Table 1: Emergency incidents—municipal public health responsibilities

Emergency incidents	Responsibilities
Natural emergency event Examples: ● wildfire ● flood ● storm	Identify critical public health risks. Refer to checklist '*Checklist for public health risks in an emergency*' in **Appendix J** Take appropriate immediate action to manage and control critical public health risks. Conduct post-impact assessment, which is a detailed assessment of the damage to the affected area, including public health risks in the community eg: including damaged housing and registered premises. Provide the community with information and advice. Communication with other agencies. Oversee and inspect public health aspects of rebuilding and re-development.

Essential service disruption ● electricity ● gas	Conduct investigations and field inspections to identify and assess public health risks associated with commercial, community and domestic properties. Provide the community with information and advice. Communication with other agencies.
Contaminated food Including: ● biological ● chemical and ● physical	Support control agency in the investigation and management of food related incidents. Support may include: ● food sampling ● assistance with food recalls ● assistance with outbreak or illness investigations ● facilitating the distribution of information and advice ● Inspection of registered food buinesses

Contaminated drinking water Including: ● biological ● chemical and ● physical	Support control agency in the investigation and management of drinking water contamination incidents. Liaise with the local water authority regarding its implementation of protection strategies, which may include facilitating, supplementing or replacing the supply, disinfection and/or distribution of new water supplies. Facilitate the distribution of information, approved warnings and advice to the community.
Gastrointestinal illness outbreak May include gastrointestinal illness in fire management camps, staging areas and emergency relief centres	Liaise with emergency caterers during setup if he catering is hapening on site. Support control agency in the investigation and control of gastrointestinal illness outbreaks. Support may include: ● obtaining samples ● assistance with food recalls ● assistance with illness investigation ● facilitating the distribution of information and advice ● Undertake inspections of the temporary food kitchen if required within the EM staging areas.
Other infectious disease outbreak Examples: ● vector-borne disease ● legionnaires disease ● endemic disease ● zoonotic disease ● Ebola virus disease	Support control agency by facilitating the distribution of approved warnings, information and advice to the community and by implementing protection strategies.

Vaccine-preventable illness/disease outbreak Examples: ● meningococcal disease ● hepatitis A ● measles ● seasonal/pandemic influenza	Support control agency in the conduct of vaccination sessions. Support may include the following: ● locating or providing suitable vaccination venues ● distributing information and advice to the community ● assistance with coordinating vaccination sessions, including the collection of clinical data ● providing refrigeration and storage areas ● receiving vaccines and equipment ● providing personnel ● providing local information ● providing waste management facilities ● implement municipal Influenza Pandemic sub-Plan
Emergency incident arising out of a mass gathering event	Liaise with the first aid agency Support control agency in the investigation and management of emergency incidents. Support control agency by facilitating the distribution of information and advice to the community.
Hazardous materials incident Examples: ● fires and explosions with hazardous materials (such as asbestos) ● soil contamination ● industrial chemical spills or releases (HAZMAT incidents) ● disposal of toxic wastes ● spills or releases in domestic premises (eg: Clandestine labs)	Support relevant agencies by facilitating the distribution of information and advice to the community. Liaise with relevant authorities to ensure implementation of environmental clean-up and other protection strategies. Issue notices for clean up if required.
Other public health risks Includes infectious diseases, incidents involving water and other biological incidents. Examples: ● blue-green algae ● wastewater treatment and septic tanks ● recycled water ● rainwater tanks	Support control agency in the investigation and control of incidents. Provide information and advice to the community and/or individual property owners Implement protection strategies. Undertake an investigation Collect samples for analysis if required Take enforcement action if required.

CBR incident (chemical, biological, radiological, nuclear and explosive) Examples: ● chemical warfare agents (such as nerve and blister agents) ● intentional release of biological agents (such as anthrax and smallpox) ● transport of industrial and medical wastes ● waste disposal ● exposure to an intact radiological source ● 'Dirty bomb' explosion containing radiological substance	Support control agency by facilitating the distribution of information and advice to the community.

Table 2: Emergency circumstances—municipal public health responsibilities

Emergency circumstances	Responsibilities
Emergency relief centres	Inspect, monitor and ensure the protection of public health in emergency relief centres. Manage public health aspects of donations, including material aid and food. Support sanitation and waste management
Emergency Catering	Inspect, monitor and supervise safe food handling practices. Coordinate a visit by an EHO at the setup stage of any temporary kitchens to ensure compliance
MECC and other ECC's	Liaise with the MECC and other emergency coordination centres. Insist on a public health representative in the MECC

Establishing a community recovery committee	Participate as a member of the community recovery committee. Assist with identifying, developing and implementing public health strategies. Note: Strategies may be linked to the Municipal Public Health and Wellbeing Plan, the Community Safety Plan, or other corporate planning process. Gather and feedback information to the MERO and/or MRM for the information of other appropriate response agencies.

External agencies

Information on the control and support roles of agencies is contained in Part 7 of the EMMV. Local arrangements, including the local roles and responsibilities of control and support agencies, are contained in the MEMP.

Appendix H contains a more detailed outline of the public health role and responsibilities of the role of DHHS.

Notification, activation and escalation

Notification
The following personnel, or their delegates, will be notified of emergency incidents and circumstances that require (or may require) activation of the PHEMP:
- MERC
- Manager Environment and Community Safety
- Coordinator Development Services
- MERO
- MRM
- Manager Emergency Management/Coordinator/Officer at Municipal Level
- Senior Divisional Public Health Officer

Activation
Emergency management arrangements are in place at all times. Arrangements are scaled up or down according to the incident. Operational activities in the PHEMP will be initiated by an Environmental Health Officer:
- at the request of MERO
- at the request of MRM
- after consultation with DHHS, or
- following consultation with the MERO and or MRM, if an Environmental Health Officer considers it appropriate.

The alert, standby and deployment phases may occur concurrently.

Alert
Once an Environmental Health Officer is notified or alerted to the emergency, they will:
1. Notify the MERO, MRM and/or the SDPHO
2. With such assistance as required, assess emergency information

3. Alert and brief relevant municipal EHP's (and other officers as appropriate).
   Line managers should also be informed of the notification/alert.
4. Alert and brief neighbouring municipalities and any partners.

The Environmental Health Officer and EHP's will remain contactable until further notice.

Standby
The designated Environmental Health Officer will:
1. Receive and assess information indicating that public health emergency management activity may be required.
2. Brief relevant municipal EHP's and other officers and place them on standby.
3. Keep in contact with officers and stakeholders on alert (including the SDPHO), to keep them informed of the current situation.
4. Receive and conduct update briefings with officers on standby.

Resource requirements will be reviewed as situation reports are received. EHP's placed on standby may be asked to report to a central location, such as a MECC, depending on the situation. EHP's on standby will prepare themselves and make ready all resources required and be capable of immediate response.

Deployment
The Manager Environment and Community Safety will:

1. Activate municipal EHPs, support agencies and other officers to conduct field assessments (may include Post Impact Assessment) manage and control public health incidents and/or risks, in accordance with briefings and relevant SOPs.
2. Remain in communication with the MERO and attend any briefings. The MERO will be advised of any staff deployed to the field.
3. Remain in contact with activated officers, manage tasks, communicate new information, and monitor resources and monitor officers' wellbeing.
4. Communicate with officers and agencies who have been placed on alert and/or standby, to keep them informed of the current situation.
5. Manage rosters, stand-down of officers and activation of others, as required in liaison with human resources department as required.
6. Purchase additional supplies (as required) for the emergency. This will be done in accordance with procedures established by the MERO, including the keeping of financial records.
7. Arrange for additional human resources (including requesting resources from support agencies via the MERO) and further escalation of emergency arrangements, if required.
8. Facilitate communication of appropriate information to the public.
9. Constantly assess available information on the situation, to ensure that response to the emergency and/or recovery activity is appropriate.

The Manager Environment and Community Safety may delegate any of these functions, and in the absence of the Manager Environment and Community Safety, these functions shall vest in the Coordinator Development Services. In the absence of both parties, these functions shall devolve to the MERO.

Stand-down
In an ongoing emergency, rostered staff may be stood down temporarily from deployment, but will remain on standby.

Once it is clear that a public health emergency response is no longer required, all staff and partners on alert, standby or deployment will be stood down from emergency response activities.

Rostering for recovery activities may continue.

Escalation

Where the resources required to satisfactorily complete a task are beyond the municipality's capacity, the Manager Environmental and Community Safety will seek additional resources, in accordance with established arrangements or agreements.

Requests for support should be made as early as possible.

The Manager Environmental and Community Safety will liaise with the MERO, MRM and then the SDPHO regarding the need for additional resources.

Supplies will be purchased in accordance with arrangements established by the MERO, including the keeping of appropriate financial records.

Communication management

Briefings

Briefings should take place as soon as possible, once the most immediate facts are available. Initially, only limited information may be available, but ongoing briefings will take place during the emergency. All staff starting a shift must be briefed before the day's activities.

EHP briefings will include:
- a situation report, including the nature of the emergency, the location and severity
- emergency management arrangements, including which agency is the control agency for the emergency and which support agencies are known to be activated
- the nature and extent of public health risks and how they are to be managed
- details of any partners on alert, to provide support if required
- operational roles and responsibilities of the officers, including:
  - key tasks to be performed by each officer and the SOPs that apply
  - task locations
  - key timings
  - resources and supplies to be utilised, including PPE
  - arrangements to ensure Environmental Health Officers remain in contact.

Once briefed, the Duty Environmental Health Officer will gather information to enable an initial assessment of public health risks.

Handovers

To ensure the timely and efficient transfer of information and responsibility, a handover needs to be undertaken at the end of the shift or at the end of the day for the EHP's. The handover is the means by which the outgoing staff are able to transfer information and responsibility to their on-coming counterparts. The handover will assist with and allow for continuity and consistency in the operations.

The way in which a handover is achieved can differ and should be planned for in advance. Methods utilised will depend on the situation and shift cycles. Generally, however, the following should be considered as part of the operations and planning process:
- an overlap in shift cycles, if possible
- centred around MECC/ICC/REOC briefing times
- on-going issues documented on paper

The handover should provide an accurate description of the current situation and include any key issues that have arisen or relevant information that may affect the oncoming shifts operations.

An Environmental Health Officer may need to use the information gathered in the handover process to produce a Situation Report at the end of each day/shift to distribute to key personnel, MECC or REOC.

Debriefings
The purpose of an emergency operational debrief is to highlight effective actions and any issues that arose during the emergency.

At the conclusion of an emergency event, the Manager Environment and Community Safety will debrief all EHP's involved in the emergency. An Environmental Health Officer may then attend and contribute to a multi-agency debrief. Personal debriefings must be undertaken in line with council policies. The PHEMP will be reviewed and updated as a result of debrief outcomes.

Municipal Emergency Coordination Centre (MECC)
Depending on the nature and extent of the emergency, the MECC may be activated. In many situations, a virtual MECC may be activated via the use of web-based programs such as Crisisworks or WEBEOC Large-scale emergencies impacting upon more than one municipality may lead to regional and state emergency response coordination centres being activated.

An Environmental Health Officer or another delegated EHP may be required to attend and/or communicate regularly with the MECC and/or ICC. **Ensure that the MERO knows that EHP's are required to attend briefing or be informed of information.**

Liaison
Environmental Health Officers will liaise with internal and external emergency management personnel including the MERO, MRM, SDPHO, other sub-plan leaders, partners and resource suppliers throughout the emergency to:
- gain the information required to assess and manage public health risks
- impart the information required by emergency management personnel
- request support where required
- keep relevant personnel up-to-date with public health issues being managed in the emergency.

Communication with field officers
Relevant information from the field will be passed to the MERO and/or MRM for the information of other emergency management personnel and the media.

Information management

During an emergency, tasks and activities must be accurately documented to ensure that all public health emergency issues and tasks are identified and attended to appropriately. These records will assist in the evaluation and review of the PHEMP.

Council's normal customer service request system may be used in these situations, as long as there is a distinguishing code or marker to separate requests and activities from normal business. Using this system will ensure better integration with property database information, GIS and mapping programs, and consolidates the reporting for the impact assessment process.

Register of public health incidents/complaints
This register includes issues raised from any source — internal officers, external agencies and the community. As it may include incidents/complaints that have not been reported to and recorded by the

MECC, it is essential that updated versions of this register are regularly forwarded to the MECC to ensure accurate recording of all issues associated with the emergency.

Information to be captured includes name, date and time, contact details and an outline of the public health issue.

Task register
The public health task register summarises public health emergency tasks, to whom and when the task was allocated and when it was completed. This will enable Environmental Health Officers to reconcile allocated and completed tasks.

Web-based MECC programs such as Crisisworks and WebEOC are also able to be utilised to allocate and record the status of tasks in relation to the emergency.

Incident/complaint pro forma
The pro forma is to be used by the EHP as a tool to record information regarding the task and once completed, will be returned to the Manager Environment and Community Safety as soon as practicable.

A pro forma is attached at **Appendix I** of this PHEMP, however it is just an indication of the type of information that needs to be included rather than a suggested format. Most council complaint registers will record this information already.

Disseminating information and warnings

Warnings
Warnings should be used under specific circumstances where community action is necessary to protect lives, property or the environment.

The Manager Environment and Community Safety will liaise with the control agency and/or DHHS and may assist the development and distribution of public health information warnings.

Warnings should contain the following:
- explanation of the situation
- what people need to do
- where to get further information

(See also Media and Communications sub-plan of the MEMP).

Public information
Contact details for further information should be supplied with any distributed public information.

Various public information formats may be useful for distributing approved information and advice to the community.

Consideration must be given for culturally and linguistically diverse populations, and other isolated and vulnerable communities.

No information is to be released without appropriate authorisations from the Incident Controller, Executive Management Team member, MEM, MERO, MRM or Council's Marketing and Communication Officer.

Fact sheets

DHHS has developed various fact sheets for emergencies with public health consequences, accommodating the culturally and linguistically diverse community, which can be downloaded from
https://www2.health.vic.gov.au/emergencies/departments-role/during-an-emergency

A full list of the fact sheets available are listed in **Appendix F** – *Public information resources and reference list.*

The Manager Environment and Community Safety will liaise with the DHHS regarding access, development, approval and distribution of suitable information. Any release of public information must be done in conjunction with council's or the DHHS media advisor/liaison officer. In an emergency, key information may be placed on the DHHS website front page as well as those of the municipalities that have been impacted.

Other methods of communication will be adopted during an emergency by the municipality affected when required. These types of communication methods will follow the communication plan contained within each municipality MEMP.

Caution is to be taken to ensure that if the emergency has impacted more than one municipality in the region, that the messaging that is being relayed to the community remains consistent.

Municipal public health information sheets
Public health information sheets or bulletins developed by the municipality, along with a guide on developing fact sheets are attached at **Appendix F**.

Notices
Notices may need to be distributed and displayed in prominent places for communicating messages about public health precautions that should be taken by the community, following an emergency event.

Newsletters
Existing newsletters produced by the municipality or other community organisations may be used to distribute information and promote ongoing messages and public health precautions.

Community meetings
EHP's will attend community meetings to provide information and assess ongoing public health needs.

Websites
The Manager Environment and Community Safety will liaise with Council's Marketing and Communication Officer and ICT team to establish web links to relevant agencies and for other useful information to appear on the municipality's web pages.

Role statements

The following range of functions represents the respective roles that may need to be performed in an emergency with public health implications.

Duty Environmental Health Officer
In an emergency, the Manager Environment and Community Safety, Coordinator Development Services, or the MERO will designate a Duty Environmental Health Officer to manage municipal public health response and recovery activities and resources.

This role includes the following functions:
- Ensure that the PHEMP and the associated processes and procedures are in place and activated if required

- receive and record information on the specifics of the incident
- identify and assess public health risks
- advise and consult with the MERO and MRM
- assume the role of Municipal Public Health Liaison Officer in the MECC (or other ECC that has been established)
- brief the Environmental Health Team about the emergency and advise on the action required to be undertaken by the team
- liaise with MERO and request support, or arrange for additional external resources (if needed) from partners, DHHS and other relevant agencies
- attend the MECC, regional or state level emergency response coordination centre as required and participate in EMT/IMT meeting
- prioritise and organise operational activities, including:
    - allocation of tasks to staff,
    - coordination of rosters,
    - resource management,
    - staff communications.
- ensure EHPs operate in accordance with SOPs
- ensure staff/EHPs from other councils are given appropriate delegation of authority prior to undertaking field work
- use procedures and systems established by the MERO to monitor and record expenditure
- facilitate the distribution of public health information to the community
- attend municipal/community recovery meetings
- ensure all field staff are working within the parameters of the SOP's contained within the PHEMP as well as the day to day operations of an Environmental Health Officer
- give consideration to individual staff who may need to attend to their own personal situation.

Where the Duty Environmental Health Officer holds multiple roles in emergency management such as Deputy Municipal Recovery Officer, and is called for duty in this second role, they may delegate the role of Duty Environmental Health Officer to manage the initial municipal public health response.

Municipal Public Health Liaison Officer
In an emergency, the Manager Environment and Community Safety, Coordinator Development Services, or the MERO will designate a Municipal Public Health Liaison Officer in the MECC, ICC or other ECC established. The role may be delegated to another EHP.

The Municipal Public Health Liaison Officer represents the functional area of municipal public health emergency management in the MECC or other ECC. The person undertaking this role must be able to make clear decisions. Functions of the role include:
- attending the MECC, division or state level emergency response coordination centre (ECC), as required
- liaison with emergency management personnel, including agency representatives in the MECC, ICC or ECC
- communicating information between the MECC, ICC (or ERCC) and the Duty Environmental Health Officer.

Environmental Health Officers (EHOs) / Environmental Health Technicians (EHTs)
In an emergency, EHOs and EHTs will undertake public health response and/or recovery activities:
- deputise for the Duty Environmental Health Officer
- carry out any functions delegated by the Duty Environmental Health Officer or the MERO or MRM
- attend briefing sessions with the MEMPC
- operate in accordance with SOPs

- perform activities consistent with the public health emergency responsibilities of the municipality.
- undertake public health assessments at the Emergency Relief Centre in regards to catering (if undertaken onsite), sanitary facilities, overcrowding, waste disposal, vermin control and nuisance abatement
- provide situation reports to the Manager/Team Leader Environmental Health when requested to do so regarding the work that is being undertaken in the field
- provide information of food management during and post the emergency

Professional Medical Advisor

In an emergency, the Professional Medical Advisor will be sourced through the Department of Health. This may be by Chief Health Officer alerts, bulletins, emails, updates on website or through Manager Public Health Grampians Regional to:

- provide technical advice and support to the Duty Environmental Health Officer and to other emergency management personnel
- attend briefing sessions with the Duty Environmental Health Officer
- attend the emergency relief centre to provide medical care to affected people and emergency management personnel
- operate in accordance with SOPs
- liaise with the Health Commander of State Health Emergency Response Plan.

Other municipal personnel

Authorised officers and other municipal personnel may include technical officers, immunisation nurses, administration officers and staff resources seconded from other departments in particular local laws, municipal rangers and municipal building surveyor.

In an emergency, authorised officers and other municipal personnel may perform the following functions:

- support Council's Public Health and Wellbeing team's emergency activities
- operate in accordance with SOPs
- brief the Duty Environmental Health Officer on issues arising during the emergency.

Public health emergency contact directories

Contact details for internal staff, external agencies and suppliers and other council health departments are included in the MEMP.

After hours contact details for the Environmental Health Officers are provided to:
- the MERO, for recording in the MEMP
- As well as the Senior Divisional Public Health Officer (SDPHO) at DHHS, for recording in the public health section of the Regional Emergency Management Arrangements.

The MERO will keep a separate list of after hours contact details for environmental health staff.

The information may also be given to DHHS as an internal document in case contact needs to be made from DHHS to staff of the region if action is required.

Standard Operating Procedures (SOPs)

Ongoing development of SOPs will take place to ensure that all identified public health risks are appropriately addressed.

The need for practice notes will vary depending on the level of experience, knowledge and skill of the EHP.

The Manager Environment and Community Safety will be responsible for the:
- development and approval of SOPs
- provision for work practice notes
- review of SOPs.

SOPs will be reviewed with the PHEMP.

The SOPs have been developed to assist EHP's in emergency preparedness, response and recovery activities:

- Secondary-impact assessment following an emergency
- Providing safe and adequate water
- Emergency shelter and accommodation
- Food safety
- Providing emergency ablution facilities
- Wastewater management
- Refuse collection and disposal
- Vermin and vector control
- Infectious disease control
- Environmental hazards
- Disinfection and cleaning
- Assessing emergency affected housing
- Emergency relief centres
- Guidelines for the control and management of food safety in emergency relief centres

Note: The establishment of regional collaboration groups in some regions, have initiated the development of regional SOPs to enable standard practices and allows staff to work under familiar frameworks where inter-council assistance for response and recovery activities for an emergency are called upon.

SOP 1 Initial and secondary impact assessments following an emergency

(Reference: EMV Impact Assessment Guidelines for Class 1 Emergencies V 1.0, revised 23 October 2015)
http://files.em.vic.gov.au/IMT-Toolbox/Inc/IIA-Guidelines-Class-1.htm

Assessment of impacts resulting from emergency events is a complex process, encompassing data and information drawn from a number of different agencies and government departments at all tiers (incident/local, regional and state).

Under Part 7 of the EMMV, EMV coordinate state level impact assessments.

Initial Impact Assessment (IIA)

IIA is a preliminary assessment (visual inspection and quantifiable early data) undertaken by response agencies.

IIA often comprise visual inspections, and/or the compilation of early available quantifiable data (such as number of dwellings destroyed or damaged), impacts on people remaining in an affected area.

IIA provides early information to assist in the prioritisation of meeting the immediate needs of individuals and the community. It also indicates if further assessment and assistance is required.

Secondary Impact Assessment (SIA)

SIA is a subsequent progressive and more holistic assessment of the impact of the event on the community; and takes into account built and natural environments, social and economic impacts, and resulting community needs. Impact assessment for relief and recovery requires an additional layer of analysis beyond the IIA, which includes a comparison with baseline information.

An adaptive and evidence-based relief and recovery program requires timely, accurate and progressively more comprehensive information about the impact of an emergency on communities.

Coordination of SIA is the responsibility of the nominated recovery manager/coordinator and all departments and agencies involved in the collection of SIA should liaise with the nominated recovery manager/coordinator to ensure information is coordinated and shared.

Post Emergency Needs Assessment (PENA)

PENA estimates the longer-term psychosocial impacts of a community, displacement of people, cost of destroyed assets, the changes in the 'flows' of an affected economy caused by the destruction of assets and interruption of business. Such assessments inform the medium to longer-term recovery process, and build the knowledge base of the total cost of emergencies that informs risk assessment and management.
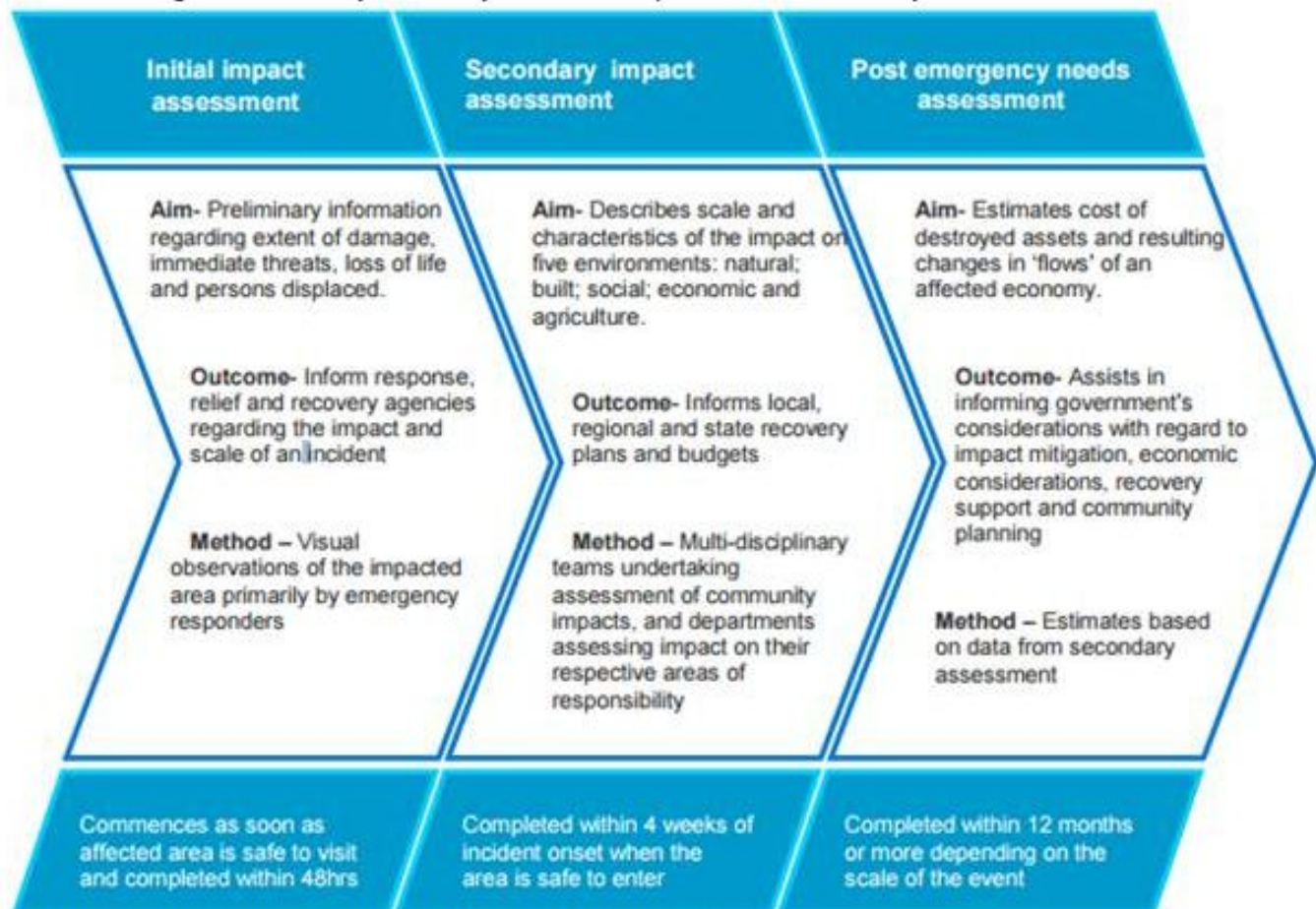
Figure 1: Description of the impact assessment process

Role of EHP's

EHP's will most likely be called upon to conduct detailed SIA with building surveyors, domestic and/or commercial properties known to be damaged/affected. The focus of these inspections will be on the hazards that may exist, including identification of dangerous materials (eg: asbestos), unstable structures, as well as damaged to water supply and sewerage systems.

It is important to ensure that any EHP's deployed to conduct SIA activities are provided with the appropriate Personal Protective Equipment, emergency kits and communication equipment (as listed in **Appendix D**).

In addition, as part of the SIA, the EHP will participate in personal and team operations debriefs that relate to an emergency impacting on the Council and implement any recommendations made from those debriefs.

Information management
Information gathered during these assessments should be accurately documented using the nominated information collection tool as it may be required to be passed on to other emergency personnel and agencies.

During an emergency data management is integral to assessing the impact of the event and to plan effectively for recovery. Paper based field assessments can cause delays in collating and analysing the information. The ability to store and retrieve all of the information in both textual reports and GIS formats and having a system with a mapping output is very useful for the targeted and efficient delivery of services to the affected areas.

Consideration should be given to collaborate with the Council IT department to use mobile technology such as tablets, iPads, etc to develop an integrated data management system particularly for Health, Building, Planning and Local Laws. By integrating the captured data into the corporate systems all relevant staff, customer service, contractors and volunteers are able to have up to date information about the status of properties, people and animals affected by the event.

Ongoing assessment
Assessment will be ongoing during the 'recovery' phase of the emergency, enabling continued identification of public health risks and prioritisation of activities.

Priorities
The main issues for Environmental Health Officers will be the prioritising of activities. Depending on the nature of the emergency, inspection of ERC's for public health risks, EHP's conducting PIA of damaged/affected housing and registered premises may all need to be conducted concurrently. The availability of quality information and data may also be an issue.

Information from the assessment will identify geographical areas or population groups of concern, guide public health response and recovery priorities and highlight any immediate needs for external assistance.

SOP 2 Providing safe and adequate water

The supply of drinking water may come from sources including; reticulated (mains) water supply, private water supply (rainwater tanks) or the pumping of water from another source.

Contamination of drinking water can be caused by biological, chemical or physical agents. Examples of water pollution include contamination via sewage and wastewater, flood water, algae, dirt and dust, fire retardants, smoke and ash.

An Environmental Health Officer should liaise with DHHS and the local water authority whenever there are concerns about water quality, supply, sources, treatment, storage or transport.

Actions required under the PHEMP include:

1)   Action MECC requests and assist the lead organisation/authority in the investigation and management of the provision of safe and adequate water as required which may include:

- Conduct site assessments and report back to MECC, follow directions and record details appropriately.
- Determining community requirements. Minimum quantities of water *for all purposes* per person per day are:
  - o   person 20 litres (drinking, washing, feeding)
  - o   medical unit per casualty 60 litres
  - o   feeding unit per person 30 litres

_____

[1] NOTE: The drinking part of this allowance (4 Litres) must be increased in hot conditions, or where heavy work is being done.
[2] 25ml/mg = 1oz/1fl oz

- In regard to water supply liaise with local water authorities regarding their implementation of protection strategies, which may include facilitating/ supplementing/replacing the supply, disinfection and/or distribution of new water supplies.
- Ensuring that new or existing water supplies are treated by **clarification, disinfection or chlorination** and are **stored and transported appropriately.**
- Liaise with private property owners regarding their water supply and provide information, education and advice when required

Water can be treated by adding enough chlorine (initial dose 5mg/L) to give a concentration of 1mg/L after 30 mins contact. For 1000L you will need: [2]

4% available chlorine (White King/fragrance free household bleach)	125mL or 125g
12.5% available chlorine (liquid swimming pool or dairy factory chlorine)	40mL or 40g
65% available chlorine (granular swimming pool chlorine)	8mL or 8g

You can check the chlorine level with a comparator (check with local swimming pool). If one is not available, ensure that there is a noticeable smell of chlorine in the water.

It is crucial that the measurements of the chlorine in the water are correct to avoid health risks.
If chlorine is not available, contact DHHS or the responsible water authority for advice regarding boiling water, or other treatment methods.

- Protect and maintain existing water supplies which include investigation and management of water contamination incidents by conducting sampling and implementation of strategies as directed by the lead agency/MECC
- Council EHP's will advise and liaise with private property owners if private water supply (rainwater tanks) are affected regarding appropriate treatment options.
- Where it is a private water supply that is affected Council's EHP's may facilitate the clean-out of tanks where required and provision of top up/replacement water up to 5000L depending upon local arrangements.
- Where the resources available can not meet the demand as a result of the size or complexity of the event, assistance may be provided by DELWP and the local water authority.
- Disseminate appropriate information, approved warnings and advice to the community, via the identified communication coordinator, which may include advice on:

- water treatment, including tank water
- water protection
- alternative water supplies
- providing health education material concerning personal hygiene practices to ensure a safe water supply e.g. water containers are not to be used for any other purposes, are to be kept clean and people are not to drink directly from the container
- Provision of contact details for water carters within the municipality or within close proximity to the affected area.

SOP 3 Emergency shelter and accommodation

A secondary impact assessment will be undertaken at those individual properties that have been affected by the emergency. Inspect damaged houses and individual properties, in conjunction with the Municipal Building Surveyor (refer to SOPs *'Post impact assessment following an emergency'* and '*Assessing emergency affected housing'* and '*Public Health Survey of damaged premises/affected housing'* checklist in **Appendix J**) to identify whether there are any public health risks and issues which require a response. The assessment made onsite will depend on the outcomes identified.

These outcomes may include:
- advice, education and distribution of information regarding the public health risks/issues that have been identified
- monitoring other public health issues, including the need for additional resources.
- gathering and feedback of information to the MERO and/or Deputy MRM, to pass onto other appropriate response and recovery agencies.
- Following on from any further recommendations put forward by the building surveyor regarding whether the structure is considered habitable or not.

The Emergency Management Team will continue to liaise with the MRM and/or his deputy and the building surveyor to arrange for ongoing visits if required and to report assessment results.

Any other community concerns noted during the property inspections should be reported to the MERO for action as required

Monitor and control public health in ERC's (see **Appendix J** - *Checklist of public health responsibilities in emergency relief centres*).

Assist with the establishment of new Emergency Relief Centres and, if necessity dictates people requiring to be accommodated in tents, the siting and layout of emergency campsites. This requires thorough planning, particularly if it embraces showers, toilets and kitchen facilities. If expertise in this area is limited, the services of the Australian Defence Forces can be sought formally through the MECC.

SOP 4 Food safety

A strong relationship with local organisations providing food during an emergency in the pre-emergency stage is integral in ensuring food safety is protected.

Monitoring and control of food safety is required in:
- ERC's – catering and donated food
- emergency services staging areas
- registered premises affected by the emergency.

Assessments will identify:
- if food premises are operating or not
- if facilities are adequate for food handling activities

- if appropriate clean-up including sanitising has been completed prior to operation
- if food on the site is safe for consumption
- waste disposal requirements
- pest control requirements
- assess donated food and action as necessary
- suitable hand washing facilities provided for food handlers and also recipients of food
- undertake corrective action, and supervise if required
- make appropriate requests to MRM/MERO (i.e. proper disposal facilities including skips bins, pest control, equipment required, storage facilities)

In addition to the assessment of premises EHP's will facilitate the distribution of information and advice to the community, as necessary. Depending on the nature of the emergency, information may need to address issues such as:

- food safety precautions during/following power failure
- protection of food from contamination
- clean up procedures of food premises
- food hygiene & temperature control
- disposal of spoilt and damaged food.

EHP's may need to conduct investigations of complaints, including food borne illness and send food samples for analysis if required, this will be a direction from the EHO on duty or in conjunction with DHHS.

EHP's will be required to record information in appropriate database and ensure that all records are kept up to date.

Examples of information for these situations are located on the websites listed in **Appendix F**.

SOP 5 Providing emergency sanitary facilities

In conjunction with the MERO, EHP's should coordinate adequate provision, location and maintenance of temporary toilets, hand wash basins, showers and laundry facilities.

Toilet facilities
The following minimum numbers of toilets, urinals and hand wash basins are in accordance with Table F2.3 of the Building Code of Australia 2016.

Gender	Males			Females	
	Toilets	Urinals	Hand basins	Toilets	Hand basins
Patrons	1 per 20 persons	1 per 25 persons	1 per 30 persons	1 per 15 persons	1 per 30 persons

Showers
For short term accommodation, the number of showers considered necessary is 1 per every 35 persons. For long term accommodation, the ideal ratio is 1 shower to every 10 persons.

Laundry Facilities

Factors to consider when determining the number and type of laundry facilities to be provided are:
- number of people likely to be using the facilities
- demographic of people using facilities eg: families with babies and/or young children
- availability of power.

Please note as a guide, under the *'Residential Tenancies (Caravan Parks and Movable Dwellings Registration and Standards) Regulations 2010'* caravan park owners must ensure that for every 25 long term sites or part thereof where private laundry facilities are not provided—
      (a) a wash trough and washing machine;
      (b) a clothes drier or 25 metres of clothes line;
      (c)   an ironing board and power outlet.

Where possible, separate toilets and hand wash basins should be made available to food handlers, as well as a unisex facility with disabled access.

Determine suitable treatment and disposal options of wastewater from emergency ablution facilities. Ensure ablution facilities are regularly cleaned and maintained.

SOP 6 Wastewater management - septic tanks

Liaise with EPA regarding wastewater disposal strategies. Evaluate the use of existing septic tank systems including:
- treatment plants (need for electricity)
- disposal area
- plumbing fixtures
- damage to fibreglass systems and waste water pipes (especially in a fire)
- availability of reticulated water.

Note: if assistance from a licensed plumber is required, request through the MECC.

1) Assessment of property/affected area, assessment will identify:
   a) if a septic system is on the property and its condition
   b) if connection to temporary accommodation is required
   c) if connection to a new dwelling is required
   d) if installation of a new system is required
   e) if the tank requires desludging
   f) if decommission of the existing system is required

This information will be compiled using data collected during PIA as well as additional site inspections conducted as required.

2) If the location of the existing septic tank and effluent field is known, peg out and rope or tape around the existing system to prevent damage during clean-up.

3) Record appropriate information in database detailing actions required/undertaken and update as necessary.

Disseminate information for the public that is accessible and available; this can be conducted during site inspections, community meetings or through various involved organisations and may need to address such issues as the following:
- risks of operating a damaged system
- living in caravans on private property during rebuilding

- protecting septic tank systems from damage by demolition machinery and during rebuilding
- overflow/clean-up of systems that are not operating correctly.

SOP 7 Refuse collection and disposal

Large amounts of refuse will be generated during an emergency. Extra bins and services will be needed for the clean-up process through the MERO.

This issue may be addressed in the MEMP, however municipal EHP's will assist to ensure refuse collection and disposal is adequate throughout the community, to prevent public health issues such as breeding and/or harbourage of vermin and vectors of disease.

Municipal EHP's may need to advise waste contractors in conjunction with Council's Waste Management Department on their waste management practices:

- siting of bins and services throughout the community and at emergency venues
- providing domestic bins and services where bins have been lost, damaged or destroyed
- liaising with Council's waste department or relevant contractors to ensure adequate waste disposal
- ensure the disposal of hazardous wastes is conducted in a safe manner (disposal of medications and pharmacological supplies is to be overseen by Victoria Police)
- Disposal of dead stock and other animals will be actioned under the Animal Welfare Emergency Management Sub-Plan (MAV template-link)

EHP's may also need to provide education, information and advice to the community regarding waste disposal during and after an emergency:

- storing waste prior to collection
- disposal of spoilt and damaged food
- location and use of additional bins and services provided throughout the emergency affected area.
- The separation of waste into dry refuse, non-putrescibles, putrescibles and indestructible waste.

EHP's may also need to provide advice around asbestos removal and the facilitation of further action once the risk has been identified. Engagement of a contractor may also be required to facilitate the removal of the asbestos.

Liaise with the MERO regarding any concerns about refuse collection and disposal.

SOP 8 Vermin and vector control

The municipality may already have control strategies in place for preventing vector-borne diseases. Mosquito control programs are one example.

Monitor and control breeding and harbourage of vermin and vectors of disease throughout the community and at ERC's by:

- coordinated pest control services
- vector surveillance and control programs
- monitoring waste management.

Facilitate the distribution of information and advice to the community as necessary:

- waste management and vermin control
- vector control
- personal protection and requests for supplies through MERO where considered necessary.

Areas of concern include:
- food preparation and storage areas
- refuse collection areas
- sanitary depots
- damaged or destroyed poultry sheds, piggeries and abattoirs
- damaged food premises and domestic premises
- dead stock and other animals
- burst sewerage and water pipes
- damaged septic tank systems.

Where potential pest control issues are identified, EHP's are to provide advice on the introduction of an integrated pest management program which may include requesting the services of pest control contractors through the MERO for Council properties.

An integrated pest control program will generally consist of baiting/trapping, environmental control focussing on removing conditions conducive to pest harbourage and breeding, introduction of physical barriers to prevent pest intrusion and monitoring programs specific to the issue identified.

SOP 9 Infectious disease control

Maintain awareness of the potential for the spread of infectious disease in ERC's and ensure preventative measures are implemented including:
- provision of suitable hand washing and bathing facilities
- provision of education on health and hygiene, eg: signage
- avoidance of overcrowding, especially in sleeping areas
- frequent disinfection of communal areas where considered necessary.

Notify concerns regarding potential infectious disease outbreaks to Senior Divisional Public Health Officer.

Recognise actual or emerging conditions that would favour an outbreak of disease endemic to the area. If specific endemic disease response plans are already developed, coordinate their implementation.

Undertake outbreak investigation with support from, in accordance with the Guidelines for the investigation of gastroenteritis

https://www2.health.vic.gov.au/public-health/infectious-diseases/infection-control-guidelines/gastrointestinal-illness-investigation-guidelines

Actions may include:
- completing a 'Gastro Outbreak Onsite Assessment' Form
- provision of information regarding hygiene and clean-up procedures
- collection of faecal/food samples and send to MDU for analysis
- supervision of clean-up in accordance with the 'Guidelines for the investigation of gastroenteritis'
- seizure and/or supervised disposal of food
- Complete and follow-up of single incident cases as required.

Support DHHS in the conduct of extra vaccination sessions (if required):
- locate and/or provide suitable vaccination venues
- distribute information and advice to community
- assist with coordinating vaccination sessions
- provide refrigeration and storage areas
- receive vaccines and equipment

- provide personnel
- provide relevant local information to DHHS
- provide waste management facilities.

SOP 10 Environmental hazards

There are a number of environmental hazards that may arise following an emergency:

- hazardous materials from semi-demolished buildings, such as asbestos
- soil contamination
- industrial chemical spills or releases (Hazmat incidents)
- disposal of toxic waste
- spills or releases in domestic premises (eg: Clandestine labs)
- blue-green algae
- recycled water.

Liaise with relevant agency and implement strategies to protect the public from exposure. These can include:

- sampling and analysis
- erection of signs and public notices
- distribution of information and advice to the community.

SOP 11 Disinfection and cleaning

Following an emergency, especially floods, buildings can be contaminated with sewage, mud, soil and other infectious matter. If thorough cleaning and disinfection is not undertaken, this can lead to conditions which pose a risk to public health.

Following floodwaters, consider decontamination of

- buildings, including sub-floor spaces, wall cavities and ducts (see SOP '*Assessing emergency affected housing*')
- public swimming pools, spas and other facilities.

Facilitate distribution of information and advice to the community, as necessary:

- clean-up and disinfection of houses following flooding
- cleaning and disinfection of swimming pools
- clean-up of registered premises, especially high-risk premises such as childcare and aged care facilities.

Procedure
(Reference: Guidelines for the investigation of gastroenteritis – DH 2010)

Hard surfaces should be washed with hot water and detergent, followed by a solution of 1000ppm of available chlorine to disinfect. Leave disinfectant on surfaces for 10 minutes then rinse with cold water and dry.

Kitchen food contact surfaces (eg: utensils, crockery, cutlery, equipment) must be cleaned and sanitised. They should first be washed with hot water and detergent, then sanitised by one of the following:

- immersing in hot water at a minimum of 82°C for two minutes (this can be done using a dishwasher as long as the rinse cycle reaches this temperature)
- washing by hand then immersing in 100ppm of available chlorine for at least three minutes at 50°C. Water from the hot tap should be 50°C.

- for equipment that cannot be completely immersed, 200ppm of chlorine should be used on all surfaces for 10 minutes.

Chlorine concentrations required for disinfection can be found in **Appendix J.**

SOP 12 Assessing emergency affected housing

Procedure

Assessments of emergency affected housing can be incorporated into the Secondary Impact Assessment Process and as such, should be done in consultation with the MRM and other relevant agencies, to minimise the impact upon affected people. Ideally, assessment teams should include recovery staff able to assess broader community needs.

The outcome of the housing assessment will determine:
- any public health information and advice that needs to be distributed
- any resources that need to be requested to address public health issues
- the need for further inspections and public health activity to assist recovery.

Assessment

Each team should consist of at least one EHP, one building surveyor and recovery personnel (personal support, DHHS representative). Additional resources may need to be obtained.

The assessment will include:
- completing '*Public Health Survey of Damaged Premises/Affected Housing*' checklist in **Appendix J**
- recommendations to the Manager Environment and Community Safety for public health activity, based on assessment outcomes
- recommendation for the insurance company to conduct inspection
- warnings regarding the occupation of premises and inspection by the insurance company
- advice and distribution of information
- inspections, to give clearance for rehabilitation of emergency affected housing
- monitoring other public health issues, including:
  o the need to address actual or emerging public health risks
  o the need for new advice and distribution of information
  o the need for additional resources.
- gathering and feedback of information to the MERO and/or MRM, to pass on other appropriate response and recovery agencies.

The Duty Environmental Health Officer will continue to liaise with the MRM and building surveyor, to arrange for ongoing visits if required and to report assessment results.

Any other community concerns noted during the housing assessment should be reported to the MRM.

SOP 13 Emergency relief centres

(Reference: *Emergency relief handbook: A planning guide – DHS 2013*)

Emergency relief is the provision of essential needs to individuals, families and communities during and in the immediate aftermath of an emergency.

Municipal councils are responsible for coordinating relief at the local level. Emergency relief services and activities, and the nominated agencies responsible for coordinating and providing these at the local level, will be designated in Councils' MEMP.

The (municipality name) MEMP should be read in conjunction with this section regarding emergency relief centres including but not limited to:
- Planning
- Documentation
- Activation/Deactivation
- Staffing and support agencies
- Operating procedures

Table 1: Emergency relief functions and coordination

Emergency relief function	Local Government Coordination at local level	Coordination at regional
Community information	Agency providing service	Control agency
Public health	Local Government	DHHS
First aid	St Johns Ambulance	Ambulance Victoria
Primary Care		DHHS
Psychosocial support	VCCEM/Red Cross	DHHS
Reconnecting families / Register Find Reunite (National Registration & Inquiry System)	Red Cross (activated by VicPol)	Red Cross
Emergency shelter	Local Government	DHHS
Food and water	Red Cross	Red Cross
Non-food items	Local Government	The Salvation Army
Emergency Financial Assistance	DHHS	DHHS
Animal welfare	Local Government	DJPR (Department of Jobs, Precincts and Regions)

Emergency Relief Centres

An Emergency Relief Centre (ERC) is managed by the municipal council and is a building or a place established to provide immediate and basic services to people affected by an emergency. ERC's should be designed to meet all of the relevant standards and consider the specific needs of children, youth, seniors, people with additional needs and culturally and linguistically diverse (CALD) community members in the layout, design and services provided.

Services provided in an ERC can include shelter, food and water, material items such as bedding and clothing, and health services such as psychosocial first aid.

Public Health and an ERC

As detailed in this MEMP, public health requirements and issues should be addressed by the ERC Manager and relevant public health professionals, these may include:
- Food safety

- Sanitation and ablution
- Water
- Infection control

Further details and information are found in the SOPs and appendices.

Additional information below:

Planning

The MERO and MRM, or their delegates, are responsible for assessing the suitability of sites as potential ERC's, which should be undertaken using a defined set of criteria (*Refer to the Emergency Relief Centre Site Assessment Checklist contained within the '*[*Emergency relief handbook: A planning guide*](')*'*).

Site assessments of the proposed ERC's should be conducted in consultation with the following:

- the owners and/or committees of management responsible for day-to-day management of venues
- EHP's who have an understanding of the potential public health risks associated with operation of ERC's
- municipal building surveyors and/or local fire brigade representatives who have an understanding of other occupational health and safety issues, eg: fire safety.
- other local support agencies such as Red Cross, which may have requirements for their own emergency operations.

Assessment of potential ERCs was conducted in December 2011 by the MRM and Duty Environmental Health Officer.

Documentation

Venues selected for use as ERC's are recorded in the MEMP. Any service providers that may provide services at the ERC (eg: cleaning and security) should also be engaged to agree on local arrangements, which should be formalised in a memorandum of understanding between the parties and documented in the MEMP.

Activation

The Incident Controller is responsible for initiating relief arrangements. Once a suitable ERC has been nominated, the MERO or MRM will appoint an ERC manager, who after receiving a briefing makes the necessary arrangements for the selected ERC to be opened, collects the ERC kit and attends the centre.

In most instances, the Manager Environment and Community Safety will be notified by the MRM of the opening of an ERC and briefed with following information before deploying at least one EHP to the ERC:

- name and location of the ERC activated
- number of people expected to be accommodated
- duration and nature of recovery services to be provided
- catering arrangements.

Deployment

Upon arrival, the EHO will introduce themselves to key emergency personnel and the ERC manager.

Any serious concerns that cannot be addressed immediately will be reported to the ERC manager, MERO and/or MRM, with advice on any precautions that will be enforced. The EHO, in consultation with the MERO, will arrange for any necessary actions to address public health concerns.

Review

The MERO and/or MRM or position nominated to fulfill this responsibility will coordinate a review of ERC sites:

- annually
- after an emergency event
- when there are significant changes made to an existing ERC site
- when a potential new ERC is built.

Stakeholders consulted during the initial inspection will be included in the review process and follow-up inspections may be required after maintenance or alterations have been undertaken.
Any changes made will be updated in the MEMP (and PHEMP if applicable).

Further details can be found in the '*Emergency relief handbook: [A planning guide–DHS 2013](#)*

Guidelines for the management and control of food safety in emergency relief centres

Emergency food preparation/production
Food safety in an emergency is a major public health issue and requires specific attention.

Good relationships and effective communication with key stakeholders involved in emergency catering will assist in the provision of safe food. Emergency caterers and arrangements are identified in the MEMP.

Safe food production in an emergency depends on quality control of incoming food, a safe water supply and care with storage, preparation, serving and waste disposal.

Quality controls for incoming food:
- Examine food for spoilage and contamination.
- Know the source of the food and check with suppliers if necessary. Choose a reliable food source where possible, such as a supermarket.
- The type of food supplied should not pose unnecessary risk (consider ambient temperatures, shelf life and storage facilities).

Safety of the water supply:
- Does it need to be treated?
- Are there alternative water supplies available? Eg: bottled

Storage of food:
- Are there freezers, refrigerators and dry storage areas?
- Are there appropriate pest proofing measures in stores, kitchens and feeding centres?

Disposal of solid and liquid food wastes:
- Consider grease traps, burial, cartage and incineration needs.

Food preparation:
- Arrange facilities for washing and sanitising utensils.
- Ensure supervision of food preparation areas and food servicing (appropriate cooking methods).
- Ensure supervision of food handling personnel.
- Organise separate toilet and hand washing facilities for food handlers (if possible) to prevent cross-infection.

Supervision of food handlers

The following are key factors in ensuring food safety:

   i) *Screening and selection of food handling personnel*
   - Anyone with diarrhoea, vomiting, infectious lesions, exposed areas of infected skin, or a recent history of gastrointestinal illness, *must* be excluded from handling any food.
   - Training — where possible, use people with training or previous commercial experience in food handling positions.
   ii) *Supervision*
   - Ensure regular supervision of feeding areas, particularly during the early stage of an emergency when personnel are operating 24 hours a day, usually in shifts of six hours.

Examination of donated food
Fresh food donations should be discouraged. The Duty Environmental Health Officer should liaise with the Media Liaison officer to ensure this is suitably communicated.

If food is donated, the key aspects to consider are:
   i) *Inspection and storage*
   - All foods are to be brought to a central inspection area where they can be examined by a trained person and correctly stored pending distribution.
   ii) *Acceptance and disposal*
   - It is better to accept all food donations, even if it is obvious that they are unsuitable and to dispose of the food after the donor has left the site. This overcomes the problems of:
      o unauthorised food distribution
      o embarrassment to the donor who, in good faith, may have travelled a long distance to donate the food, not knowing its unsuitability.

Appendices

   Appendix A   Risk management process

   Appendix B   Prevention and community resilience strategies

   Appendix C   Public Health Emergency Management Training Plan

   Appendix D   Municipal public health resources

   Appendix E   Public health contact directory

   Appendix F   Public information resources and reference list

   Appendix G   Example of a Memorandum of Understanding (MOU)

   Appendix H   Roles and responsibilities

   Appendix I   Information management pro formas

   Appendix J   Checklists for Standard Operating Procedures

   - Checklist for public health risks in an emergency

   - Chlorine concentrations required for disinfection

   - Public Health survey of damaged premises/affected housing

   - Checklist of public health responsibilities in Emergency Relief Centres

   Appendix K   Acronyms, abbreviations and glossary

Appendix A - Risk management process

A Community Emergency Risk Management (CERM) process has been undertaken for Council's MEMP having regard to current standards and Council's Risk Strategic/Risk Matrix and the analysis tools. The MEMPC will evaluate the risks annually and in accordance with the national standard AS NZS ISO 31000-2009.

In the MEMP, the following risks have been identified as requiring action under the PHEMP:
- Food Poisoning: High Risk
- Toxic Emission: High Risk

Appendix B - Prevention & community resilience strategies

Council currently performs the following functions in relation to prevention and community resilience:

- Social Media releases in relation to Heat Health Alerts are released regularly during the summer months.
- Council's Positive Ageing Team hand out Fire Ready Kits to all new clients. On the days of extreme heat the clients that have been identified as high care receive a phone call or a visit from council officers to remind them to stay out of the heat, drink plenty of water and keep as cool as possible.
- During the winter months council has previously displayed posters in public areas to promote the likes of "cover your cough", "hand washing" and provided sanitising gel for the public for the prevention of flu.
- Baby immunisation sessions are scheduled in Stawell and St Arnaud once a month delivering the National Immunisation Program to eligible children.
- Secondary school immunisation programs are also delivered to all secondary schools students who wish to participate in our municipality.

Appendix C - Public Health Emergency Management Training Plan

Insert details of training to be undertaken by staff. Documentation which shows completion dates should be maintained in PHEMP and in accordance with Council's HR policy.

Training Requirement/Exercises	Personnel completed (date)
Induction of new staff with the PHEMP	
Introduction to Emergency Management (SES)	
EHPA's Emergency Management Training for Public Health Professionals (4 days)	
Response time/process for EHP after hours	

DHHS Australasian Inter-service Incident Management System (AIIMS) training	
DHHS Introduction to Relief & Recovery Centres training	
Attend relevant emergency management Public Health Workshops and Training Courses	40
Participate or observe in municipal emergency management exercises	
Crisisworks training for EHO's	
Buddying up system for EHO's that have experience/exposure to emergencies with EHO's that don't	

Appendix D - Municipal public health resources

Personnel

Positions	Maintenance (policies, procedures and schedules)

(To be reviewed by the municipality) Example: · Manager Environment and Community Safety · Coordinator Development Services · Environmental Health Officers · Environmental Health Technician · Immunisation Provider · Local Laws Officers · Municipal Building Surveyor · Building Inspectors	(To be reviewed by the municipality) Example: · Vacant positions will be filled without delay. · Position descriptions will include emergency management responsibilities. · A Deputy will be nominated to perform the emergency management functions and this communicated to MEMPC.

Equipment - Personal Protective Equipment (PPE)

Item	Number / officer	Maintenance (policies, procedures and schedules)

| (To be reviewed by the municipality)

The following items should be considered for PPE kits:

· Tabard (compliant with relevant Australian Standards)
· rubber boots
· hard hat
· coveralls
· safety glasses
· hearing protection
· rubber gloves
· dust mask
· sun protection (sunscreen and hats)
· all weather jacket
· respirator and cartridges
· insect repellent
· first aid kit
· torch
· eye wash bottles | 42 | To be reviewed in conjunction with council's OH&S representative

Must comply with relevant Australian Standards |

Equipment — Public Health Emergency Kit/s

Item	No. of kits	No. of items / kit	Maintenance (policies, procedures and schedules)

(To be reviewed by the municipality)			Equipment will be checked at least annually and following a public health emergency event.
· identification/ authorisation · PHEMP, including internal contact directory · stationery · street directory or map of area · torch, spare batteries and bulbs · thermometer · tape measure · pocket compass · collapsible shovel · comparator for chlorine residual and pH · measuring jug, 500ml · magnifying glass · collection vials and labels · plum bob · spirit level · mosquito larvae dipper · screw driver · hammer · hatchet · water containers, 10-20L · water sample jars · faecal pots · freezer blocks · Swiss army knife · waterproof matches · esky/insulated bag · seizure book/s · sample tape · inspection markers/spray paint, hazard tape, asbestos tape · digital camera and charger			Maintenance will include: · reviewing the required equipment · ensuring each officer has the required equipment ready · ensuring equipment is in good working order · arranging for immediate repair or replacement of faulty equipment · ensuring required servicing is performed in accordance with the manufacturer's recommendations.

Equipment — Communications

Item	Maintenance (policies, procedures and schedules)

(To be reviewed by the municipality) **Example:** **Each Environmental Health Officer shall be equipped with:** · **mobile phone** · **long-life battery** · **office recharger** · **recharger via car** · **two-way radios**	*(To be reviewed in conjunction with MERO)* **Example:** **At each vehicle and phone change over:** · **Ensure that compatible hands free kits are fitted in vehicles.** · **Ensure that office and vehicle chargers are compatible and are working effectively.** · **Ensure mobile phone batteries are always charged and working effectively.**

Mobile Phone Coverage:

There are many providers available with varying degrees of coverage. It would be best to check the area you are entering prior to travelling. A sample of sites to check are listed below:

Telstra

Optus

Equipment — Transport

Item	Maintenance (policies, procedures and schedules)

(To be reviewed by the municipality in conjunction with the municipality fleet manager) All pool vehicles are available for use by the Environmental Health Department in an emergency. **Preferably a 4WD vehicle will be used.**	*(To be reviewed by the municipality in conjunction with the municipality fleet manager)* At least annually: · Ensure vehicles are serviced and maintained in accordance with the manufacturer's recommendations. · Ensure that vehicles are fitted with compatible mobile phone kits. · Ensure that officers can refuel vehicles 24 hours per day, 7 days per week.

Appendix E - Public health contact directory

Content removed for privacy reasons

The MERO will keep a separate list of after hours contact details for environmental health staff, for use within the municipality's after hours arrangements.

Appendix F - Public information resources and reference list

Public information

Item/location	Maintenance

	(policies, procedures and schedules)
(To be reviewed and completed including attachment of public information resources and/or description of their electronic and/or hard copy location) · **DHHS fact sheets** A list of available public health related fact sheets is contained on the following page The list includes the DHHS web address which is a central location for all other pages where fact sheets are located. Hard copies of each DHHS fact sheet will need to be printed if required as NGSC is paper light. Ensure the website is checked for updates to fact sheets on a regular basis. · **Notices** A list of draft notices is contained in this Appendix. · **Other public information resources** A list of other public information resources is contained in this Appendix, together with their electronics.	*(To be reviewed by the municipality)* Public information resources will be checked at least annually and following a public health emergency event. Review will include: · ensuring information is current · ensuring hyperlinks are correct and operating

Fact sheet development guide

Process for developing a fact sheet:
- Identify the risk and communication objective
- See if DHHS has developed an appropriate fact sheet
- Develop an appropriate fact sheet in consultation with municipal media and communications representatives and DHHS
- Keep as an appendix to the PHEMP
- Establish a distribution plan
  Example:
  - o   At all times, maintain an electronic link to the fact sheet; or
  - o   in an emergency, establish a link to the fact sheet from the municipality's website front page; or
  - o   hand deliver it during inspection

Structure of a fact sheet

First paragraph - key points:

- type of emergency covered by the fact sheet
- recommended action

Background:
·   the nature of the emergency
·   how it affects public health
·   public health facts, including vulnerable groups
·   where to get help/further information

Example of notice for food premises

COUNCIL LOGO   **Food premises affected by flooding or power outage**

If flooding occurs in your food premises, the following steps need to be taken:

- Check refrigeration and freezer units to ensure that they are still operational. Ensure doors are kept closed, to maintain temperatures.

- If the refrigeration equipment is not operational, potentially hazardous foods must be moved to a working unit. If this is not possible, initiate the two hour / four hour rule as detailed in your food safety program and record action taken. Any food out of temperature control (above 5°C) for 4 hours or more **must** be discarded.

- If frozen food has defrosted/thawed, it can be stored under refrigeration. If remaining out of refrigeration for more than 4 hours, it must be discarded.

- Any food that comes into direct contact with floodwaters **must** be discarded. This includes food stored in sealed and unsealed containers (including cans, bottles, packaged goods)

- Any exposed food within the premises **must** be discarded.

- Clean all flood-contaminated areas with a chlorine based sanitiser (see dilution rates below).

In the event of a flood, it is very common for water to have mixed with overflowing sewers. During the clean up, it is very important to clean and sanitise all floors, walls and benches with bleach at a dilution rate of 1000ppm. This sanitiser must be left for 10 minutes and then rinsed with cold water. **Please note that chlorine should not be diluted in hot water.**

Dilution rates for chlorine based sanitiser 1000ppm			
Water	4% Chlorine (household bleach)	12.5% Liquid Pool Chlorine	65% Granular Chlorine

5 L	125ml	50ml	8g
10 L	250ml	100ml	15g
50 L	1250ml	500ml	77g

All food contact surfaces and equipment **must** be sanitised with a chemical sanitiser at a dilution rate of 200ppm of available chlorine, or in a dishwasher with water temperature at 82°C for 2 minutes. Below is a table for 200ppm dilutions.

Dilution rates for chlorine based sanitiser 200ppm			
Water	4% Chlorine (household bleach)	12.5% Liquid Pool Chlorine	65% Granular Chlorine
5 L	25ml	10ml	1.5g
10 L	50ml	20ml	3g
50 L	250ml	100ml	15g

If you have any concerns about food safety issues contact the Council and remember…

If in doubt, throw it out!

Council contact details

Reference list

Legislation covering functions, powers and authorisation
Available at: http://www.legislation.vic.gov.au/
- *Local Government Act 1989*
- *Public Health and Wellbeing Act 2008*
- *Food Act 1984*
- *Environment Protection Act 1970*
- *Emergency Management Act 1986 and 2013*
- *Residential Tenancies Act 1997*
- *Safe Drinking Water Act 2003*

Emergency relief centre legislation and information
Available at: http://www.legislation.vic.gov.au/
- Public Health & Wellbeing Regulations 2009
- Residential Tenancies (Caravan Parks & Movable Dwellings Registration and Standards) Regulations 2010
- Building Act 1993
- Building Regulations 2018
- Building Code of Australia 2016

Available at: http://www.epa.vic.gov.au/
- Code of Practice – Onsite Wastewater Management, EPA Publication 891.2 Dec 2008
- Emergency Relief Handbook: A planning guide DHS 2013
- Emergency Relief Handbook: A planning guide 2013

Please note: some of the items listed in the 'Authority' section may apply here also.

Infectious disease control
DHHS Guidelines for the Investigation of Gastroenteritis
Available at:
https://www2.health.vic.gov.au/public-health/infectious-diseases/infection-control-guidelines/gastrointestinal-illness-investigation-guidelines

Environmental health:
Victorian Government Health Information website for Environmental Health
http://www.health.vic.gov.au/environment

Conducting exercises
Strategic Emergency Management Simulation Kit, Office of the Emergency Services Commissioner, Department of Justice, December 2003.

Water
Available at: https://www2.health.vic.gov.au/public-health/water
- Your Private Drinking Water Supply
Available at:https://www2.health.vic.gov.au/public-health/water/private-drinking-water
Guidance on the use of rainwater tanks –
Available at:
https://www2.health.vic.gov.au/about/publications/policiesandguidelines/making-sure-rainwater-water-supply-is
- Guidelines for drinking (potable) water transport in Victoria – Guide for Victorian water carters
- Guidelines for private drinking water supplies at commercial and community facilities

Australian Emergency Management Handbook and Manual Series (AEMs)
Available at:https://knowledge.aidr.org.au/

The AEMs has been developed to assist in the management and delivery of support services in a disaster context. The principles, strategies and actions within the AEMs have been compiled by practitioners and managers with extensive service delivery experience in a range of disaster events.

This series has been developed by a national consultative committee representing a range of State and Territory agencies and is sponsored by the Attorney-General's Department. Each title within the series is reviewed on a regular basis.

Emergency Management Manual Victoria (EMMV)
Available at:
https://www.emv.vic.gov.au/publications?publicationfilter=Emergency+Management+Manual+Victoria&field_publication_type_target_id=All&items_per_page=10

The EMMV contains policy and planning documents for emergency management in Victoria, and provides details about the roles different organisations play in the emergency management arrangements.

The Office of the Emergency Services Commissioner maintains the EMMV, in collaboration with emergency management agencies. The Role Statements (Part 7) and the Contact Directory (Part 10) are updated annually. Other parts of the Manual are updated as emergency management arrangements change.

Public Health Fact Sheets
Fact sheets in English and other community languages, developed for the purpose of providing guidance only, to community members, can be accessed via DHHS and State Government of Victoria websites:

http://rss.health.vic.gov.au/atoz/?Public Health
http://www.health.vic.gov.au/environment/emergency_mgmnt/index.htm
http://www.health.vic.gov.au/foodsafety/bus/emergency_situations.htm
http://www.dhs.vic.gov.au/emergency
http://healthtranslations.vic.gov.au/bhcv2/bhcht.nsf/CategoryDoc/PresentCategory?open
http://www.betterhealth.vic.gov.au/

Note: ensure websites are checked on a regular basis to guarantee you are referring to the most recent versions, as fact sheets are continually being updated.

Appendix G - Example of Memorandum of Understanding (MOU)

This Memorandum of Understanding is made the _____ day of _____ between:

1) _____ in his/her
capacity as Chief Executive Officer
of the _____Council
Signature:
AND
2) _____ in his/her
capacity as Chief Executive Officer
of the _____Council
Signature:
AND
3) _____ in his/her
capacity as Chief Executive Officer
of the _____Council
Signature:
AND
4) _____ in his/her
capacity as Chief Executive Officer
of the _____Council
Signature:
AND
5) _____ in his/her
capacity as Chief Executive Officer
of the _____Council
Signature:

RECITALS
The Parties to this Understanding are either signatories to, or principal stakeholders in, the Municipal Emergency Mamagement Plan for their respective Municipalities, made in accordance with Council's obligations under the Emergency Management Act.

a)   Each party desires to promote the objectives of the Act and in so doing to minimise the risk to their various municipalities.

b)   This Understanding is in addition, and complementary to, the Emergency Management arrangements reproduced in the Victorian Emergency Management Manual and the Regional Emergency Response Plan as they exist from time to time.

c)   The parties wish to record: -
● 	their understanding to cooperate with each other to the maximum extent practicable to ensure the efficient and timely deployment of human resources in the event of an Emergency Incident in the Region.
● 	the basis on which it is understood that deployment should take place.

THE PARTIES AGREE AND DECLARE AS FOLLOWS:

1.   STATUS OF UNDERSTANDING
This Understanding is not intended to be legally binding and the provisions of this understanding shall be interpreted accordingly.

2.   DEFINITIONS
2.1   In this Understanding unless the context otherwise requires:
"**Applicable Occupational Health and Safety Law**" means the OH&S laws which apply from time to time in the jurisdiction in which a Loaned Employee is working pursuant to Clause 3 of this Understanding.

"Party" means a Municipality, party to this Understanding, and on whose behalf the Chief Executive Officer of their respective Municipalities has signed this Understanding.

"Host Agency" means a Party, which received a Loaned Employee from a Lending Agency pursuant to this Understanding.   (The Host Agency will be a Municipality, being a signatory to this understanding).

"Lending Agency" means a Party, which supplies a Loaned Employee to another Party for the purpose of assisting a response to an Incident in accordance with this Understanding.

"Loaned Employee" means an employee of a party made available to another party pursuant to sub-clause 4.1 of this Understanding.

"Incident" means an actual or threatened incident of a kind, which warrants a response pursuant to the Emergency Management Plan.

"The Parties" means the parties to this Understanding.

"Personnel" means persons employed by a Party and includes senior officers and employees who are listed from time to time in the various municipalities Emergency Management Plans.

3.   COMMENCEMENT OF REVIEW OF UNDERSTANDING
3.1   The Understanding will commence on <date to be inserted> and will be reviewed by the Parties every two years. Following such a review, this Understanding may be revised and renewed.
3.2   This Understanding will remain in effect (notwithstanding the outcome of any review) until such times as: -
a)   by mutual consent, it is formally revised by all the Parties; or
b)   by unilateral action, any Party gives written notice to all of the parties of its intention to no longer participate in the Understanding in which case: -
i)   the Party giving the notice will cease to be a Party; and
ii)   all the other Parties will continue to be Parties.

4.   DEPLOYMENT OF PERSONNEL

4.1   Where there has been an Incident, a Party may request of another Party that personnel whether named individuals or specified classes of persons, be made available to the requesting Party to assist it to respond to the Incident.

4.2   A request pursuant to sub-clause 4.1 must in writing and name or specify the personnel sought to provide assistance. In exceptional circumstances or cases of urgency, a request may be made orally but must be confirmed in writing within 48 hours of the oral request.

4.3   When a request pursuant to sub-clause 4.1 is received, subject to the availability of relevant personnel under their direct control, the parties undertake to make available personnel to the requesting Party as requested. Where the personnel are not under the direct control of the Party, that Party shall take all necessary action to assist to make the personnel available to the Host Agency.

4.4   The Loaned Employee shall provide assistance to the Host Agency for the duration of the incident response / recovery (that is until the formal announcement of the termination of the response / recovery, or for a shorter period if the Host Agency so decides.

4.5   The Parties will endeavour to ensure that personnel made available pursuant to sub-clause 4.1 are appropriately trained, and/or qualified to perform the functions, which could be expected to be allocated during an emergency incident.

5.   GENERAL TERMS GOVERNING PROVISION OF LOANED EMPLOYEES

5.1   Personnel made available pursuant to Clause 4.1 shall continue at all times to be and shall remain the employee of the Lending Agency. The Lending Agency shall continue to be liable to pay the personnel's wage or salary and all entitlements arising under the contract of employment between the employee and the Lending Agency.

5.2   It is the intention of the Parties that redeployment of personnel under this understanding will not sever or otherwise alter the existing employment relationship between a Loaned Employee and the Lending Agency.

5.3   Without prejudice to clause 5.1, it is the intention of the Parties that duly authorised persons of the Host Agency have the power to direct Loaned Employees as to the manner and form of work to be performed by the Loaned Employee while the Loaned Employee is made available under this Understanding to the Host Agency. By virtue of this clause, general authority to so direct Loaned Employees is hereby conferred upon Host Agencies by Lending Agencies.

5.4   The Lending Agency shall endeavour to ensure that personnel are made aware of their obligation to comply with directions of duly authorised persons of the Host Agency during an Incident.

6.   EXPENSES AND WAGES

6.1   The Host Agency shall provide to the Lending Agency details of hours worked and the nature of the duties undertaken during the period of the loaned Employee's absence from his/her normal place of work for the purpose of assisting with an emergency incident pursuant to this Understanding.

6.2   The Host Agency shall pay all reasonable expenses, including travel, accommodation and incidentals, of Loaned personnel incurred during their period of assisting with the emergency incident.

6.3   Under this Memorandum of Understanding, the requesting Municipality (Host agency), reimburses all of the costs and expenditure incurred by any Municipality providing a loaned employee or employees (the Lending agency) as the result of a request for assistance to aid the Host agency in responding to an emergency incident. Accordingly, where the host Agency has paid the reasonable expenses of a Loaned Employee in accordance with clause 6.2, the Host Agency should, where it is entitled to do so, seek reimbursement from State Displan funds through the appropriate channels.

7.   WORKERS' COMPENSATION

7.1   The Parties recognise that Australian workers' compensation laws continue to apply to Loaned Personnel even where the employee in question suffers an injury in a jurisdiction which is not that employee's normal jurisdiction of employment. Accordingly, the Parties recognise that any Loaned Employee who suffers a compensable injury or contracts a compensable disease in the course of his/her

work for the Host Agency shall be entitled to pursue workers' compensation in accordance with his/her legal rights.

8.   OCCUPATIONAL HEALTH AND SAFETY

8.1   The Host Agency shall be responsible to the Lending Agency for any costs and expenses which may arise as a result of a Loaned Employee suffering any injury of being involved in any incident for which liability to prosecution or suit under an applicable Occupational Health and Safety law may arise.

9.   NEGLIGENCE OF LOANED EMPLOYEES

9.1   In any claims or actions against the Host Agency or Lending Agency resulting from the negligence of a Loaned Employee, the Host and Lending agencies will cooperate with each other to the fullest extent and will provide any information of assistance reasonably required in relation to any such claim or action.

9.2   Subject to any law to the contrary, the Host Agency shall be responsible to the Lending Agency for any costs and expenses which may arise as a result of the act or omission of the Loaned Employee acting under the direction of the Host Agency.

Appendix H - Victorian Department of Health and Human Service

Department of Health and Human Services

DHHS has an important role in protecting the health and well-being of Victorians before, during and after an emergency. DHHS has a number of responsibilities related to emergency planning, preparation, response and recovery; and works closely with the emergency management sector, health services and hospitals, community health centres, pharmacies and the broader health sector during an emergency.

Planning and preparing for emergencies in collaboration with other key stakeholders is an essential role for DHHS. During major emergencies DHHS is responsible for overseeing and coordinating the health system's response, and coordinating relief and social recovery for communities who have been impacted by a disaster. The department works in partnership with emergency services, Victorian government agencies and non-government organisations to ensure there is a whole-of-government response.

The State Health Emergency Response Plan, edition 4 (SHERP4) sets out the arrangements and describes the integrated approach and shared responsibilities for health emergency management between the department, Ambulance Victoria and the emergency management sector.

DHHS supports councils to manage local recovery efforts and coordinates recovery operations at the regional level.

For further information on the roles and responsibilities of DHHS refer to the EMMV and the State Health Emergency Response Arrangements (available at https://www2.health.vic.gov.au/emergencies/shera)

Control agency responsibilities:

Public health area	Possible types of emergencies	DHHS Regions Responsibility

Food	· contamination of food during manufacturing, storage, transport or through contaminated raw materials or other natural means · contamination of food following emergencies, eg: floods and bushfires leading to loss or refrigeration and food spoilage. · threatened or deliberate tampering and contamination of food. · Infectious diseases arising from food preparation and consumption.	· coordinate field investigations and assist with food premises closure · coordinate and advise regarding preliminary issues for food recalls · coordinate sample collection and transfer · provide public health information regarding food safety · support local government EHP's
Biological	· food/waterborne illness · gastrointestinal illness · communicable diseases from an animal source (such as Avian influenza) · diseases spread by vectors (such as Murray Valley Encephalitis spread by mosquitoes) · emerging infectious diseases (such as SARS) · pandemic influenza · CBR incidents of a biological nature (such as Anthrax) · exotic disease (such as Viral Haemorrhagic Fever)	· coordination and support of the action by local government EHP's · coordinate sample collection and transfer · provide public health advice about infection control
Water	· loss of disinfection of drinking water supply · microbiological or other contamination of a drinking water supply · toxic blue-green algae detected in water supply systems or recreational waters	· coordination and support of the action by local government EHP's · support and assist DHHS public health field teams · provide advice on potability of private drinking water supplies · coordinate sample collection and transfer
Radiation	· transport accidents involving radioactive material · finding of suspected radioactive material · lost or stolen radioactive material · other incidents involving dispersal of or a breach in containment of radioactive material.	· disseminate public health information · support and assist Public Health field teams · support local government EHP's

Support agency responsibilities

Public health area	Possible types of emergencies	DHHS Regions Responsibility
Chemical (DHHS provides support but is not a support agency in EMMV)	· support fire services (the control agency) during chemical emergency events not related to food or drinking water. · upon request, provide toxicological advice from a public health perspective during and after chemical incidents. This advice includes the assessment of potential chemical health risk(s) to the community, identification of ways to manage risks and assistance in the communication of risks to agencies and the public.	· assist with environmental sampling · coordinate sample collection/transfer · support local government EHP's
Natural Events	· Water contaminated with sewage or other contaminants (such as ash run off). · Food contaminated due to ineffective storage or through improper preparation. · Infectious disease outbreaks arising from food or water, unsanitary conditions, vectors (such as mosquitoes, vermin). · Environmental effects such as chemicals or growth of moulds and fungus.	· support local government EHP's
Water	· support Victoria Police in investigation of threats or deliberate attempts to contaminate drinking water supplies.	

Appendix I - Information management pro formas

Public health services incident/complaint report

Date:	Time:	Officer:
Caller details		
Name:		
Address:		
Telephone no:		
Map reference:		
Incident/complaint:		
Matter referred to:		
Report/action taken:		
EHO:		
Date completed:		

Public health unit emergency complaints register

Complaint number	Date	Time	Name	Address	Telephone	Details	Comments/ Completion date

Appendix J - Checklists for Standard Operating Procedures

- Checklist for public health risks in an emergency
- Chlorine concentrations required for disinfection
- Public Health survey of damaged premises/affected housing
- Checklist of public health responsibilities in emergency relief centres

Checklist for public health risks in an emergency

Providing safe and adequate water	Provision of emergency ablution facilities

Providing safe and adequate water

Townships affected & source of water supply:
Eg: tank, bore, well, reticulated, stream, river
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Issues to consider before implementing SOPs:
- ❏ contaminated private water supplies
- ❏ water sampling
- ❏ provisions of information on water treatment
- ❏ provision of alternative water supply (responsibility of Water Authority)
- ❏ ensure water cartage vehicles are registered
- ❏ list of suppliers of bottled water
- ❏ hygienic storage of water

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Provision of emergency ablution facilities

Facilities	Toilets	Urinals	Washbasins	Showers
Males	1 per 20 persons	1 per 25 persons	1 per 30 persons	1 per 35 persons
Females	1 per 15 persons	N/A	1 per 30 persons	1 per 35 persons

Calculate the number of facilities (toilets, showers, laundry facilities) for displaced persons: ....
....
....

Issues to consider before implementing SOPs:
- ❏ location of facilities
- ❏ who is responsible for cleaning and maintenance of facilities?
- ❏ disposal of waste (may need to liaise with EPA)
- ❏ are any records being kept?

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Food and food related issues	Wastewater treatment
Issues to consider before implementing SOPs: ❏ food premises affected by emergency ❏ emergency catering at: ● emergency relief centres ● for emergency workers ❏ donated food ❏ private homes ❏ distribution of information on issues such as: ● food safety during/following power failure ● protecting food from contamination ● disposal of spoilt food ❏ clean up procedures	Liaise with the EPA regarding wastewater disposal strategies and to ensure appropriate type of system. Evaluate the use of existing septic tank systems: ❏ treatment plants ❏ plumbing fixtures ❏ damage to pipe works ❏ disposal area ❏ damage to existing fibreglass systems ❏ availability of reticulated water .... Is community information required? Y/N ❏ living in caravans on private property during rebuilding ❏ desludging and maintenance of septic tanks ❏ protecting septic tank systems from damage by demolition machinery ....
Shelter	**Vermin and vector control**
Have emergency relief centres been opened? Y/N If yes, implement SOP and utilise checklist. Liaise with MERO/MRM re: opening of new centres. .... Are any private homes affected? Y/N If yes, complete assessments of emergency affected housing using checklist. Provide information regarding clean up, damaged buildings, etc. Method for distribution?	Monitor and control breeding and harbourage of vermin and vectors in areas of concern: ❏ food preparation and storage areas ❏ refuse collection areas ❏ sanitary depots ❏ damaged/destroyed poultry sheds, piggeries and abattoirs ❏ damaged food premises, domestic premises ❏ deadstock/animals ❏ burst sewerage and water pipes ❏ damaged septic tank systems Is community information required on: ❏ vector control ❏ personal protection ❏ waste management and vermin control

Refuse collection and disposal	Infectious disease control
Liaise with municipal engineer and EPA regarding waste management requirements: ❏ siting of bins/services in community & relief centres ❏ concerns/complaints ❏ commercial premises requirements ❏ providing domestic bins and services ❏ damaged or destroyed bins ❏ keeping of records ❏ alternative disposal sites .... Are there dead animals or stock? Y/N Liaise with municipal rangers, DJPR and Agriculture Victoria for disposal methods Is community information required on: q storage and separation of waste prior to collection q disposal of spoilt and damaged food q location and use of additional bins and services provided throughout emergency affected area	Is there the potential for infectious diseases? Y/N Any concerns regarding infectious disease outbreaks to be notified to DHHS. Investigate any possible outbreaks in accordance with DHHS publication '*Guidelines for the investigation of gastroenteritis'.* Officer responsible:... Ensure appropriate documentation is retained. Vaccination Sessions (if required) issues to consider: ❏ locate suitable venue/s ❏ distribute information and advice ❏ assist with the coordination of vaccination session/s ❏ provide refrigeration and storage ❏ provide personnel i.e. nurses, administration ❏ provide waste management information ....
Disinfection and cleaning	**Environmental hazards**
Issues to consider: provide advice on how to clean and disinfect. ❏ private houses ❏ commercial premises ❏ public swimming pool, spas etc Is community information required? ❏ clean-up and disinfection of private homes and rainwater tanks following a floods/fires ❏ cleaning and disinfection of swimming pools and spas	What are the hazards? .... Is sampling & analysis required? Y/N If yes, what?.. Is erection of signs & public notices required? Y/N If yes, what?.. Is distribution of information & advice to the community required? Y/N If yes, what?..

General Notes		

Completed by:		Date:	

Chlorine concentrations required for disinfection

Chlorine based sanitisers (like household bleach) should be used in outbreak situations, as other sanitisers and disinfectants (such as quaternary ammonium compounds) are only effective against some bacteria but have very little effect on destroying viruses. Chlorine solutions must be made up freshly as the chlorine deteriorates over time. To make the concentration required dilute the chlorine as follows:

Milton disinfectant (with 1% available chlorine)			
	Add following amounts of Milton to the water to give the required concentration		
Volume of warm water to which chlorine is added	**100ppm**	**200ppm**	**1000ppm**
5 litres	50 ml	100 ml	500 ml
10 litres	100 ml	200 ml	1000 ml
50 litres	500 ml	1000 ml	5000 ml

Household bleach (with 4% available chlorine)			
	Add following amounts of bleach to the water to give the required concentration		
Volume of warm water to which chlorine is added	**100ppm**	**200ppm**	**1000ppm**
5 litres	12.5 ml	25 ml	125 ml
10 litres	25 ml	50 ml	250 ml
50 litres	125 ml	250 ml	1250 ml

Liquid pool chlorine (with 12.5% available chlorine – concentrations based on 10% available chlorine)			
	Add following amounts of liquid pool chlorine to the water to give the required concentration		
Volume of warm water to which chlorine is added	**100ppm**	**200ppm**	**1000ppm**
5 litres	5 ml	10 ml	50 ml
10 litres	10 ml	20 ml	100 ml
50 litres	50 ml	100 ml	500 ml

Granular chlorine (with 65% available chlorine) – if using sachets follow manufacturers instructions			
	Add following amounts of granular chlorine to the water to give the required concentration		
Volume of warm water to which chlorine is added	**100ppm**	**200ppm**	**1000ppm**

5 litres	0.8 g	1.5 g	8 g
10 litres	1.5 g	3 g	15 g
50 litres	8 g	15 g	77 g

- ppm = parts per million (a measure of concentration of chlorine)
- 5ml = 1 teaspoon. A standard bucket holds approximately 9-10 litres

Important safety notes:
- It is safer to add chlorine to water (do not add water to chlorine) & use gloves when handling chlorine
- Do not heat water to make up chlorine solutions – warm tap water is safer (up to 50°C).
- Follow safety, storage and handling instructions on all bleach and chlorine containers as it is corrosive to metals, bleaches fabrics and may irritate the skin, nose and lungs.

Public health survey of damaged premises/affected housing

Property inspection details			
Date:		Time:	
Completed by:		Position/title:	
Completed by:		Position/title:	

Property details	
Property name and address * description if address unknown	

Melway/VicRoads/VicMap Book ref		GPS coordinates	

Dwelling type:	❏ House ❏ Unit/Flat ❏ Caravan ❏ Business/Shop
Ownership details:	❏ Owner occupied ❏ Tenant ❏ Government

Name of owner/occupier:		Contact No.	
Name of person/s present at visit?		Contact No.	

Have any person/s visited an Emergency Relief Centre?	

Damage assessment summary	**Yes**	**No**	**Comments**
Is property accessible for inspection?			

Has property been assessed for insurance?			
Are there functional utilities onsite? Duration of interruption?			❏ Power ❏ Gas ❏ Water ❏ Telephone ....
Has the house been damaged?			
Have the outbuildings been damaged?			
Is the presence of asbestos likely?			
Is there an operational toilet onsite?			
Is the property connected to sewer?			
Are septic tank & effluent lines operational?	......	......	....
Is a mechanical treatment plant used?	......	......	....
Is the septic connected to a sand filter?	......	......	....
Does septic require electric pump?	......	......	....
Damage assessment summary	**Yes**	**No**	**Comments**
Is there operational potable water supply to the property?			❏ Mains ❏ Tank ❏ Bore ❏ Surface Other:..
Is there a requirement for removal of: Dead stock/domestic animals/wildlife? Putrescible materials? Food from refrigerators/freezers?			 ....
Are there potential hazards onsite? eg: hazardous chemicals, LPG gas cylinders			
Is there extensive flood damage? (List items and areas affected)			
Are there any additional health and sanitation problems?			

Temporary accommodation	Yes	No	Comments
Is temporary accommodation required?			
Is there a caravan already onsite?			Power connected: Yes / No Toilet operational: Yes / No
Is there a suitable area for a caravan?			
Is clearing required for a caravan?			Approximate quantity:........m^2
Is sanitary contractor required?			

Follow-up details:

Follow-up inspection date:		Time:	

Recovery action undertaken:..

....

Further follow-up action required:..

....

....

Checklist of public health responsibilities in Emergency Relief Centres

Site details				
Site name & address				
Site manager name		Site manager phone		
Audit conducted by (name & position)		Audit date/time		

Food Safety	Yes	No	Comments
Is dry food being stored appropriately?			
Is the refrigeration capacity adequate?			
Are refrigerators/freezers at correct temperatures?			
Is there a dedicated operational hand wash basin with warm water, soap and paper towel available?			
Are food handlers displaying good hygiene practices?			
Are food preparation equipment and eating and drinking utensils being cleaned and sanitised after each use?			
Is food being sourced form registered suppliers?			
Is there a process for inspection, acceptance/rejection, storage or disposal of donated foods?			
Are special dietary requirements being met with appropriate procedures in place?			

Water Supply	Yes	No	Comments
Is there an adequate supply of hot and cold potable water? ❏ Mains ❏ Tank ❏ Bore ❏ Surface Other:...			
Does the water require treatment?			

	Yes	No	Comments
Is the water supply adequate for: ❏ Drinking ❏ Food prep ❏ Cooking ❏ Sanitation			
Wastewater Management	**Yes**	**No**	**Comments**
Type of system installed: ❏ Sewer ❏ Septic tank ❏ Secondary Treatment			
Is the system coping with the load?			
Is desludging of the septic tank required?			
Has the disposal area been isolated to prevent damage?			
Sanitary Facilities	**Yes**	**No**	**Comments**
Is there adequate no. of toilet facilities for the number of people being accommodated? *(including male, female, child and disabled)* **Note:** Recommended no. of toilets is 1 per 15 females, 1 per 20 males; urinals 1 per 25 males; hand basins 1 per 30 people.			
Do additional portable toilet facilities need to be sourced?			
Are toilets supplied with toilet paper and hand basins supplied with soap and paper towel?			
Is there an adequate no. of shower and washing facilities? *(including male, female, child and disabled)* Note: Recommended ratio is 1 shower per 50 persons.			
Do additional portable shower facilities need to be sourced?			
Are the toilet and shower/wash room facilities being maintained in a hygienic state?			
Are the laundry facilities (washing, drying & hanging) adequate?			
Are there adequate baby changing facilities?			

Refuse Management	Yes	No	Comments
Are there an adequate number of receptacles? If not, how many more are needed? Have they been requested?			
Are the bins situated appropriately? eg: kitchen/toilets		67	
Is frequency of disposal/removal adequate?			

General	Yes	No	Comments
Temperature control – are changes required to improve: ❏ Ventilation ❏ Heating ❏ Cooling			
Is the level of lighting appropriate? eg: kitchen, toilets			
Are there any problems with vermin/vectors?			
Are there any issues associated with noise?			
Are animals being brought /strays attracted to the venue? Is assistance from local laws/rangers required?			

Other Comments

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Actions	Yes	No	Date and Time
Is a follow-up inspection required?			

Appendix K - Acronyms, abbreviations and glossary

This section includes a list of acronyms and abbreviations for organisations, positions and terms used in the Public Health Emergency Management sub-plan (PHEMP).

A comprehensive list of emergency management acronyms, abbreviations and a glossary can be found in Part 8 of the *Emergency Management Manual Victoria*.

Agencies

AEMI	Australian Emergency Management Institute
ARC	Australian Red Cross
AV	Agriculture Victoria
CFA	Country Fire Authority
DHHS	Department of Health & Human Services
DELWP	Department of Environment, Land, Water and Planning
DJPR	Department of Jobs, Precincts and Regions
EHPA	Environmental Health Professionals Australia
EPA	Environment Protection Authority
MAV	Municipal Association of Victoria
MFESB	Metropolitan Fire and Emergency Services Board
VicSES	Victorian State Emergency Service
VicPol	Victoria Police
WorkSafe	WorkSafe Victoria (Victorian WorkCover Authority)

Documents and Plans

EMMV	Emergency Management Manual Victoria
SHERP	State Health Emergency Response Plan
MPH&WP	Municipal Public Health and Wellbeing Plan, prepared by a Council under S26 of the *Public Health and Wellbeing Act 2008*.
CERA	Community Emergency Risk Assessment
MEMP	Municipal Emergency Management Plan
PHEMP	Public Health Emergency Management sub-plan
MOU	Memorandum of Understanding
SOPs	Standard Operating Procedures
Practice notes	Specific instructions describing how an activity included in an SOP is conducted (can include fact sheets, references, etc)

Operation Centres

SCC	State Control Centre
H&HS SEMC	Health & Human Services State Emergency Management Centre - used by the Department of Human Services and the Department of Health to coordinate the health and human services response and recovery operations of medium to large-scale incidents
H&HS REOC	Health & Human Services Regional Emergency Operations Centre
RERCC (RCC)	Regional Emergency Response Coordination Centre
ICC	Incident Control Centre - the location where the incident controller (and incident management team) provide overall direction of response activities
MECC/MEOC	Municipal Emergency Coordination Centre/Operations Centre
ERC	Emergency Relief Centre - a building or place established to provide essential needs to persons affected by an emergency

Roles

MEMPC	Municipal Emergency Management Planning Committee
MERC	Municipal Emergency Response Coordinator (Victoria Police)
MEMC	Municipal Emergency Management Coordinator, a council employee who represents council in the liaison and coordination of emergency response and recovery planning arrangements at a municipal and regional level.
MERO	Municipal Emergency Resource Officer
MRM	Municipal Recovery Manager
EMLO	Emergency Management Liaison Officer
Environmental Health Department	The Environmental Health Department or other department/s of a municipal council with responsibility for the PHEMP
Manager/Team Leader Environmental Health	An EHP with responsibility for leading a team of EHP's and other officers
EHP	Environmental Health Professional – a person with qualifications in public and/or environmental health including Environmental Health Officers, Environmental Health Technicians, Medical Officer of Health or other authorised officers with public health responsibilities employed by a municipal council or Department of Health and Human Services
EHO	Environmental Health Officer
MOH	Medical Officer of Health
Emergency management personnel	Employees and volunteers of the council or other agency, with roles in emergency management

Public health emergency	In this PHEMP, public health emergency will be taken to mean an emergency where a public health risk is the basis of the emergency, such as water contamination or an emergency event (such as flood or fire) that causes actual or emerging public health risks
Registered premises	Premises registered with the Council under the *Public Health and Wellbeing Act 2008*, *Food Act 1984*, *Residential Tenancies Act 1997*
SIA	Secondary Impact Assessment
SDPHO	Senior Divisional Public Health Officer
PHM	Public Health Manager employed by DHHS
Partner	Other municipalities or agencies that have established agreements with the municipality to provide support in an emergency