**Department of Education and Training**

**Emergency Response Plan for Novel Coronavirus (COVID 19)**

Contents

[Background 3](#_bookmark0)

[The COVID-19 Hazard 4](#_bookmark1)

[Pandemic Planning 5](#_bookmark2)

[National Plan 5](#_bookmark3)

[Victorian Plans 5](#_bookmark4)

[DET’S Plans 6](#_bookmark5)

[Business continuity plans 6](#_bookmark6)

[COVID-19](#_bookmark7)

 [emergency response plan 6](#_bookmark7)

[Communication 7](#_bookmark8)

[School Nurses 7](#_bookmark9)

[Appendix A: DET governance 8](#_bookmark10)

[Appendix B: COVID-19 Response Plan Stages 12](#_bookmark11)

[Appendix C: Communication Strategy 22](#_bookmark12)

|  |  |  |  |
| --- | --- | --- | --- |
| Version | Date | Approved | Signed / Date |
| Version 1.0 | 6/3/2020 | Assistant Deputy Secretary. SRS | 10/03/2020 |

Melbourne Mar-20

©State of Victoria (Department of Education and Training) 2016

The copyright in this document is owned by the State of Victoria (Department of Education and Training), or in the case of some materials, by third parties (third party materials). No part may be reproduced by any process except in accordance with the provisions of the Copyright Act 1968, the National Education Access Licence for Schools (NEALS) (see below) or with permission.

An educational institution situated in Australia which is not conducted for profit, or a body responsible for administering such an institution may copy and communicate the materials, other than third party materials, for the educational purposes of the institution.

Authorised by the Department of Education and Training,

# Background

“The novel coronavirus outbreak represents a significant risk to Australia. It has the potential to cause high levels of morbidity and mortality and to disrupt our community socially and economically.”1

Victoria and its world class health system is well prepared for dealing with coronavirus (COVID-19). However all systems will be challenged in the event of a pandemic, so it’s important to plan for all scenarios.

**Purpose**

This Plan guides the Department of Education and Training’s (DET’s) activities to be prepared for, respond and recover from a coronavirus (COVID-19) pandemic, in order to:

* ensure timely and accurate pandemic information is delivered to DET’s workforce and to education settings and their communities
* minimise the risk of exposure to the virus in education workplaces and settings through infection prevention and control measures
* plan for adequate workforce availability and processes to support education sectors’ and DET’s essential functions and services.

DET’s Security and Emergency Management Division, in consultation with DET’s Principal Health Advisor, is responsible for updating and implementing this Plan.

**Scope**

This Plan is relevant to:

* DET’s central offices and regions
* early childhood services funded and/or regulated by DET (herein referred to as ‘early childhood services’)
* all schools
* TAFEs, DET contracted registered training organisations, universities, dual sector universities and Learn Locals (herein referred to as ‘higher education and skills providers’).

This Plan will be distributed to the Catholic education and Independent school sectors via the Catholic Education Commission of Victoria (CECV) and Independent Schools Victoria (ISV). DET will coordinate with the CECV and ISV regarding pandemic/epidemic response and recovery activities.

DET’s Higher Education and Skills Group will disseminate information as appropriate to higher education and skills providers.

1 Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID 19); 7 February 2020

# The Coronavirus (COVID-19) Hazard

Coronaviruses are a large family of viruses that cause illness ranging from the common cold to more severe diseases such as Middle Eastern Respiratory Syndrome (MERS-CoV) and Severe Acute Respiratory Syndrome (SARS-CoV).

This coronavirus (COVID-19) is a new strain that has not been previously identified in humans. Symptoms range from a mild cough to pneumonia. Some people recover easily, others may get very sick very quickly.

There is evidence that it spreads rapidly from person to person. Although measures to reduce exposure such as social distancing, infection control and hygiene practices may be more effective for coronavirus (COVID-19) than influenza, we can expect human-to-human transmission via droplets, direct contact with nasal secretions or contact with objects or materials that carry the virus.

The population health impact of coronavirus (COVID-19) will be determined by:

* how readily it can be transmitted (transmissibility), and
* the seriousness of the illness it causes (clinical severity).

The World Health Organisation (WHO) has declared a Public Health Emergency of International Concern due to an emerging pandemic of coronavirus (COVID-19).

The factors that determine response measures for a pandemic of a respiratory virus of this kind include:

* how spread occurs
* whether a person is infectious prior to onset of symptoms, and
* severity of illness in those infected.

**At-risk groups and those with special considerations**

Older Victorians and people with chronic diseases are known to be at greater risk of coronavirus (COVID-19 infection). Early information suggests milder illness in children, particularly those nine years and under. Pregnant women are also reported to have no higher risk of severe disease than the general population.

As further evidence emerges, it may suggest that other groups (such Aboriginal and Torres Strait Islander communities or those with immunosuppression) may have a higher relative risk.

**Scenarios**

Information provided on the clinical severity will help Victorian organisations estimate an overall level of impact and undertake proportionate response actions. A pandemic period may last three to eight months, and all sectors need to prepare for the possibility of increased levels of workforce absenteeism.

Social distancing measures to reduce normal population mixing may be required to prevent or slow the spread of the virus, including proactive and reactive closures of educational facilities and workplaces, and make working from home necessary to support business continuity.

Annual influenza planning should be integrated with planning for dealing with coronavirus (COVID-19), to ensure a simultaneous surge in demand can be managed. Staff influenza immunisations and other annual measures will be even more important than usual.

To illustrate how clinical factors may require different approaches and levels of resources, three scenarios are described in the *Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)* and are summarised as follows:

**Scenario 1: If clinical severity is low**

* Most cases are likely to experience mild to moderate clinical features.
* People in at-risk groups may experience more severe illness.
* At the peak of the outbreak, primary care and hospital services may become stretched in areas associated with respiratory illness and acute care.
* The level of impact on the community may be like severe seasonal influenza or the 2009 H1N1 pandemic.

**Scenario 2: If clinical severity is moderate**

* People in at-risk groups may experience severe illness.
* The number of people presenting for medical care is likely to be higher than severe seasonal influenza, with primary care and hospital services under severe pressure, particularly in areas associated with respiratory illness and acute care.
* Non-urgent procedures and activities may need to be scaled back.
* Surge staffing and alternate models of clinical care may need to be employed to cope with increased demands for healthcare.
* Pressure on health services will be more intense, healthcare staff may themselves be ill or must care for ill family members, further exacerbating pressures on healthcare providers.

**Scenario 3: If clinical severity is high**

* Widespread severe illness will cause concern and challenge the capacity of the health sector.
* Areas such as primary care, acute care, pharmacies, nurse practitioners and aged care facilities will be stretched to capacity to support essential care requirements. Heavy prioritisation will be essential within hospitals to maintain essential services and mortuary services will be under pressure.
* The community focus will be on maintaining essential services. The level of impact may be like that of the 1918 H1N1 ‘Spanish Flu’.

# Pandemic Planning

**NATIONAL PLAN**

Australia’s plan for managing the pandemic potential of coronavirus (COVID-19) and minimising its impact is outlined in the *Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)*. This plan is designed to guide the Australian health sector response. It is a living document that will be periodically updated as more is learned about the virus, key risk groups and potential treatments.

The Australian Government and state and territory governments will work together to consider surveillance, resource and political information to determine a proportionate response to the level of risk; advise on thresholds for escalation; share information and coordinate access to resources to maximise the effectiveness of the response.

**VICTORIAN PLANS**

Victoria has three plans for its response to coronavirus (COVID-19):

1. Coronavirus (COVID-19 Pandemic Plan for the Victorian Health Sector (Version 1.0, 2 March 2020) which is a guide for preparing and responding to the virus for Victoria’s health sector.
2. Coronavirus COVID-19 State Health Public Information and Communications Plan, which details the public information and communications activities and arrangements for a coronavirus COVID-19 pandemic.
3. Victorian Action Plan for Pandemic Coronavirus Disease 2019 (COVID-19 (Draft 2 March 2020) which sets out Victoria’s approach to identify and reduce the social and economic impacts and consequences of a COVID-19 pandemic on Victorian communities.

This Plan aims to support and align with the above Victorian plans, which confirm state emergency management arrangements for a COVID-19 response, including the key roles of individuals, departments, and other organisations as summarised below.

**Emergency Management Commissioner**

Pandemic coronavirus (COVID-19) is a Class 2 emergency in which the Emergency Management Commissioner has legislated responsibilities. The Emergency Management Commissioner’s responsibilities include response coordination, ensuring effective control arrangements are established, consequence management and recovery coordination.

**Department of Health and Human Services – Control Agency**

DHHS is the control agency for the State’s pandemic coronavirus (COVID-19) response. In this role, DHHS will provide overall direction and ensure that agencies are tasked to support the response as the situation dictates.

**State Controller – Health**

The State Controller has overall responsibility for leading and managing the emergency response operations during a coronavirus (COVID-19) pandemic.

**Victorian Government departments, their sectors and agencies**

Each Victorian Government department (including DET) is required to develop or review plans for pandemic preparedness response and recovery, including business continuity plans, and must develop an Incident Response Plan that outlines actions the department will consider undertaking in response to a coronavirus (COVID-19) pandemic. This Plan acquits DET’s responsibility to meet this requirement.

**Local government, businesses and non-government Organisations**

Local government is the closest level of government to the community and is often the first point of contact for assistance, advice and information. Local governments are required to prepare a pandemic plan for their municipalities.

Businesses and non-government organisations that provide key services or operate critical infrastructure should develop or review pandemic and business continuity plans.

**DET’S PLANS**

## Business continuity plans

DET’s business continuity plans are critical as they include response strategies and contingency arrangements for situations where personnel may be unavailable, such as in the case of a pandemic. For coronavirus (COVID-19), these plans should consider scenarios where personnel may be unavailable or available only if working from home, for several weeks.

The Portfolio Strategy and Planning Division, Policy, Strategy and Performance Group is responsible for coordinating development and maintenance of business continuity plans for critical functions performed by divisions and regions to enable the continued delivery of identified critical services and functions.

Depending on the clinical severity, DET’s business continuity plans will need to be regularly reviewed to prioritise the most essential services and functions.

## Coronavirus (COVID-19) emergency response plan

To achieve the purpose of this plan, in a pandemic DET will:

* engage within the State emergency management arrangements to ensure situational awareness and to assist all sectors to understand impacts on and requirements of the education sector
* implement actions as directed by the State Controller, including containment activities (for example, social distancing in the form of closures of schools or early childhood services)
* utilise a scalable Incident Management Team (IMT) structure to respond( **(Appendix A).**
* consider appropriate departmental actions according to the coronavirus (COVID-19) response stage

**(Appendix B),** which for Victoria are:

* + Initial Containment Stage (which is the current state, where the focus is on reducing exposure)
	+ Targeted Action Stage (for if the pandemic escalates, where the focus will be to slow the spread of the disease, and minimise transmission as the number of cases grow)
	+ Peak Action Stage (for if there is a sustained and severe outbreak)
	+ Stand-down and Recovery Stage (for when there is a transition back to normal).

The resources required and actions suggested to respond will be proportionate to the severity of the event.

## Communication

Clear communication across stakeholder groups and to Victorian communities will help organisations plan for and respond to a coronavirus (COVID-19) pandemic. Effective communication during the various stages of a pandemic is vital to help minimise transmission, provide continuity of government and essential services, and support recovery. This will also help communities understand the risks associated with a coronavirus (COVID-19) pandemic and how they should respond.

Victoria’s whole-of-government communications for coronavirus (COVID-19) are led by DHHS as the control agency. A comprehensive communications strategy for coronavirus (COVID-19) forms an essential accompanying document to this plan. Victorian State Government communications are coordinated through the Emergency Management Joint Public Information Committee (EMJPIC).

The Department of Health and Human Services website https://[www.dhhs.vic.gov.au/coronavirus](http://www.dhhs.vic.gov.au/coronavirus) is to be utilised as the single point of truth for information. The State Controller - Health is responsible for issuing public information and warnings via the VicEmergency platform, where necessary, to help protect the Victorian community. DET communication will be linked to the DHHS website.

Throughout all stages of a pandemic, DET will provide up-to-date and timely pandemic information to its workforce, government schools, early childhood services, the CECV, ISV and Higher Education and Skills providers **(Appendix C).**

## School Nurses

In the event of a (coronavirus) COVID-19 pandemic in Victoria, school nurses employed within the DET School Nursing Program may be required to undertake a public health role in schools and early childhood facilities.

The Principal Health Advisor, Wellbeing, Health and Engagement would be responsible for coordinating the state-wide operational management of the school nurses in consultation with Regional Directors.

# Appendix A: DET governance

DET’s Executive Board will oversight the implementation of DET’s business continuity plans and of the DET’s coronavirus (COVID-19) emergency response plan.

**COVID-19 Response Governance**

DET Executive Board

Business Continuity

IMT

COVID-19 Emergency Taskforce and Incident Management Team

DET

Commander

Regional Commander (s),

and IMT(s)

EMLO\*

Planning

Operations

Logistics

Communic

-ations

\*EMLO is located within the State Control Centre as the DET representative

**Scalable Emergency Taskforce and Incident Management Team**

DET intends to use a scalable Central Taskforce and Incident Management Team (IMT) structure to manage its response to coronavirus (COVID-19). The table below details associated functions to be undertaken by nominated/rostered personnel once a central IMT is activated.

Where IMTs are established in regional locations or local worksites, the broad role functions assumed by regional personnel will be consistent with those described below but will be scaled to the region or worksite’s operations.

|  |  |  |
| --- | --- | --- |
| **Role** | **Function** | **Responsibility** |
| **DET Commander** | * Assumes overall management responsibility
* Initiates Incident Management Team
* Manages the ministerial interface regarding the pandemic (with Communications Division)
* Identifies and liaises with relevant stakeholders
* Ensures that briefings occur at all levels of the incident management structure
 | Assistant Deputy Secretary, Schools and Regional Services (Commander) |

|  |  |  |
| --- | --- | --- |
| **Role** | **Function** | **Responsibility** |
|  | * Considers consequences and mitigation measures, for action, as well as to report to the State Controller
* Approves implementation of an Incident Action Plan
* Determines reporting frequency
* Maintains incident management log/Situation Reports
* Attend State Coordination Team (SCoT) and State Emergency

Management Team (SEMT) meetings |  |
| **Deputy DET Commander/Principal Health Advisor** | * Acts as DET Commander per rostered arrangements.
* Participates on DET’s IMT and the provision of expert health advice, including implications of pandemic on:
	+ children, students and families, and
	+ DET workforce
	+ early childhood services and schools (including closure decisions)
* Liaises with Chief Health Officer, DHHS
* Adapts messaging from Chief Health Officer and authorizes the distribution of communication to schools, early childhood facilities and higher education and skills providers
* Represents DET alongside Security and Emergency Management Division at WoVG forums about pandemic response, where health opinion/advice required, including

SCoT and SEMT meetings | Principal Health Advisor, Wellbeing Health and Engagement Division |
| **DET Regional Commander** | * Activates Regional Incident Management Team
* Maintains incident management log
* Each of the functions of planning, operations, logistics and communication fall under responsibility of the DET Regional Commander, the latter involving feedback to central office about key incidents and developments
* Attend Regional Emergency Management Team (REMT) meeting
 | Regional Director (or delegate) |
| **Communications Officer** | * Develops communications strategy
 | Communications Division, People and |

|  |  |  |
| --- | --- | --- |
| **Role** | **Function** | **Responsibility** |
|  | * In consultation with the DET Commander, develops, disseminates and manages:
	+ internal communication
	+ external communication
* Develops rules on release of information in consultation with the DET Commander
* Represents DET on EMJPIC
* Arranges stakeholder and media briefings
* Monitors media
* Maintains incident management log]
 | Executive Services Group |
| **Planning Officer** | * Collects and analyses information from relevant central government departments and agencies
* Develops forecasts on the impact of the pandemic on DET and its operations
* Determines information requirements and reporting schedules for Incident Management Team
* Develops appropriate reports (situation reports) for internal and external distribution
* Conducts internal and external situation analysis
* Coordinates development of Incident Action Plan and monitoring its implementation
 | Security and Emergency Management Division, Schools and Regional Services Group |
|  | * Maintains incident management log
 |  |
| **Operations Officer** | * Contributes to the development of the Incident Action Plan
* Controls all operations in accordance with the Incident Action Plan
* Initiates recommendations for release of resources
* Manages any pandemic response requirements (e.g. liaison with Area School Nurse Manager, supply of additional staff to regions)
* Liaises with Logistics Officer for required resources
* Obtains briefings/instructions from DET Commander
* Maintains incident management log
 | Wellbeing Health and Engagement Division, Early Childhood Education GroupEarly Learning Division and Quality Assessment and Regulation Division, Early Childhood Education GroupSecurity and Emergency Management Division, School and Regional Services Group |
|  |  | Higher Education and Skills Group |

|  |  |  |
| --- | --- | --- |
| **Role** | **Function** | **Responsibility** |
|  |  | International Education DivisionCECV ISV |
| **Logistics Officer** | * Supports incident management and

has responsibility for:* + facilities e.g. telecommunications, accommodation, etc.
	+ services e.g. information technology support, catering, security, legal, finance, etc.
	+ establishment of emergency call centre (including training and recruitment of telephony staff)
	+ materials e.g. records
* Identifies resources and support required for planned actions and contributes to the logistics component of Incident Action Plan
* Prepares logistics briefings
 | Security andEmergency Management Division, Schools and Regional Services Group. |
|  | * Maintains incident management log
 |  |
| **Emergency Management Liaison Officer (EMLO)** | * Represents DET, including at the State Control Centre, as part of WoVG response and recovery efforts
* Provides agency resources, (within reason) personnel, advice etc.
* Maintain information flow between parties
* Obtains up-to-date information/intelligence
* Fully describes task requests, including support provided as a result of requests from other agencies
* Maintains ‘safe’ approach to tasking and deployment of resources
* Regularly reviews task progress and release of resources
 | Security and Emergency Management Division, Schools and Regional Services Group and/or Regional representatives |
|  | * Maintains incident management log
 |  |

# Appendix B: Coronavirus COVID-19 Response Plan Stages

|  |
| --- |
| **INITIAL CONTAINMENT STAGE** |
| **Victorian Action Plan Priorities** | **Key Actions** |
| Action by the Victorian Government, local government, businesses and non-government organisations in this stage focus on:* Preparation and planning
* Minimising transmission through infection prevention and control
* Providing information and communicating to support best practice
* Empowering the Victorian community to manage their own risk of exposure.
 | **Situational awareness*** Monitor the situation and liaise with Department of Health and Human Services (DHHS) and other agencies as required for situational awareness and collaboration in planning.

**Preparation and Planning***Governance and policy** Stand up DET’s Incident Management Team.
* Support state-wide emergency management arrangements through participation in state governance including State Coordination Team meetings and State Emergency Management Team meetings.
* Develop or review plans for pandemic preparedness, response and recovery, including clear incident management governance protocols.
* Ensure business continuity plans are in place for central office, regions and education settings.
* Understand dependencies and potential impacts to critical functions and essential services.
* Identify essential services provided by DET.
* Develop or review protocols for any suspected or confirmed staff or child or student cases, including protocols for staff absenteeism and managing staff or students/children who are quarantined.

*Minimising transmission** Ensure the provision of necessary hygiene supplies to corporate and educational settings.
* Ensuring educational settings understand and are following exclusion and social distancing advice.
* Cancelling/postponing overseas excursions as per Commonwealth advice (All overseas school excursions were cancelled from 5.3.2020).
* Cooperate with DHHS in outbreak investigation and management in educational settings.
* Consider additional surveillance measures within educational settings, in consultation with CHO.
 |

Where cases in communities are identified, cooperate with any DHHS requests to support case tracing

*Educational continuity*

* + - Providing educational continuity online or work sent home to students who are self-isolating or international students in China

**Communications**

* + - Decision-making for communications
	1. When new critical information, direct send email to all schools ASAP. Approvals required: Director Public Affairs, Chief Health Officer, Assistant Deputy Secretary Schools and Regional Services, Deputy Secretary Schools and Regional Services.
	2. When there is extension of current state (or non-critical updates), website updated ASAP and School Update article. Approvals required: Director Public Affairs, Chief Health Officer, Assistant Deputy Secretary Schools and Regional Services.
	3. When there is change that affects a targeted group (for example international VCE students), Direct Send to them (via IED), website updated, then School Update article. Approvals required: Director Public Affairs, Chief Health Officer. Other EDs as required (e.g. Executive Director, International Education Division).
	4. When no new information, School Update banner (down bottom of the newsletter) pointing people to the web page as the key source of information and resources. At discretion of the Executive Director, Communications Division, or her delegate.
		+ Messages to staff and education settings via DET official channels, utilising approved whole-of government communications messaging in addition to specific organisational messages:
			- Explain status and current health advice
			- Explain importance of personal hygiene procedures
			- Pre-empt questions that schools need answered on implications of the advice, and ensure the advice covers all bases
			- Provide resources to support schools to communicate with their school communities (e.g. newsletter text, template emails)
			- Provide resources in Simplified Chinese and other languages, on the advice of the International Education Division, and/or point schools in the direction of free translation services
			- Encourage staff and students/children to continue attendance at school, work and in education settings, provided they do not fall into a category with restrictions
			- Reinforce that the DET website is the key source of information and resources for managing coronavirus
			- Link to the Department of Foreign Affairs and Trade for travel advice (smartraveller).
		+ Fact sheets and current updates from CHO/DHHS provided to:
			- Feed into DET website content
			- Corporate and regional office settings
			- Educational settings – including for varying audiences – children/students, families, greater educational setting community, surrounding neighbours/ local services
			- Public
			- In a variety of formats, and forms – e.g. language translations for CALD communities
		+ Support information sharing between educational facilities and regions through
			- Regional and Central IMTs
			- Area meetings
			- Any other relevant communication forums
			- Providing all corporate staff with courtesy copies of advice contained in direct send emails to schools (and School Update) as part of new process
		+ Communications to communities about school and early childhood settings exclusion/closure on direction from the CHO
		+ Information about and provision of, mental health supports to affected areas/communities, on the advice of the Wellbeing, Health and Engagement Division. Consider how we can adapt global resources (e.g. [WHO sheet for children](https://www.who.int/docs/default-source/coronaviruse/helping-children-cope-with-stress-print.pdf?sfvrsn=f3a063ff_2)) for our audiences
		+ Consider actions to support reducing stigma associated with Coronavirus (and other discriminatory behaviours including racism), including communicating a clear department position on the issue

|  |
| --- |
| **TARGETED ACTION STAGE** |
| **Victorian Action Plan Priorities** | **Key Actions** |
| Action by the Victorian Government, local government, businesses and non-government organisations in this stage focus on:* Minimising transmission of coronavirus (COVID-19)
* Appropriate management of workforce and essential supplies
* Maintaining services to facilitate business continuity and any proactive social distancing actions.
 | **Situational awareness*** Monitor the situation and liaise with DHHS and other agencies as required for situational awareness and collaboration in planning.

**Preparation and Planning***Governance and policy** Incident Management Team to remain review membership and governance.
* Support state-wide emergency management arrangements through participation in state governance including State Coordination Team meetings and State Emergency Management Team meetings.
* Activate plans, as appropriate, for pandemic and business disruption.
* Prioritise critical functions and essential services, including those required to support modified workforce practices (e.g. work from home) for central office, regions and education settings.
* Implement Incident Management arrangements and protocols for any suspected or confirmed staff or child or student cases or close contacts, including protocols for staff absenteeism and managing staff or students/children who are quarantined.

*Minimising transmission** Cooperate with DHHS in outbreak investigation and management in educational settings and implement additional surveillance measures, as required, within educational settings, in consultation with Victorian Chief Health Officer.
* Where cases in education settings are identified, cooperate with any DHHS requests to support case tracing
* Continue to ensure provision of necessary hygiene supplies across central office, regions and education settings.
* All overseas excursions postponed as per CHO/Commonwealth advice.
* Apply social distancing measures as advised by DHHS.

o Proactive and reactive early childhood services, school, vocational education and university closures (education settings) |

|  |  |
| --- | --- |
|  | * Workplace measures, such as increased working from home
* Ensuring educational settings understand and are following exclusion and social distancing

Advice |
| * Understanding border measures and using known data to reinforce compliance with self-isolation advice

*Educational continuity and wellbeing** Providing educational continuity for local and international students unable to attend schools but not unwell.
* Consider targeted supports for communities who have been most impacted, including mental health and support for grief and bereavement (as required)
 |

|  |
| --- |
| **PEAK ACTION STAGE** |
| **Victorian Action Plan Priorities** | **Key Actions** |
| Action by the Victorian Government, local government, businesses and non-government organisations in this stage focus on:* Managing business continuity and effects across the Victorian community
* Preserving resources to support the health sector to continue care
* Empowering the Victorian community to reduce widespread impacts of the pandemic.
 | **Situational awareness*** Monitor the situation and liaise with DHHS and other agencies as required for situational awareness and collaboration in planning.

**Preparation and Planning***Governance and policy** Incident Management Team remain in place and review membership and governance.
* Implement pandemic and business continuity plans.
* Implement Incident Management arrangements.
* Implement management of workforce capacity and wellbeing, including surge strategies and industrial relations considerations.
* Prioritise critical functions and essential services for central office, regions and education settings.
* Support state-wide emergency management arrangements through participation in state governance including State Coordination Team meetings and State Emergency Management Team meetings.

*Minimising transmission** Continue to apply social distancing measures, if advised by DHHS
	+ Proactive and reactive school, vocational education and university closures
	+ Workplace measures, such as increased working from home
	+ Voluntary isolation of people may have been exposed to coronavirus (COVID-19).
	+ Ensuring educational settings understand and are following exclusion and social distancing advice
* Continue to ensure provision of necessary hygiene supplies across central office, regions and education settings.

*Educational continuity and wellbeing** Providing educational continuity for local and international students unable to attend schools but not unwell.
* Consider targeted supports for communities who have been most impacted, including mental health and support for grief and bereavement (as required)
 |

|  |  |
| --- | --- |
|  | **Communications*** Decision-making for communications:
	1. When new critical information, direct send email to all schools ASAP. Approvals required: Director Public Affairs, Chief Health Officer, Assistant Deputy Secretary Schools and Regional Services, Deputy Secretary Schools and Regional Services.
	2. When there is extension of current state (or non-critical updates), website updated ASAP and School Update article. Approvals required: Director Public Affairs, Chief Health Officer, Assistant Deputy Secretary Schools and Regional Services.
	3. When there is change that affects a targeted group (for example international VCE students), direct send to them (via IED), website updated, then School Update article. Approvals required: Director Public Affairs, Chief Health Officer. Other EDs as required (e.g. Executive Director, International Education Division).
	4. When no new information, School Update banner (down bottom of the newsletter) pointing people to the web page as the key source of information and resources. At discretion of the Executive Director, Communications Division, or her delegate.
* Messages to staff and education settings via DET official channels, utilising approved whole-of government communications messaging in addition to specific organisational messages:
* Explain status and current health advice
* Explain importance of personal hygiene procedures
* Pre-empt questions that schools need answered on implications of the advice, and ensure the advice covers all bases
* Provide resources to support schools to communicate with their school communities (e.g. newsletter text, template emails)
* Provide resources in Simplified Chinese and other languages, on the advice of the International Education Division, and/or point schools in the direction of free translation services
* Encourage staff and students/children to continue attendance at school, work and in education settings, provided they do not fall into a category with restrictions
* Reinforce that the DET website is the key source of information and resources for managing coronavirus
* Link to the Department of Foreign Affairs and Trade for travel advice (smartraveller).
* Fact sheets and current updates from CHO/DHHS provided to:
	+ Feed into DET website content
	+ Corporate and regional office settings
	+ Educational settings – including for varying audiences – children/students, families, greater

educational setting community, surrounding neighbours/ local services |

|  |  |
| --- | --- |
|  | * Public
* In a variety of formats, and forms – e.g. language translations for CALD communities
* Support information sharing between educational facilities and regions through
	+ Regional and Central IMTs
	+ Area meetings
	+ Any other relevant communication forums
	+ Providing all corporate staff with courtesy copies of advice contained in direct send emails to schools (and School Update) as part of new process
* Communications to communities about school and early childhood settings exclusion/closure on direction from the CHO
* Information about and provision of, mental health supports to affected areas/communities, on the advice of the Wellbeing, Health and Engagement Division. Consider how we can adapt global resources (e.g. [WHO sheet for children](https://www.who.int/docs/default-source/coronaviruse/helping-children-cope-with-stress-print.pdf?sfvrsn=f3a063ff_2)) for our audiences
* Consider actions to support reducing stigma associated with Coronavirus (and other discriminatory behaviours including racism), including communicating a clear department position on the issue
 |

|  |
| --- |
| **STANDDOWN** |
| **Victorian Action Plan Priorities** | **Key Actions** |
| Action by the Victorian Government, local government, businesses and non- government organisations in this stage focus on:* Ceasing activities that are no longer needed
* Transitioning back to normal business
* Working with the Victorian community on recovery
* Evaluate and revise pandemic plans.
 | **Recovery*** Implement recovery strategies in pandemic and business continuity plans
* Ascertain appropriate management structure to manage and participate in recovery strategies
* Continue to implement workforce wellbeing strategies
* Support recovery within educational settings and local communities
* Coordinate additional or surge wellbeing supports for educational setting communities to support grief and bereavement as required.
* Targeted support to communities who have been more affected and continue to be at risk.

*Educational continuity and wellbeing** Catch-up activities for students in relation to curriculum
* Revision of term dates and rescheduling of holidays
* Liaising with Commonwealth implications for NAPLAN, other national assessments
* Special consideration for students in senior years
* Rescheduling of overseas excursions to countries on advice from Commonwealth.
* Targeted support to impacted cohorts more likely to experience educational disadvantage
* Transition towards business as usual across the Victorian educational sector
* Reinstatement of recruitment of international students.

*Review Processes** Conduct debrief and review processes
* Participate in statewide WoG debrief and review processes and conduct debrief
* Collaborate as part of national and state networks to implement sector-specific strategies to revise plans
* Monitor feedback from educational settings and review policies, procedures and protocols in line with lessons learned.

**Communications*** Reassurance to community that ongoing vigilance will be maintained
* Work collaboratively with DHHS to ensure health advice is appropriate for educational settings
 |

* Continue to provide information to staff on wellbeing services and recovery process
* Messages to staff via official DET communication channels utilising whole-of government communications messaging in additional to specific DET messages
	+ Explain status of services and recovery arrangements for DET
	+ Continue to communicate the importance of wellbeing services
* Communication to all DET stakeholders of transition to stand-down stage and business as usual arrangements.

# Appendix C: Communication Strategy

## Communication Coordination

In the case of a pandemic coronavirus (COVID-19), DET will work closely with the control agencies and across government via participation in Emergency Management Joint Public Information Committee (EMJPIC) to plan and coordinate a consistent communications response regarding pandemic coronavirus (COVID-19) issues.

**Target Audiences**

This communications strategy primarily focuses on the information needs of DET central office, regions, schools and early childhood services. This strategy also includes communications to the CECV and ISV.

This strategy may be used by the Higher Education and Skills Group to provide appropriate information to higher education and skills providers who are responsible for developing and implementing their own pandemic response plans as independent legal entities.

|  |
| --- |
| **Primary Audience** |
| * DET staff – centrally and regionally based
* School-based staff
* Parents of school-aged children
* Parents of children attending registered early childhood facilities
* School-aged children
 |
| **Secondary Audience** |
| * CECV and ISV
* Staff and students at universities and vocational educational and training providers
* Local Government Authorities
 |
| **DET has direct relationships with the following audiences** |
| * DET staff – centrally and regionally based
* Government school staff
* Parents of children attending government schools
 |
| **DET has indirect relationships with the following audiences** |
| * Staff at non-government schools
* Parents of children attending non-government schools
* Registered early childhood services staff
* Parents of children attending registered early childhood facilities
* Staff and students at universities and vocational educational and training providers
* Local Government Authorities
 |

**Communications Approach**

Information will be provided directly to DET staff, principals of government schools and early childhood directors for forwarding to parents.

Information is shared with CECV, ISV, universities and vocational educational training providers each of which are responsible for developing and implementing their own pandemic response plans as independent legal entities.

**Communications according to response stages**

|  |  |
| --- | --- |
| Response stages | Initial containment, Targeted action, Peak action stages |

**Key communications objectives**

Communications activities during these stages will inform and reinforce the need for the appropriate actions to minimise disease transmission and support the maintenance of essential community services that may include schools and early childhood services.

**Key messages will explain:**

* Thank you for your support and understanding
* What the latest advice means in our settings, (for example: any school and/or early childhood services facility closures)
* What the government is doing
* What services and support are available
* Link to DHHS website for: Facts about the pandemic virus, symptoms and modes of infection,
* Availability and access to anti-viral medication, personal protection, prevention and treatment options, the importance of practicing prevention and containment strategies to slow the spread of the disease, what you need to do if you think you have coronavirus (COVID-19).
* Refer to Department website as key source of information

Specific messages for educational settings will include the above plus provide specific information about the procedures for identifying and managing students/children with pandemic coronavirus (COVID-19.)

**DET website and intranet site**

The DET website and intranet will be updated to inform central office, regions, schools, early childhood organisations and higher education and skills providers about the current situation.

It will link to the DHHS web page, which contains links to:

* NURSE-ON-CALL 1300 606 024 (24 hours, 7 days a week); Maternal and Child Health Line 132 229 (24 hours)
* Doctor, local community health centre or emergency department of nearest hospital
* Victorian Government health Information [http://www.health.vic.gov.au/pandemicCOVID- 19/index.htm](http://www.health.vic.gov.au/pandemicinfluenza/index.htm)
* Commonwealth Department of Health <http://www.flupandemic.gov.au/internet/panflu/publishing.nsf>
* World Health Organisation <http://www.who.int/en/>

**DET newsletters and direct send emails**

Updates will be published via DET newsletters and direct send emails.

|  |  |
| --- | --- |
| Response stage – Stand down | Description – Virus no longer presents a major public health threat |

**Key communications objectives**

Communications activities during the Stand-down stage will support restoration of public confidence and a return to more normal living and working arrangements.

**Key messages will explain:**

* Thank you for support
* Reflection on what this has meant for the Department, and for the state
* The containment of the pandemic
* What it means for us (e.g. all schools are now back open)
* Support and further health and wellbeing information
* What the government and Department are doing to minimise any future disease outbreaks.

**DET website and intranet**

The DET external website and intranet will be updated.

**DET newsletters and direct send emails**

Updates will be published via DET newsletters and direct send emails.