



DHW Response to the Control Agency Lessons Management Review of the COVID-19 Pandemic Response

December 2023



Government
of South Australia

SA Health

Introduction

The State Emergency Management Plan (SEMP) established under the *South Australian Emergency Management Act, 2004* (EM Act) provides South Australia's emergency management arrangements.

The SEMP requires all multi-agency incidents to be subject to a formal Lessons Management Process which includes a Control Agency Review. This process is aimed at supporting continuous improvement, community safety and resilience, and capability development.

The Department for Health and Wellbeing (DHW) is designated in the SEMP as the Control Agency for human disease epidemics and for food and drinking water contamination incidents.

DHW was the Control Agency for the COVID-19 Pandemic in South Australia and is therefore required to undertake a formal review in accordance with the requirements of the SEMP.

Review Scope and Process

BRM Advisory was engaged by DHW to provide independent facilitation of the Control Agency Review and to allow all DHW staff involved in leading the emergency management response to participate. This group was chosen following an open tender process primarily because of its understanding of emergency management in South Australia.

The review focused on the 10 responsibilities of a Control Agency as detailed in the SEMP and follows the Control Agency review requirements of the SEMP. The Observation, Insights, Lessons-Identified and Lessons-Learnt (OILLs) methodology for lessons management was used as this is recognised within the Australian Disaster Resilience Lessons Management guidance and principles.

Data was gathered between March and June 2023 utilising interviews, workshops and an online staff survey.

Review Findings and Recommendations

A detailed report has been provided by BRM Advisory (Review Report) which includes key findings and recommendations for consideration.

DHW has given the Review Report careful consideration and has prepared this response to its findings and recommendations as set out below.

It should be noted the Review Report has a whole has been given close consideration by DHW and is being utilised to ensure the Agency's preparedness and planning capability for future emergencies are informed by the important information it contains.

In summary, DHW has fully accepted six and partially accepted two of the Review findings and has accepted 21 and partially accepted one of the Review's recommendations. These are detailed below in Tables 1 and 2 below with commentary provided. Actions relating to the Review Report recommendations are also provided in Table 2 below.

The Review's finding that DHW performed well overall, fulfilled its core responsibilities as a Control Agency, and sustained a campaign response to a highly complex and long duration emergency is welcomed. It is accepted that there are however many important lessons to be learned from this response which have and continue to inform the continuous improvement processes DHW has in place.

DHW also wishes to acknowledge that the support provided, and partnerships formed across the government and non-government sectors as well as the co-operation of the community and industry were fundamental to the success of the response.

DHW Response

Findings

The Review Report Findings provided on pages 4 and 40 are provided below in Table 1 with the DHW response and explanatory comments. Actions from these findings are provided in Table 2 below in response to more specific Review Report Recommendations.

Table 1 Key Findings DHW Response

	Key Finding	Response	Comments
1	DHW performed well overall, fulfilled its core responsibilities as a Control Agency, and sustained a campaign response to a highly complex and long duration emergency.	Accepted	
2	Factors that contributed to the overall success included clarity of mission, the significant and sustained efforts of a large number of people, assistance from a range of partner organisations, and a commitment by DHW to an evidence-based approach.	Accepted	DHW also notes that communication with partners and the public as well as the willingness of the community to engage was also a significant contributor to success.
3	The Department's achievements in implementing the response are significant, especially in the context of the scale and nature of operations, tight timeframes to deliver and wide-ranging practical constraints.	Accepted	
4	DHW developed a bespoke governance model for the pandemic to reflect the volume and complexity of its work as the Control Agency. Parts of the governance model could have benefited from a stronger incident management approach and more delegation of operational decision making.	Partially accepted	<p>While the rigour of incident management and emergency management systems is accepted as a beneficial operating model in many responses, the unprecedented and protracted nature of the pandemic and the need to quickly evolve and respond to a dynamic situation required agile and adaptive governance and leadership that did not always fit with the traditional incident and emergency management models.</p> <p>While consideration will be given to where delegation of operational decisions could improve efficiency, the significant consequences of decisions being made necessitated high level consideration that could not be delegated.</p>

5	The efficiency and effectiveness of the response could have been improved by a stronger focus on 'whole of response' planning, a more strategic approach to the development and use of electronic systems and applications, and earlier and additional engagement of support from external agencies.	Accepted	
6	Many people across DHW, outside of key roles, had a limited understanding of its emergency management obligations before the pandemic and were unfamiliar with the nature of decision making and operations during an emergency. This impacted the Department's capacity to stand up and sustain the Control Agency response.	Partially Accepted	<p>DHW agrees formal emergency management structures were concentrated in core specialist teams and responsible executives in the Agency, Local Health Networks and other services such as the SA Ambulance Service. While this had an initial impact from an emergency management perspective, public health decision making was not compromised and as the response was scaled up, appropriate expertise was developed and recruited to enable the operation to be sustained.</p> <p>DHW recognises however that the past model needs to evolve so that it can meet the emerging challenges in disaster management such as more frequent and intense incidents due to climate change and cyber security. The model also needs to meet the current health system context and governance arrangements that have changed since the start of the pandemic.</p>
7	DHW was unable to secure the human resources it needed to deliver the Control Agency response, and this impacted the workloads and wellbeing of those involved.	Accepted	While it is accepted that workloads were difficult to manage due to the scale, complexity and extended duration of the response, every effort was made to manage the wellbeing of staff including engaging external specialist support.
8	Leading the Control Agency response had a material negative impact on the business-as-usual activities (BAU) of the Department.	Accepted	It should be BAU most impacted was within the Department itself as staff were redirected to the response. While there was impact on other services, patient care and safety remained paramount.

Review Recommendations

The DHW response to the Review Report recommendations and actions that will be taken are provided below in Table 2. Note there are actions that will address more than one recommendation therefore some actions are cross referenced.

Table 2 – Report Recommendations DHW Response

	Recommendation	Response	Actions
1	Embed the learnings from the pandemic response into DHW's emergency management and public health business practices.	<p>Accepted</p> <p>It is standard practice to utilise routine debriefs and reviews from emergency responses to inform updates and reviews of management plans and practices.</p> <p>This continuous quality improvement process will provide a mechanism for embedding the learnings from the pandemic response and the recommendations and findings of this Review.</p>	Ensure processes used to review relevant plans, policies and practices such as the Disaster Management in the SA Health System Policy and the SA Health Incident Management Framework include consideration of the lessons from the pandemic response and findings of this Review.
2	Develop a mechanism to communicate progress in implementing the findings of this Lessons Management Review.	<p>Accepted</p> <p>Existing governance arrangements such as the DHW SA Health Disaster Resilience Committee will be utilised to action this recommendation.</p>	Report on Review findings implementation through whole of government and DHW governance arrangements.
3	<p>Review the approach to incident management across SA Health in consultation with relevant stakeholders, including consideration of:</p> <p>a. The most appropriate way for incident management concepts and principles to be applied across the complex health operating environment during an emergency response</p> <p>b. The relationship between crisis leadership and maintaining business</p>	<p>Accepted</p> <p>DHW, along with some other states and jurisdictions, managed the COVID-19 response by incorporating elements of the traditional Emergency Management response processes and adapting existing governance arrangements and processes within the health system. This was necessary due to the complexity, speed, expertise and extended duration required for this response as well as the need to maintain critical health service delivery.</p>	<p>In light of the lessons learned from the pandemic response, a review of emergency management systems, policies and plans is underway. The review of the foundational document required as a Control Agency, the <i>Human Diseases Hazard Risk Reduction Control Plan</i> is completed.</p> <p>As per recommendation 1, the findings of this Review will be used to inform this work.</p>

	<p>continuity and business-as-usual service delivery;</p> <p>c. The roles and responsibilities of the</p> <p>i. State Controller</p> <p>ii. Departmental Executive</p> <p>iii. Public Health Division</p> <p>iv. Other SA Health entities; and</p> <p>d. The governance model that the Department will follow to scale an operation in both declared and undeclared emergencies, including the roles of the SCC-Health and Workstreams.</p>		
4	<p>Review the resourcing and reporting lines of DMB to ensure it is set up to fulfill the Department's responsibilities as a Control Agency and the Department's other crisis management obligations, and can effectively meet the expectations of Departmental, SA Health and external stakeholders.</p>	Accepted	<p>Actions already taken to date:</p> <p>The Public Health Division in DHW has responded to this as part of its 2023 Strategic Planning.</p> <p>The SA Health Disaster Resilience Advisory Committee has been re-established to provide a high level whole of health response to emergencies. This group is convened by DMB and provides another mechanism for the Branch to support the health system in emergency management.</p>
5	<p>Determine, establish and then maintain an adequate baseline level of incident management capability within the Department and across SA Health.</p>	Accepted	<p>Consider as part of action in response to recommendations 3</p> <p>Work with other agencies to continue to build capability within SA Health.</p>
6	<p>Sustain relationships with Control Agencies and other organisations with responsibilities in the SEMP as a means of supporting the</p>	Accepted	<p>Continue participation in SEMC and its subcommittees</p>

	mutually beneficial sharing of incident management capability across government.		Contribute to the current review of the <i>Emergency Management Act, 2004</i>
7	Investigate an appropriate electronic incident management system that would provide a common operating picture for the health response to future emergencies.	Accepted DHW has retained the WebEOC electronic system, introduced during the response as an incident management software platform. This system is currently under review.	Complete review of WebEOC electronic incident management system.
8	As part of the review of the Department's approach to incident management, develop an agreed approach to strategic and operational planning in the response to future health emergencies.	Accepted	Consider as part of Actions to recommendations 1 and 3.
9	Ensure risk management decisions and approaches are clearly documented in future incident management.	Accepted As stated in the Review report risk management occurred in the state, national and global context and clarity of mission helped drive a strong focus on managing risks. As the situation was evolving rapidly, risk management approaches needed to quickly adapt. This necessitated agile processes and systems including documentation mechanisms that improved as the response proceeded.	Consider as part of Actions to recommendations 1, 3, and 7.
10	As part of reviewing SA Health's Incident Management approach, consider the most appropriate ways to provide logistics and operations functions to deliver emergency response activities (including any opportunities to leverage capability within other parts of the health system and government).	Accepted	Consider as part of Actions to recommendation 3 and 6 Continue to work with other agencies to facilitate sharing and support during major incidents.
11	Advocate through SEMC for strategic supply chain risks and vulnerabilities to be reviewed	Accepted	Actions already taken to date:

	on a whole-of-government basis as a strategic risk for the State.		This recommendation has been submitted to SEMC together with the findings of this Review.
12	Identify the best mechanism to ensure there is a strong cultural safety lens considered in the delivery of future emergency response activities.	Accepted	<p>Consider best way to embed learnings and commitments to cultural safety as part of action for recommendation 3</p> <p>Actions already taken to date: Since the standing down of the State Control Centre – Health through the establishment of an Aboriginal Public Health Unit. This unit has built on the significant work and relationships built during the response. As part of the Directorate that includes DMB, this Unit provides advice and collaborates in emergency response activities.</p>
13	Advocate through SEMC for DPC to provide a whole-of-government centrally coordinated approach to the procurement and management of electronic systems and applications in emergencies to maximise system interoperability and strategic benefit.	Accepted	<p>Actions already taken to date:</p> <p>This recommendation has been submitted to SEMC together with the findings of this Review.</p>
14	Ensure business support functions, including procurement, contract management, finance and IT support systems are adequately resourced in future emergency responses.	Accepted noting that anticipating resource requirements can be difficult when a response becomes complex and sustained and that whole of government processes may need to be activated as they were during the pandemic.	Ensure there are explicit resourcing considerations including in policy, planning and protocol documents.
15	Advocate through SEMC for a review into the Public Sector Mobilisation with a focus on taking a whole of government approach to resourcing Control Agencies during emergencies, strengthening the level of direction that can be given to agencies, and determining the baseline level of capability	Accepted	<p>Actions already taken to date:</p> <p>This recommendation has been submitted to SEMC together with the findings of this Review.</p>

	needed to support the effective operations of the program.		
16	Review wellbeing and fatigue management guidance within the Department's emergency management and/or human resources policy, along with the most effective way to embed wellbeing support within incident management teams.	Accepted	In the context of the outcomes of actions taken under recommendations 1 and 3, review relevant wellbeing and fatigue management policies.
17	Review the DMB's approach to capability development of staff across the health system having regard to the level of emergency management training and exercising required for staff across the Department.	Accepted noting the response above to recommendation 6 relating to working with other relevant agencies.	Consider as part of response to recommendation 3 and 6 in the context of whole of government collaboration mechanisms. Actions already taken to date: State Commander refresher training has been delivered to current commanders. DHW Deputy Chief Executives have undertaken State Commander training to broaden the pool of senior executives able to fulfil this role.
18	Invest early in stakeholder engagement (liaison) roles in future emergencies, as early engagement with stakeholders tends to result in better outcomes for all involved, and can assist with forward planning in emergencies.	Accepted	Consider as part of response to recommendation 3 noting renewed engagement focus and processes described in response to recommendations 12 and 19. Actions already taken to date: Continue engagement and strong partnerships is recognised as the key to success in an emergency response. To facilitate this the Public Health Division in DHW has continued the engagement forums established through the response with Aged Care, Disability and CALD community sectors.

19	Consider embedding expert advisers into incident management teams with expertise in working with CALD communities and First Nations people.	Accepted The response provided opportunity to engage at a scale that had not been undertaken in previous emergencies. This included expert liaison officers in the State Control Centre which can be translated into other emergency responses.	Consider as part of response to recommendations 3 and 12. Actions already taken to date: A renewed focus on engagement with the community has also occurred since the pandemic that is being retained with the Public Health Division.
20	Use emergency management structures to support systematic and structured engagement of State and Local Government agencies in emergency response.	Accepted	Continue engagement with Local Government to build partnerships and capability as provided for under the PHEMP. Actions already taken to date: The Public Health Emergency Management Plan (PHEMP) which includes the role of Local Government in an emergency has been reviewed and an update published in April 2023.
21	In future emergencies, ensure the difference between departmental communication and emergency public information is well understood, and public information functions have dedicated resourcing separate from business as usual communications.	Accepted	Consider as part of response to recommendation 3
22	Enable the early involvement of public information specialists in any body established to draft Directions to support ease of interpretation and implementation.	Partially Accepted Directions issued as part of the response are required to be written as legal instruments. While it is accepted that production of documents/communication mechanisms are required to support easy of implementation, this must be balanced with the urgency of any situation they seek to address and the legal requirements of the governing legislation.	Consider as part of response to recommendation 3 and documented communications protocols.

For more information

**Department For Health and Wellbeing
Public Health Division
Public Health Planning and Response Branch**

www.sahealth.sa.gov.au



www.ausgoal.gov.au/creative-commons

