

Life Without Barriers

COVID-19 - EMERGENCY RESPONSE

Pandemic Plan

Updated July 2022

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Championing opportunity for all

Contents

1. Purpose	3
2. Planning our Pandemic Response	3
2.1 Timeline of the COVID-19 Pandemic Response	3
2.2 Organisational Context	5
2.3 Organisational Risks associated with COVID-19 Pandemic	5
2.4 Scenario Planning	6
2.5 Critical Operations	7
2.5.1 Essential Services	7
2.5.2 Critical Employees	7
2.5.3 Critical ICT Infrastructure/Systems	7
2.5.4 Critical External Stakeholders	7
2.5.5 Safety and Wellbeing	7
3. Ongoing Management of the COVID-19 Pandemic	8
3.1 Key Elements of COVID Response	8
3.2 COVID Secretariat	9
3.3 Communication	9
3.4 Business-As-Usual COVID Management	10
3.4.1 Controls and Assurance	10
3.4.2 Inform and Support	12
3.4.3 Restriction and Lockdown Management	12
3.4.4 Outbreak management	13
3.4.5 Vaccine Management	14
3.4 Adapting to COVID Outbreaks	14
4. Measuring our Success	16
4.1 Success Factors	16
4.2 Risk Management	17
4.3 Assurance Measures	17
4.4 Periodic Review and Reflection	17

1. Purpose

The purpose of the COVID-19 Pandemic Plan is to support the organisational priorities during the pandemic:

1. Ensuring continuity of care for the people we support and
2. Promoting the ongoing health and wellbeing of our clients, carers and employees.

It guides the management of the impacts of COVID-19, and has been updated to reflect the learnings and practical experience gained over the course of the pandemic and to respond to current and future challenges.

The updated plan also reflects the transition by Life Without Barriers (LWB) from the centralised COVID Response Unit (CRU) to a more decentralised approach coordinated by the newly named COVID Secretariat that is both integrated within business-as-usual functions and processes, and scalable to respond to the changing nature and impacts of the virus or other local and global conditions.

2. Planning our Pandemic Response

2.1 Timeline of the COVID-19 Pandemic Response

In March 2020, LWB established a COVID-19 Pandemic Emergency Response Plan to mobilise, respond, adapt, and recover from COVID-19. The plan was enacted through the COVID-19 Response Unit (CRU), led by the Executive Lead COVID Response, to support the Chief Executive to manage the ongoing COVID-19 response.

From late 2020, the emergence of new COVID variants started to spread globally, posing increased risk to public health and greater potential disruptions to organisations.

The national COVID-19 vaccine program commenced in Australia in February 2021 with a prioritised, phased approach to offer an approved vaccine to all eligible Australians as and when available. While the virus remained highly contagious and new variants continued to spread throughout the world, many countries have now moved away from a COVID-zero strategy and adopted various approaches to “live with and work alongside the virus”. In June 2021, LWB conducted COVID risk scenario planning sessions to prepare for a potential outbreak of the highly infectious Delta variant. Throughout this time, the CRU continually refined arrangements to ensure LWB activated the best available preparation and response.

In July/August 2021, National Cabinet agreed a ‘Roadmap out of COVID’ developing a National Plan with phased vaccination targets, to guide the easing of restrictions and the reopening of the economy based on rates of community vaccination. At that time, it was expected that further lockdowns, border closures, public health orders, mandated mask wearing, social distancing and any other protective measures may continue after vaccination target rates were achieved. It was also predicted there may also be sporadic non-compliance of some public health orders as well as continued potential for anti-vaccine campaigns, protests and civil unrest.

The Omicron outbreak at the end of 2021 saw a sharp increase in the infectiousness and community spread of the virus. At the same time there were substantive changes in the political and public health response, with all Australian jurisdictions opening borders and easing restrictions (to different extents and on different timelines) in line with a “living with COVID” approach rather than the previous “suppression” or “elimination” approaches. The wide community spread of the Omicron outbreak placed significant pressure on the health system with flow-on impacts for general healthcare access and quality.

In March 2022, the Executive sought to consider options to respond to COVID in light of changing viral and public health conditions. The CRU ‘case management’ model was deemed inadequate to respond to rapid mass community outbreaks of highly infectious variants (such as Omicron), and an alternative decentralised approach coordinated by a newly formed Covid Secretariat was recommended to be integrated within existing Business-As-Usual functions and scalable to respond to COVID surges.

In April 2022, the Executive sought an outline of plausible future scenarios for COVID 19 ranging from best case scenarios with minimal health impacts for the broader population through to worst-case scenarios with more severe and unpredictable outcomes for most of the population¹. The advice also considered the broader (geo-)political, economic, environmental, technological and health trends that may intersect with the viral evolution and shape impacts on LWB and the broader community². Operational and advocacy actions were recommended to proactively prepare the business, clients and staff for the demands and challenges that lay ahead over the next 2-5 years.

In May 2022, LWB commenced planning for transition to a new ‘Business-As-Usual’ COVID response model, which moves away from responding to COVID as if in a permanent state of emergency (which was appropriate in the early phase of the pandemic) to an approach that manages COVID in line with existing organisational structures and processes as with other ongoing risks to clients, staff, and the business. Under this model, some functions undertaken by the CRU are retained by the COVID Secretariat, shift to self-service or are integrated into existing business units, roles, functions, and processes. A COVID Governance Committee remains in place to steer and oversee the response, supported by a small COVID secretariat to undertake key functions centrally, such as planning and advice, oversight and monitoring and assurance and continuous improvement.

¹ [Four plausible scenarios for the future \(Webinar 4: Foresight project series\) - YouTube](#); [S1513 Viral Evolution Scenarios.pdf \(publishing.service.gov.uk\)](#)

² [Global Risks Report 2022 | World Economic Forum \(weforum.org\)](#); [Global Growth to Slow through 2023. Adding to Risk of ‘Hard Landing’ in Developing Economies \(worldbank.org\)](#); [The World Ahead 2022: five stories to watch out for | The Economist - YouTube](#); [Webinar 2 – The Global trends that are shaping our world \(1/2\) \(who.int\)](#); [COVID-19 and Global Inequality – IMF F&D](#); [Six big challenges facing governments in 2021 \(pwc.com\)](#);

2.2 Organisational Context

With the ever-changing COVID landscape, LWB updated the Pandemic Plan to reflect the dual reality of broad community acceptance to live with and work alongside the virus, and the challenging environment of enduring, significant health impacts of COVID on vaccinated and unvaccinated people, particularly for those who are more vulnerable to severe illness, impacting the operations of LWB.

LWB provides support services to many people at a higher risk of impact from the virus. In every area of our operations, we help people access services and participate in the community. Over 7,000 staff support close to 23,000 people living in over 400 communities across the nation, in urban, rural, and remote locations. We have 120 offices and provide 24/7 care in 650 homes around Australia. We also have over 8000 staff and 3000 carers who provide regular support to clients. Our geographical spread increases the risk that we will continue to be affected by the COVID-19 pandemic.

The dynamic nature of the COVID pandemic has resulted in frequent, targeted communication with clients, staff, and stakeholders, where the CRU has been providing timely updates and alerts regarding public health orders, operational aspects of supporting clients with COVID, advice on employee vaccination policies, and other communications.

2.3 Organisational Risks associated with COVID-19 Pandemic

The COVID-19 pandemic continues to impact the availability of LWB services, presenting key risks including inherent COVID-related risks, and risks identified for the period of transition while LWB moves to implement the 'Business-As-Usual' COVID response model, including:

- Continuity of service delivery to clients and carers.
- Keeping people safe and well from the impacts of the virus.
- Capacity to adapt and adjust services during public health order restrictions.
- Potential shortages of critical supplies, including medical supplies, equipment, personal protective equipment (e.g., masks and gloves) and essential grocery items.
- Capacity of the public health system to support clients with high and/or complex medical needs.
- Staff shortages due to illness, preventative quarantine, caring for others, school closures or anxiety – leading to workforce shortages that threaten the viability of essential service provision
- Well-being and morale for clients, families, carers and staff due to personal and community impacts from illness associated with COVID.
- Financial implications due to decreased service delivery, increased reliance on agency staff.
- Increased difficulties in meeting regulatory and contractual obligations.
- Vaccination uptake and vaccination management for clients and staff.
- Transition to the new COVID response model impacted by suitable planning and implementation.
- Responding to future COVID outbreaks using a consistent, timely, escalation approach.
- Retaining key workforce members skilled and knowledgeable in COVID response activities and leadership.

2.4 Scenario Planning

Future characteristics and impacts of COVID-19 are difficult to accurately predict. Analysis undertaken by LWB sought to determine the future impact of COVID on public health, political, social, and economic conditions. There is strong scientific consensus that new variants will continue to emerge, possibly more infectious and with potentially more severe health outcomes. The new “living with COVID” public health approach in most jurisdictions, including open international borders means that any future community spread is likely to be quick, with variants able to reach Australia within short periods of time, particularly as international travel resumes.

With many in the community experiencing “COVID fatigue” and some continuing to protest restrictions and vaccination, community spread may also become less contained than it has been to date. Further, current vaccination may also not be as effective against new variants, risking increases in more severe disease, particularly for more vulnerable groups.

LWB identified four plausible scenarios of the future impact of COVID:

Reasonable best case

- New variants but less potent.
- Efficacy of vaccines remains high and annual boosters only for vulnerable
- Minor seasonal/regional outbreaks
- Effective treatments reduce mortality
- Severe illness and mortality largely limited to vulnerable
- Few influenza cases

Central optimistic

As per above except

- Annual seasonal waves of infections like Omicron with good and bad years
- Updated vaccines annually for vulnerable and everyone in bad years

Central pessimistic

- New variants with higher transmissibility and severity than Omicron
- Repeated large waves of infections at short notice – not seasonal
- Annual updated vaccines for everyone
- Concurrent influenza seasonal waves
- Severity and mortality concentrated among vulnerable

Reasonable worst case

- Repeated emergence of new variants, unpredictable transmissibility, and severity
- Large waves of infections

- Annual updated vaccines for everyone but variants outpaced new vaccines
- Protective behaviours source of societal conflict
- Treatment resistant
- Severity and mortality across population, but still worse for vulnerable

2.5 Critical Operations

2.5.1 Essential Services

An important aspect of emergency preparedness and response processes, both in reaction to COVID and other emergency situations, is to protect the most critical services, categorised according to the following description:

- **Essential Services**
Any direct or indirect support without which the safety, health or welfare of clients or employees would be endangered or seriously impacted. This includes some in home supports, supported living / residential care, probity, incident management and critical corporate activities.
- **Non-Essential Services**
All direct and indirect supports which have no material impact on the safety, health or welfare of clients or employees. This includes day centre / community access activities, continuous improvement projects and routine administration / reporting.

2.5.2 Critical Employees

Details about key employees are maintained by P&C along with nominated backup person and any agency support arrangements within client service provision and corporate functions.

2.5.3 Critical ICT Infrastructure/Systems

The established ICT disaster recovery process is supported by emergency preparedness and response processes to ensure critical systems are maintained and key employees can access these systems when they are required to work in alternate locations or remotely. Our ICT infrastructure was enhanced from the start of the pandemic to support staff working remotely.

2.5.4 Critical External Stakeholders

The LWB National Emergency Response Protocol identifies the key roles responsible for managing external communications. In this way external stakeholders are kept aware of changing circumstances impacted by COVID-19.

2.5.5 Safety and Wellbeing

Prior to the transition to the Business-As-Usual COVID response model, the CRU was responsible to protect the safety and wellbeing of clients, staff and stakeholders from the impacts of COVID-19, through safeguarding activities such as health and safety controls, risk assessments, contingency planning, vaccine management and others.

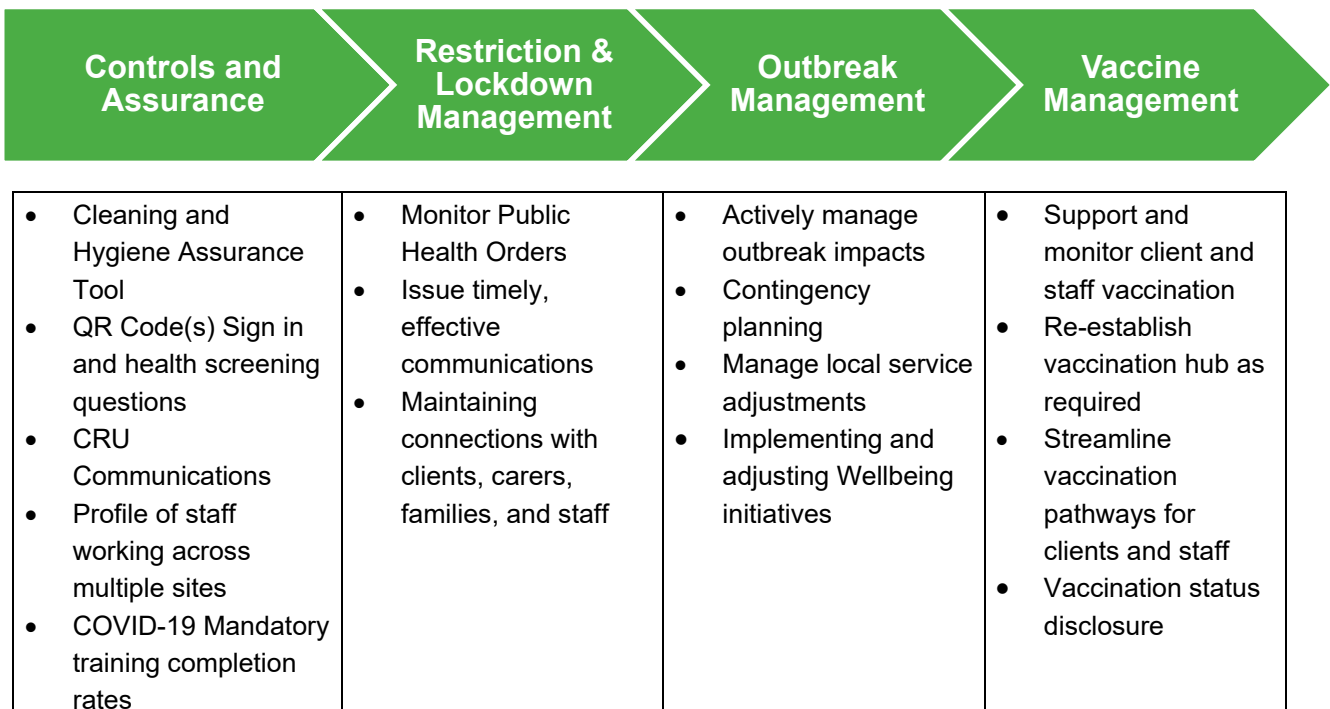
Following transition to the Business-As-Usual COVID response model, these responsibilities are taken up by areas of the business generally responsible for safety and wellbeing under non-COVID scenarios. As examples, P&C HSE is responsible for safety aspects, wellbeing intranet information is absorbed into BAU P&C responsibilities and operational areas undertake responsibility for house based contingency planning.

The COVID Secretariat retains a role in monitoring compliance through regular SITREP reporting to the COVID Governance Committee including case numbers, assurance reporting, QR code signing, recent communications issued, L&D mandatory training tracking, vaccine reporting (clients and staff) and staff working across multiple worksites.

3. Ongoing Management of the COVID-19 Pandemic

3.1 Key Elements of COVID Response

In the original Pandemic Plan, the pandemic emergency response consisted of four alert phases – delivered either as separate or concurrent activities and at various stages and locations – 1. Mobilise, 2. Respond, 3. Adapt, 4. Recover. The updated Pandemic Plan targets four key elements of COVID response delivered by various areas of the BAU business to the scale suited to the extent of any outbreak, noting some activities may only be activated during significant COVID situations, such as re-establishment of vaccine hubs.



Although the specific allocation of roles, functions, tasks, and resources in the 'Business-As-Usual' COVID response model plan are considered appropriate for state of the virus and the local and global response and conditions in 2022, other scenarios are plausible and equally possible. The new COVID response model has been designed to be adjustable and scalable depending on the prevailing conditions. As such, the transition to these arrangements is not considered 'set and forget', rather the first iteration of a fluid plan able to evolve with the virus and other conditions over the next 2-5 years and beyond. A key task of the COVID Governance Committee is to provide a watching brief on viral evolution and its impacts and advise the LWB Executive to proactively prepare, adjust and respond as needed.

3.2 COVID Secretariat

In order to respond to the impacts of COVID-19, the COVID Secretariat is the lead area with responsibility to continually guide and uplift response activity, including to:

- Respond to escalations
- Deliver External Reporting (if bulk reporting + oversight is not possible)
- Respond to Public Health Units, Responding to Commission (if undertaking external reporting responsibilities)
- Monitor public health orders
- Interpret government health order and provide advice on the LWB position
- SITREP Reporting
- Local horizon scanning - Monitoring of local environment and immediate needs, regulatory obligations.
- Cluster monitoring
- Compliance monitoring (COVID-19 safe work requirements)
- Monitor COVID emergency conditions, and other epidemic or pandemic developments, and alert NEMT where required
- Guidance on staff availability to work for Close Contact
- Record keeping and reporting and systems improvements
- Prepare and update content for staff and management guidance and advice and FAQs
- Provide COVID subject matter expertise to business including COVID Governance Committee
- Participate in external forums
- Prepare and assure content for communications to staff, clients and support networks

3.3 Communication

Communications issued during COVID-19 outbreaks includes information that is:

- Relevant, timely, accessible, and clear both nationally and jurisdictionally
- Tailored to impacted communities and cohorts (including the use of Easy English or community languages)
- Provided through a range of communication channels (e.g., text, email, social media)
- Suited to external liaison with Government and service sector
- Supportive of LWB's participation in External Forums to share experience where requested.

LWB maintains a Crisis Communication Plan to activate during emergency circumstances.

Under Business-As-Usual COVID situations, all staff and managers are able to source appropriate guidance and COVID related materials from the Intranet. The COVID Secretariat leads BAU Business Units (i.e. Communications, HSE, P&C, Client Services representatives) to provide specialised knowledge as and when updates are required.

3.4 Business-As-Usual COVID Management

In order to live alongside COVID, various areas of the business will apply their usual activities and duties to cater for COVID specific challenges that client, staff and carers will have. Business-as-usual activities include those required in order to remain prepared for escalation of COVID cases and may be cyclic or ongoing. The following outlines the functions required and the assignments of business-as-usual responsibilities.

3.4.1 Controls and Assurance

Staff and Managers

- Staff **self report COVID cases** using updated reporting tools
- Staff and managers **record COVID cases and close contact status** on behalf of clients, carers and are able to record on behalf of other staff
- Case manager / House Managers **maintain vaccine status** on behalf of clients and carers as reported to key workers and “Booking staff”
- All managers **case manage** both high and low risk COVID cases to point of recovery and **return to work**, with support provided by P&C HSE representatives in the case of high risk cases
- Staff **undertake mandatory training** and managers ensure mandatory training is completed
- House Managers maintain and **educate** staff/carers on **Cleaning and Hygiene Assurance Tool** as part of induction process
- Secretariat and Operational Line Management monitor compliance with **COVID-19 safe workplace** requirements and protocols
- Operational line management monitor and manage staff reports of COVID, ensuring **roster fulfilment**
- Operational management ensure **plan currency, plan maintenance and plan closure**, including Evacuation, Residential Contingency Plans, personal plans, etc

National Controller

- Lead “**Lean Forward**” discussions as part of escalation management

COVID Governance Committee

- Consider and respond to risks and issues **escalated** by operational management and others

Secretariat

- Prepare **SITREP reporting** for Governance Committee and Board, as listed in Assurance Measures below
- **Report positive cases to NDIS Commission**, noting potential for transition to Disability Client Services at a later date
- **Interpret** requirements from **health orders**
- Ensure **compliance** with government recording and reporting mechanisms
- Provide COVID **cluster** reporting
- **Monitor** NEM Step-up/step-down conditions
- Provide guidance on **staff availability** to work for Close Contact by publishing close contact snapshot matrix
- **Monitor local environment** and immediate needs, regulatory obligations
- Ensure appropriate **record keeping** and advocates for system improvements

Emergency Lead

- **Test continuity plans** for key employee supports / key role transition and stability
- Maintain **Crisis Communication Plan**

P&C

- Develop and continuously improve mandatory **training**
- Determine profile of staff working across **multiple sites**

CSF Procurement

- Encourage and monitor use of the **Cleaning, Hygiene and PPE Assurance Tool** to all workplaces.
- Perform **new property additions / property removal** to support the Cleaning, Hygiene and PPE Assurance Tool
- Maintain, distribute, and audit supplies of **PPE** and maintain PPE stockpile

GRPI

- Perform broad **Horizon Scanning** for international impacts, political influencing factors, future focus, viral evolution and national global trends, external policy, advocacy, regulatory environment
- Identification of **Critical services** - essential services / non-essential services

3.4.2 Inform and Support

Various corporate business units develop and continuously improve guidance for managers, staff, carers, families, and clients to prevent and manage COVID. In addition:

Staff and Managers

- All staff and managers access the COVID19 Intranet Site to **obtain the latest COVID-19 material and advice**
- Managers **refer to resources** (training guides, intranet etc). **Escalate** to Secretariat where required.

Secretariat

- Ensure **adequate information** is available on the **intranet** and assess changes needed to intranet information
- Update **staff and management guides** republish to intranet, policy centre
- Add/revise **frequently asked questions** on intranet as needed

P&C

- Develop and continuously improve mandatory **training**
- Communications Team assist with format and technical **publishing**

3.4.3 Restriction and Lockdown Management

Staff and Managers

- **Maintaining connections/** dialogue with clients, carers, families, and staff
- Operational line management **distributes letters**, as required
- Operational line management in residential care areas **support clients to follow lockdown** rules and restrictions

COVID Governance Committee

- Adjust **Ways of Working** including adjusting work from home directions (step up/step down)

Secretariat

- Communicate effectively with all stakeholders ensuring **consistent messaging** across all stakeholders, noting responsibility for distribution pathway may vary according to stakeholder and service
- Monitor external messaging by reviewing and analysing **public health orders and sector intelligence**

P&C

- P&C Communications prepare **Carer Newsletter** and **letters** directly to clients and family/ friends/ carers of those where LWB has whole of life responsibility
- P&C Communications **communicate changes** to clients and families
- P&C Communications maintain **staff communications** by prepare email/family letter/SMS

3.4.4 Outbreak management

Various corporate business units respond to operational needs to support staff directed to COVID impacted locations. In addition:

Staff and Managers

- Managers **case manage** using self-guided form, which updates Salesforce to point of closure
- Line managers prepare **Contact Summary** for Public Health Units
- Monitor currency of house specific COVID **contingency plans**
- Operational Line management **adjust services** across all service types (organisational, house, and individual)
- Operational managers **adjust / manage workforce supply** across affected areas

Secretariat

- **Guide contingency plan creation** for COVID scenario (specific services) as required
- **Interpret** government health orders and determine the **LWB position**.
- **Respond** to Public Health Units and respond to Commission, noting this would transition along with any change in responsibility to initially report

P&C

- Consider whether the **forward pool** of resource meets operational needs via workforce planning
- P&C HSE educate and inform staff and clients about **good hygiene practices**
- Implement and adjust **wellbeing initiatives**
- Oversee **Business Continuity Planning framework** including COVID scenario, as delegate to National Controller, noting roles of various areas of the organisation:
 - Secretariat provide COVID Subject Matter Expertise **support** to framework owner and EDs
 - Client Services / Corporate Services Executive Directors **deliver planning output**
 - Secretariat **engages COVID Governance Group** as required
 - GRPI Risk and Resilience have responsibility for National Business Continuity Planning **coordination, docs tools and templates, calendar** of cyclic review and other supports

CSF Procurement

- Maintain warehouse hubs with supplies of **personal protective equipment (PPE)**

3.4.5 Vaccine Management

Staff and Managers

- Maintain Roster according to client preference on support according to vaccination status

CSF Probity

- Employment check on commencement with LWB and vaccine evidence check. Enter in Salesforce, noting requirement varies per state per sector.

3.4 Adapting to COVID Outbreaks

Where a COVID 19 outbreak warrants a step-up of response and mitigation activity above business-as-usual monitoring, the National Emergency Management Protocol may be activated. Under these circumstances various areas of the business become involved and resources may be drawn from across the business to support the evolving situation. Under stepped-up COVID response situations, responsibilities may be allocated in line with the following examples:

Topic		Function	Responsibility
Controls and Assurance	Governance	Activate/Deactivate NEM	National Emergency Controller
		Boost capacity in secretariat for supporting managers to respond to more regular changing circumstances.	National Emergency Controller
	Intensive Monitoring	COVID Cluster monitoring and alert - actively monitor changing situation daily	COVID Secretariat
	Communication	Prepare communication channels	P&C Communications and Media
		Contact all impacted staff, carers, clients, families, stakeholders	Various local management and P&C Communications and Media
		Participate in exceptional External Forums	COVID Secretariat
	Maintain leave categories	Arrange leave conditions and procedures for application	P&C
	Periodic Review and Reflection	Lessons Learned reviews	GRPI

COVID-19 - EMERGENCY RESPONSE PANDEMIC PLAN

Topic		Function	Responsibility
	Develop Trigger Plan	Assess impact of emergency event against client/ carer/ staff/ property locations	Secretariat
	Clients and Employees vulnerable to COVID impacts	Develop and continuously improve wellbeing and resilience initiatives, including for clients/staff vulnerable to COVID impacts	P&C
Restriction and Lockdown Management	Monitor external messaging	Review and analyse public health orders and sector intelligence	COVID Secretariat
	Guide and Uplift	Managing increased restrictions and ongoing widespread lockdown	COVID Secretariat
	Adjust services	Adjust services according to contingency plans	Operational managers
	Ways of Working	Adjust work from home directions	COVID Governance Committee
		Supply remote working technology, considering capacity and security needs	ICT
		Travel directives	COVID Governance Committee
Vaccine Management	Vaccination Hub	Establish and manage vaccination hubs and processes	Various relevant corporate business units
	Streamline vaccination	Streamline vaccination pathways for clients and staff	COVID Governance Committee

4. Measuring our Success

During establishment of the Pandemic Plan, measurable factors determined whether the plan implementation was successful. Most success factors remain relevant during a business-as-usual COVID scenario. A small number are only applicable under escalated COVID emergency situations and have been marked with * below.

4.1 Success Factors

<p>Monitor Situation</p> <ul style="list-style-type: none"> • Monitor spread of pandemic nationally/globally • Monitor any related issues within LWB • Follow/seek advice from government / health authorities 	<p>People</p> <ul style="list-style-type: none"> • Monitor staff availability • Amend leave/flexible working arrangements • Support clients, carers and employees affected by pandemic • Return to work processes and leave gift arrangements 	<p>Safety</p> <ul style="list-style-type: none"> • Minimise risks to clients, carers and employees • Rapid response to isolated cases or outbreaks • Contact tracing where clients / employees become ill
<p>Technology</p> <ul style="list-style-type: none"> • Enable remote work • Support teleconferencing as an alternative to face to face meetings 	<p>Communications</p> <ul style="list-style-type: none"> • Regular communications with employees / clients / stakeholders via multiple channels • Provide clients with appropriate communications about hygiene 	<p>Service Delivery</p> <ul style="list-style-type: none"> • Maintain critical services • Provide services to clients with infectious disease • Provide services remotely where possible
<p>Scenario Planning</p> <ul style="list-style-type: none"> • Accurately forecast critical impacts • Identify and address major risk factors 	<p>Adaptation</p> <ul style="list-style-type: none"> • Prepare and implement tactical plans • Proactively adapt to emerging circumstances 	<p>Business Continuity</p> <ul style="list-style-type: none"> • Maintain viable services • Limit financial and staffing impacts
<p>Well-Being</p> <ul style="list-style-type: none"> • Proactive outreach • Care packages to staff • Mental health support 	<p>Vaccinations</p> <ul style="list-style-type: none"> • Re-establish vaccination hubs* • Active leadership on vaccination to staff and clients • Monitor vaccination status and workplace impact 	<p>Continuous Improvement</p> <ul style="list-style-type: none"> • Enhance communication channels • Anticipate PPE needs and maintain distribution

4.2 Risk Management

A set of key risk focus areas continue to be under active management with oversight and routine monitoring, including:

- Leadership
- External Environment
- Finance
- Health and Safety
- Scenario Planning
- Service Adaptations
- Technology
- Wellbeing and Morale
- Workforce Supply

4.3 Assurance Measures

Assurance monitoring and reporting, referred to as SITREP (Situation Reporting) is provided by the COVID Secretariat to the COVID Governance Committee to maintain vigilance and awareness of emerging risks, including:

- Cleaning & Hygiene Assurance Tool
- QR Code(s) Sign and health screening questions.
- CRU Communications.
- Profile of staff working across multiple worksites.
- COVID-19 Mandatory Training completion rate.

As the situation changes, reporting needs may vary and will be adjusted as necessary.

4.4 Periodic Review and Reflection

Review and reflection sessions are undertaken with stakeholder groups, to determine what is working well, and what could be adjusted. The output assists future planning and the overall management of risk to support key priorities. The Pandemic Plan recognises the important role of local sites in responding to COVID-19 challenges. The arrangements within this plan ensure that local employees are involved in response activities and provided with the coordination and support necessary to effectively respond to key scenarios.