

PANDEMIC – SUB-PLAN

2021-2022

Version 2: 1346765

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AUTHORITY TO PLAN

This Pandemic Sub-Plan has been prepared by the Charters Towers Local Disaster Management Group (LDMG) under the provisions of Section 57 of the *Disaster Management Act 2003*.

ENDORSEMENT

The preparation of this Pandemic Sub-Plan has been undertaken in accordance with the *Disaster Management Act 2003* to reduce the risk of an outbreak or spread of a pandemic in the Charters Towers Regional Council local government area.

The plan was endorsed for distribution by the Charters Towers Regional Council's Local Disaster Management Group at a meeting held 8th November 2021:

Cr Graham Lohmann moved, seconded by Senior Sergeant Neil King that the Local Disaster Management Group endorse the following documents:

- a. Local Disaster Management Plan and Appendices
- b. Financial Sub-Plan
- c. Re-Supply Sub-Plan
- d. Public Health Sub-Plan
- e. Public Information and Warnings Sub-Plan
- f. Management of Vulnerable Persons Sub-Plan
- g. Pandemic Sub-Plan

CARRIED



Franklin C. Beveridge

Chair

Local Disaster Management Group



Aaron Johansson

Local Disaster Coordinator

Local Disaster Management Group

The plan is endorsed for distribution by the Charters Towers Regional Council.



Aaron Johansson

Chief Executive Officer

Charters Towers Regional Council



Franklin C. Beveridge

Mayor

Charters Towers Regional Council

General Meeting 17 th November 2021	Executive Summary The Local Disaster Management Plan and Sub-Plans are tabled for Council's Endorsement.	Officers Recommendation That Council endorse the Charters Towers Regional Council Local Disaster Management Plan and Sub Plans. Resolution No. 3797 Cr GJ Lohmann moved, seconded by Cr JD Mathews that Council endorse the Local Disaster Management Plan and Sub-Plans: <ul style="list-style-type: none">• Financial• Pandemic• Public Health• Public Information and Warnings• Management of Vulnerable Persons• Re-Supply CARRIED
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AMENDMENT CONTROL

The **Pandemic Sub-Plan** is a controlled document. The controller of the document is the Charters Towers Local Disaster Coordinator (LDC). Any proposed amendments to this plan should be forwarded in writing to:

Local Disaster Coordinator
Charters Towers Regional Council
P O Box 189
CHARTERS TOWERS QLD 4820

Telephone: 07 47615300
Email: mail@charterstowers.qld.gov.au

The Local Disaster Coordinator may approve minor amendments to this document.

The Local Disaster Coordinator will ensure that any changes to the content of the document will be submitted to the Charters Towers Regional Council's Local Disaster Management Group (CTRCLDMG) for approval and be endorsed by the Charters Towers Regional Council.

During a Pandemic event, additional amendments may be required based on emerging issues.

Approved amendments to the sub-plan will be circulated as per the distribution and contacts lists, which is maintained by the Charters Towers Regional Council on behalf of the LDMG.

AMENDMENT REGISTER

Version No.	Issue Date	Author	Action	Date
1	March 2020	Jennifer Brown – CTRC Andy Pethybridge - QFES	Prepared in response to COVID-19	26/03/2020
2	March 2020		Review	October 2021

1.0 GOVERNANCE

1.1 Overview

This Pandemic Sub-Plan – October 2021 is to be read in conjunction with the [Charters Towers Regional Council Disaster Management Plan](#), [Australian Health Management Plan for Pandemic Influenza 2014 \(AHMPPI\)](#), [Queensland Health Pandemic Influenza Plan, May 2018](#), [Australian Health Sector Emergency Response Plan for Novel Coronavirus \(COVID-19\)](#) and [Queensland Whole-of-Government Pandemic Plan - March 2020](#).

The AHMPPI is a comprehensive and detailed document that describes the high-level decisions and the broad approach the Australian health sector will take to respond to the pandemic. The Queensland Health Pandemic Influenza Plan details the actions State Government will conduct and the roles of the Queensland disaster management system.

This sub-plan does not reiterate the information contained in those two plans or other relevant plans such as the [Queensland State Disaster Management Plan](#) and the [Queensland Health Disaster and Emergency Incident Plan](#).

1.2 Purpose

The Charters Towers Regional Council's Pandemic Sub-Plan – April 2020 provides a framework predominantly for pandemic planning and response by:

- Charters Towers Regional Council's Local Disaster Management Group;
- Charters Towers Regional Council, and
- Charters Towers Regional community including government and non-government agencies and businesses.

1.3 Scope

Queensland Health is the primary agency for a hazard such as pandemic as defined in the [Queensland State Disaster Management Plan](#). Queensland Health are the lead agency for response functions of public health, mental health and medical services, mass casualty management, mass fatality management including victim identification (with QPS) and emergency medical retrieval.

The sub-plan outlines the Charters Towers Regional Council's Local Disaster Management Group's role in providing support to the lead agency, whilst responding with an optimised management strategy for the community.

1.4 Objectives

- Provide situational awareness in support of LDMG, associated agency Business Continuity Plans (BCP) and response activities. Analyse data from authorised agencies to form intelligent well-informed decisions for the community.
- Prioritisation of response relief and recovery for the community.
- Coordinate agencies to deliver efficient and effective services. Provide clear, concise and timely relevant information to the Community, Local Disaster Management Group and associated stakeholders.
- Maintain critical/essential services.
- Provide public information to the Charters Towers Regional community.

1.5 Assumptions

This sub-plan is based on assumptions that:

- The recent history of community outbreaks has shown that prior warning may not be a given and that local outbreaks may precede escalation of health alert levels.
- The initial outbreak will most likely be external to the Charters Towers Regional Council area.
- The Australian Government will announce the escalation of health alert levels.
- The community consequences will be managed in accordance with the Queensland Disaster Management Arrangements.
- The Queensland Government will provide guidance to coordinate activities across jurisdictional boundaries, including but not limited to:
 - Border control.
 - Containment operations.
 - Delay of pandemic.

1.6 Background

An epidemic is a problem that has grown out of control, such as an outbreak of a virus or disease that occurs over a wide geographic area and affects a high proportion of the population.

A pandemic is a virus or disease epidemic that has spread across a geographic area such as an entire country or the world.

A severe pandemic can disrupt a society and its economy. This can overwhelm a Local, District, State or National health system and harm business continuity on a large scale.

As a new virus or disease develops, it can spread rapidly with limited immunity from vaccinations, as they may not yet be developed.

Coronaviruses are a large family of viruses which may cause illness in animals or humans. In humans, several coronaviruses are known to cause respiratory infections ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). The most recent discovery of coronavirus is COVID-19.

COVID-19 was declared as a Pandemic by the World Health Organisation (WHO) on the 11 March 2020. This outbreak began in Wuhan, China in December 2019. Regular updates are available on the [World Health Organisation](#) and [John Hopkins University & Medicine](#) respective websites.

The following information has been taken from the “Queensland Whole-of-Government Pandemic

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PANDEMIC SUB-PLAN – ECM 1346765 – ENDORSED GENERAL MEETING 17TH NOVEMBER 2021 – ECM#1346765

Plan – March 2020”:

Pandemics are epidemics on a global scale. For a disease to have pandemic potential it must meet three criteria:

- Humans have little or no pre-existing immunity to the causative pathogen
- Infection with the pathogen usually leads to disease in humans
- The pathogen has the capacity to spread efficiently from person to person.

Pandemics can be prolonged, continuing for many months or for over a year. The impact of a pandemic is highly variable but can be very widespread, affecting many areas of daily life. Because the human population has little or no immunity to the disease, it can spread rapidly across the globe and may result in high numbers of cases and deaths.

The impact of a pandemic depends on how sick the pathogen makes people (clinical severity), the ability of the pathogen to spread between people (transmissibility), the capacity of the health system, the effectiveness of interventions and the vulnerability of the population.

Human infection occurs through the transfer of a pathogen from an infected person to a susceptible person.

Droplet transmission occurs when contagious droplets produced by the infected host are propelled into the environment through coughing or sneezing.

Airborne transmission refers to the production of droplet nuclei $<5\mu\text{m}$ in diameter, which can stay suspended in the air and be disseminated by air currents. These particles can infect a susceptible host through inhalation. The classic example of a pathogen transmitted by airborne droplet nuclei is the measles virus.

Contact transmission refers to contact with bodily secretions through direct person-to-person contact and indirectly, through contact with contaminated objects such as hands, door handles and toys.

Differences between pandemic and other disasters Some impacts of a pandemic are similar to those experienced in other disaster events, however some are specific to the pandemic environment and may result in circumstances not previously experienced in the community.

In Queensland, disaster impacts are usually significant for localised communities and the individuals and families within those communities. Pandemics are expected to have a quite different impact. The physical infrastructure of our communities is unlikely to be affected, however it is expected that there could be high rates of illness and potentially some deaths, as well as impacts to the economy and trade. The effects would be sustained over a longer period of time and could be felt across the whole state.

Scale of impact A pandemic could impose a major strain on health, emergency services and social and economic functioning generally. When a significant proportion of the population is affected, this can lead to disruption of critical infrastructure or services. Disaster management responses developed to deal with smaller level, localised disasters may require further planning to adapt to the need for large scale response.

Duration of impact. The first wave of a pandemic may last several months, and can be followed by further waves of infection, with less intense periods of infection as more people become immune.

Overall level of community concern and uncertainty. The impacts of a pandemic may be long- lasting and cause widespread disruption, concern and uncertainty for populations.

Pandemic Phases

Queensland Whole-of-Government activities detailed in this plan are structured to reflect the AHMPPI 2014 response stages. Table 1 demonstrates how the stages within the AHMPPI align with the activation phases outlined in the QSDMP and the Queensland Health Disaster and Emergency Incident Plan (QHDISPLAN)

Emergency Management Framework – AHMPPI, QHDISPLAN and QSDMP

AHMPPI Stages	AHMPPI Sub-stages	Characteristics of the disease that inform key activities	Queensland response arrangements
<i>Prevention</i>	<i>Prevention</i>	<i>No novel strain detected or emerging strain under initial investigation</i>	<i>Prevention</i>
<i>Preparedness</i>	<i>Preparedness</i>	<i>No novel strain detected or emerging strain under initial investigation</i>	<i>Preparedness</i>
<i>Response</i>	<i>Standby</i>	<i>Sustained community person-to-person transmission overseas</i>	<i>Alert Lean Forward</i>
	<i>Initial Action</i>	<i>Cases detected in Australia Initial</i>	<i>Stand Up</i>
	<i>Targeted</i>	<i>- When information about the disease is scarce Targeted</i>	
	<i>Action</i>	<i>- When enough is known about the disease to tailor measures to specific needs</i>	
	<i>Stand Down</i>	<i>Virus no longer presents a major public health threat</i>	<i>Stand Down</i>
<i>Recovery</i>	<i>Recovery</i>	<i>Virus no longer presents a major public health threat</i>	<i>Recovery</i>

**Prevention and recovery are not the primary focus of the AHMPPI. It is acknowledged that the consequence management arrangements for recovery may be in play before the move to 'recovery'.*

The following information is an excerpt from Council's Local Disaster Management Plan.

HAZARD:

PANDEMIC – CHARTERS TOWERS REGIONAL COUNCIL'S LOCAL DISASTER MANAGEMENT PLAN

Vulnerability of People:

The population of the Charters Towers Region is no less susceptible to pandemic disease than any other area of Queensland. The spread of disease would be higher in the town areas than the rural properties due to the density of population and the reduced social distancing. Traditionally school children show a higher transmission rate than adults.

Vulnerability of Social Structures:

The impact of widespread disease on the social structure of the region would be dependent on the strain of virus prevalent in the community. This may range from short term illness to widespread deaths from the disease.

At a minimum it is expected that the community would experience hardship from social distancing measure including:

- *absenteeism from workplace due to illness;*
- *requirement to care for ill family;*
- *closure of schools requiring parents to care for children;*
- *reduction in social events, and*
- *care for those quarantined at home unable to access normal facilities*

In the worst case of a disease with a high morbidity rate, the impacts on the social structure would be significantly higher. In addition to the items listed above these would include:

- *significant increase in death rate within the region;*
- *higher admission rates to the health facilities;*
- *losses of key staff;*
- *periods of grieving from family and friends of deceased;*
- *general fear in the community, and*
- *significant reduction in industry due to staff shortages.*

Vulnerability of Lifelines:

The reduction in the available workforce within the region would lead to a reduction in the services available to the community. Whilst the disease would not directly impact on the physical lifelines, reduced staff may lead to maintenance issues and reduced operating capacity of these lifelines. Business continuity planning would necessitate reallocation of staff to maintain these essential lifelines.

Vulnerability of Local Economic Production and Employment:

The effect of pandemic disease on the local economy is dependent upon the virulence and type of virus. In the case of a milder strain of virus, the region could expect:

- *increased absenteeism from normal workplaces through illness;*
 - *parents absent from work due to need to care for children;*
 - *closure of schools, and*
 - *need to reduce non-essential services.*
-

1.7 Plan development and review

This sub-plan was developed by the Charters Towers Regional Council, Charters Towers Regional Council's Local Disaster Management Group, associated stakeholders and authoritative consultants. This is a live plan that can be amended during an event, provision of new information or circumstances.

This plan will be reviewed annually in conjunction with the review of Council's Local Disaster Management Plan and associated Sub-Plans.

1.8 Plan implementation

This document is a sub-plan of the Charters Towers Regional Council's Local Disaster Management Plan (LDMP) and is to be used in conjunction.

The measures that governments may take to reduce the impacts of a pandemic include, but are not limited to:

- border control;
- recommending travel restrictions including, but not limited to, recreational and corporate;
- people adhere to hygiene messaging;
- avoidance of crowded places;
- social distancing;
- home confinement;
- working from home;
- limiting of outdoor gatherings;
- closing/modifying schools and child care centres operations;
- closing of aged care facilities to visitors;
- isolating infected persons;
- quarantining those without symptoms who have had close contact with infected persons;
- closure of non-essential businesses.

These things are likely to cause significant social disruption.

The Charters Towers Regional community is likely to develop innovative methods to support each other while avoiding historical activities that encourage people socialising in close proximity.

It is anticipated that people may choose to be absent from a workplace due to fear of the risk of infection. It is likely many will be unable to participate in work activities because they are caring for children, family and friends.

Community resilience is an important aspect in the event of a pandemic occurring and the LDMP will support this resilience whilst ensuring an appropriate level of functioning continues of essential services to the local government area.

The Local Disaster Management Group will support the lead agency to ensure the prevention, preparation for, response and recovery from the impacts of a Pandemic event in the Charters Towers region.

The Charters Towers Region is well supported by government agencies, non-government agencies, organisations, services, sporting clubs and special interest groups.

Charters Towers Regional Council shares a strong link with the neighbouring local government authorities of:

- Townsville City Council
- Burdekin Shire Council
- Hinchinbrook Shire Council
- Whitsunday Regional Council
- Tablelands Regional Council
- Flinders Shire Council
- Etheridge Shire Council
- Isaac Regional Council
- Barcaldine Regional Council

1.9 Concept of Operations

It is the role of the relevant Hospital and Health Service (HHS) to manage a local response.

Charters Towers Health Service has considered the triggers for escalation locally and Queensland Health has developed a level approach to manage.

- Level 1 – BAU (Business As Usual) Health Services:
 - Capacity to deal with 0 confirmed cases per day.
 - Implementation of fever clinics.
 - Charters Towers Health Service has 20 acute beds and 2 x 2-bed recovery bays in ED. During the COVID-19 period, we had dedicated negative pressure area for intubation and ventilation (short term) and another dedicated room for in-patient care. Note that all unwell patients will be transferred to Townsville University Hospital.
 - Limited external support required.
- Level 2 – Augmented Health Services:
 - Capacity to deal with up to 0 cases per day.
 - Additional fever clinics established with the request for external support.
 - Wards augmented with additional staff and resources and equipment to provide additional beds.
 - Capacity only able to be exceeded with additional resources.
 - Support required from the LDMG
 - Potential for temporary medical facilities.

The LDMG operational levels of activation will synchronise with the Townsville Hospital and Health Service's approach.

In respect to the Charters Towers Health Service, all persons having tested positive to the virus will be followed up by the Townsville Hospital and Health Service. If required, the person will be transported to the Townsville Hospital.

If a person, in the Charters Towers Region, is testing positive to the virus self-isolates in their own home, follow up on the patient is carried out by staff at the Townsville Hospital and Health service.

Periods of Quarantine are from the date of diagnosis.

At the end of the Quarantine period, the person needs to be re-tested and such testing will be carried out by the Townsville Hospital and Health Service.

Phases of Operations:

Phase 1 – Preparation and response to pandemic such as COVID-19 medical emergency

1. This phase is where there are only a limited number of confirmed cases of COVID-19.

Queensland Health can respond at the local level within their capability and capacity limits.

National and State mechanisms are assisting the response through border screening, border control and contingency based measures.

LDMG status: *Alert and Lean Forward*

LDMG focus and actions:

- Provision of support to Tier 1 medical response
- LDMG agency monitoring of the COVID-19 situation
- LDMG individual agency implementation of business continuity planning
- LDMG preparation and planning
- Sharing of key public information messages
- Consideration of multi-hazard interactions that may reduce critical services over multiple events or essential work tasks.

Phase 2 – Initial Pandemic Response

This phase is a rapid increase in the number of confirmed cases of COVID-19 occurring.

In addition to those in hospital care, there are also a large number of individuals that are self-isolating.

Whilst essential services are currently being maintained organisations are experiencing significant absenteeism both through direct virus, disease impacts or fear. Queensland Health is providing a medical response but is at the limits of their capability and capacity and requires significant support to implement the required response activities.

LDMG status: *Lean Forward/Stand Up*

LDMG likely focus and actions:

- Provision of situational awareness from the LDMG
- LDMG individual agency implementation of business continuity plans
- Provision of high level of support to Queensland Health in support of Level 2 medical response including:
 - lock down (geographic spike in cases).
 - provision of specialist personnel in direct support of Queensland Health.
 - provision of emergency supply.
 - implementation of infection control measures in consultation with Queensland Health (cessation of mass gathering events).
 - Support with contact tracing.
 - Isolation and Quarantine arrangements.
 - Border screening.
- Sharing of key public information messages

Phase 3 – High End Pandemic Response

Large scale infection and isolation would occur across the region corresponding with a large number of fatalities.

Non-essential services would cease during this phase and the maintenance of essential services would only occur through deliberate management. The health system is highly likely to be overloaded and there may be a requirement for temporary medical facilities to be established.

Mass gatherings would cease, and the large number of individuals self-isolating would require significant support. The essential support is likely to be working at reduced levels that are not commensurate to the patient demand.

LDMG status: *Stand Up*
LRG status: *Lean Forward*

LDMG likely focus and actions:

- Provision of situational awareness by the LDMG.
- Implementation and maintenance of critical/essential services.
- High end support to Queensland Health above Level 2 medical response.
- Provision of re-supply to those self-isolating.
- Support to fatality management arrangements.
- Full lock down, critical and essential work only.

Phase 4 – Recovery

This phase is the need to assist with recovery to the 'new-normal' and re-establish the process back to Business Continuity Planning. It is anticipated that recovery activities are likely to require long term support. Due to the nature of pandemic impact, some recovery activities may be initiated concurrent to ongoing response strategies. Further detail will be in accordance with the Charters Towers Regional Council's Recovery Sub-Plan.

LDMG status: *Lean Forward*
LRG status: *Stand up*

LDMG and LRG, likely focus and actions:

- LDMG monitoring and provision of situational awareness.
- Activation of the Local Recovery Group.
- Local Recovery Group implementation of recovery operations, business continuity and risk mitigation strategies.
- Local Recovery Group disaster community needs assessment.
- Implementation and monitoring of human and social recovery activities.
- Implementation and monitoring of economic recovery activities.

1.10 Local Levels of Activation for Response Arrangements with the addition of Pandemic

	Triggers	Actions	Communications
Alert	<ul style="list-style-type: none"> Awareness of a hazard that has the potential to affect the local government area <p>Pandemic:</p> <ul style="list-style-type: none"> Suspected case in LGA (unconfirmed) Confirmed case in neighbouring LGA Hospital directed that Health Emergency Operations Centre (HEOC) at Lean Forward or stand up 	<ul style="list-style-type: none"> Hazard & risks identified Information sharing with warning agency LDC contacts QFES Initial advice to all stakeholders 	<ul style="list-style-type: none"> Chair and LDC remotely on mobile
Lean Forward	<ul style="list-style-type: none"> There is a likelihood that threat may affect local government area Threat is quantified but may not yet be imminent Need for public awareness LDMG is now to manage the event <p>Pandemic:</p> <ul style="list-style-type: none"> Confirmation case in LGA, that is likely to require a coordinated response. Need for public awareness. Within hospital capacity, but likely future planning required. 	<ul style="list-style-type: none"> QFES and LDC conduct analysis of predictions Chair and LDC on watching brief Confirm level & potential of threat Check all contact details Commence cost capturing Conduct meeting with available LDMG Council staff prepare for operations Determine trigger point to stand up Prepare LDCC for operations Establish regular communications with warning agency First briefing core members of LDMG LDC advises DDC of lean forward & establishes regular contact Warning orders to response agencies Public information & warning initiated Specialist advisors contacted 	<ul style="list-style-type: none"> Chair, LDC and LDMG members on mobile and monitoring email remotely Ad-hoc reporting

	Triggers	Actions	Communications
Stand Up	<ul style="list-style-type: none"> Threat is imminent Community will be or has been impacted Need for coordination in LDCC Requests for support received by LDMG agencies or to the LDCC The response requires coordination <p>Pandemic:</p> <ul style="list-style-type: none"> Multiple confirmed cases in LGA, hazard imminent. Community will be on has been impacted. Multiple requests for assistance. Significant community disruption and multiple agency involvement. 	<ul style="list-style-type: none"> Meeting of LDMG Core Group LDCC activated Rosters for LDCC planned & implemented Commence operational plans Local government shifts to disaster operations LDMG takes full control SOPs activated Core group of LDMG located in LDCC Commence SITREPs to DDMG Distribute contact details DDMG advised of potential requests for support 	<ul style="list-style-type: none"> LDCC contact through established land lines and generic email addresses Chair, LDC and LDMG members present at LDCC, on established land lines and/or mobiles, monitoring emails

	Triggers	Actions	Communications
Stand Down	<ul style="list-style-type: none"> No requirement for coordinated response Community has returned to normal function Recovery taking place <p>Pandemic: No confirmed or suspected cases in LGA HEOC moved to Stand Down No requirements for a coordinated response. Recovery operations commence if required.</p>	<ul style="list-style-type: none"> Final checks for outstanding requests Implement plan to transition to recovery Debrief of staff in LDCC Debrief with LDMG members Consolidate financial records Hand over to Recovery Coordinator for reporting Return to local government core business Final situation report sent to DDMG 	<ul style="list-style-type: none"> LDMG members not involved in recovery operations resume standard business and after hours contact arrangements

1.11 Consideration for Support

The following may require consideration and be discussed:

- Assessment clinics.
- Staging points or overflow areas or facilities.
- Mass vaccination programs.
- Maintenance of essential services and upkeep.
- Resupply of essential items or products.
- Facility management.
- Reduction or stop to mass gathering activities.
- Temporary mortuary logistics.

1.12 Demographics

Vulnerable (At Risk) populations

Charters Towers Region has an official population of approximately 11,739.

25.1% of the Charters Towers Regional Council's population is 65 years and older.

Aged Care Facilities

Dalrymple Villa Aged Care facility is operated by a private Board.

The Local Disaster Management Group have been advised that staff are adequately trained and understand the practices that need to be put in place for the management of virus and disease outbreaks

Eventide Aged Care Facility is owned and operated by Queensland Health.

Other Vulnerable (At Risk) Persons' Groups include

- Recipients of NDIS.
- Boarding school residents.
- Residents of Charters Towers Rehabilitation Unit.
- Patients at Charters Towers Health Service (Hospital).
- Elderly residents living independently in receipt of Home Care other support packages.
- Residents requiring in home high care medical support (eg Oxygen, dialysis).
- Homeless.
- Tourists.
- Domestic Violence Victims.
- Substance Dependent persons.

Each agency or organisation is responsible for providing management response for clients and staff in the event of a disaster. Should the agency's capacity be exceeded, they should seek assistance from the LDMG to request assistance from the District Disaster Management Group.

1.13 Prevention

Queensland Health encourages all persons residing or working in Charters Towers Region to have the annual influenza vaccination to minimise the risk of a Pandemic.

There are many ways we can all help stop the spread of viruses

- Clean your hands regularly with soap and water or alcohol-based hand rubs.
- Cover your nose and mouth with a tissue or bent elbow when coughing or sneezing.
- Avoid touching your face, nose and mouth.
- Avoid shaking hands or hugging.
- Stay home if you are unwell.
- Practice social distancing, which includes distancing 1.5m away from others.

Communication throughout the community is very important to detail prevention and mitigation measures.

The limit to visitation to elderly or vulnerable/at risk persons is strongly recommended as they are more susceptible to infection and health induced risks.

During pandemics, it may be a requirement that all people entering an Aged Care facility will need to provide evidence that they have had an influenza vaccination.

1.14 Affected Individuals

If Queensland Health confirms a positive case or otherwise advised, such as COVID-19, is in the Charters Towers region, the affected will be required to self-isolate for 14 days or as directed to reduce the risk of community transmission.

The patient will have no contact with friends and family and will need to be in an environment where they have their own toilet, shower and ability to obtain food and water.

Where a person is not ill, however has deemed to experience close contact with a known positive subject they will be required to self-quarantine for 14 days or as directed.

Self-quarantine means staying in your home, motel room or provided accommodation, and not leaving for the period you are required to quarantine. Only people who usually live in the household should be in the home. Do not allow visitors into the home.

The person in self-quarantine will liaise with the Townsville Hospital and Health Service.

1.15 Local Leaders and LDMG personnel

During all disaster events, the community looks to its local leaders to provide assurance, confidence and guidance.

As such, key LDMG members are to strictly adhere to Queensland Health recommendations. Health, hygiene and social distancing protocols must be maintained.

Once community transmissions are evident the use either teleconferencing or other digital communication practices will be required to continue to meet business functions and discuss emerging issues.

2.0 ESSENTIAL SERVICES

Individual agencies and organisations are responsible for enacting their own Business Continuity Plans to ensure service delivery continues for the community.

2.1 Medical and Health Services

Charters Towers Health Facility (acute care facility/service) is located within the central business district of Charters Towers. It is a 20 bed hospital.

The Charters Towers Health Facility has a morgue with the capacity of four (4).

It has a staff consisting of the following:

- One (1) medical superintendent;
- Eight (8) senior medical officers (5.5 FTE);
- One (1) director of nursing/facility manager,
- Thirty six (36) full time equivalent nursing staff.

Charters Towers Health Facility is serviced by QG Air Helicopter and the Royal Flying Doctor provides air transport services as required. An ambulance is required to transport patients from the Health Facility to the Charters Towers Airport to meet the RFDS fixed wing air transport.

There are three (3) General Practice Surgeries within Charters Towers. Considering the COVID-19 pandemic, one practice has cordoned off a number of public parking spaces outside their surgery to enable flu vaccinations to take place while people remain in their vehicles.

There are two (2) pathology services in Charters Towers.

Queensland Ambulance Service (QAS) – Charters Towers Station

Charters Towers Station is located on Gill Street, Charters Towers and is part of the Townsville Local Ambulance Service Network (LASN). The Charters Towers Station provides a 24 hour pre-hospital ambulance service response. QAS services including emergent and/or acute responses, non-emergency responses and Inter-Facility Transfers. Charters Towers Station utilises a fleet of five (5) ambulance vehicles which provides the capacity for a variety of response options including multiple and singular stretcher configurations and 4x4 (off road). QAS has the additional operational support (if required) from the wider Townsville LASN and/or Retrieval Services Queensland (i.e.: QG Air or Royal Flying Doctor Service). Activation of a QAS response is through triple zero (000).

Charters Towers Station has staffing consisting of the following:

- One (1) Officer in Charge; and
- Fifteen (15) full-time equivalent Registered Paramedics

Charters Towers Station has representation on the Charters Towers Regional Council's Local Disaster Management Group, as a core member.

Details of medical services available in townships throughout the region are listed hereunder:

Pentland:

RFDS visits Pentland once per month and the clinic is established at the Pentland Soldiers Memorial Hall.

Greenvale:

- Royal Flying Doctor visits Greenvale each fortnight on a Thursday. The clinic is in the Joint Emergency Services building, RFDS has one part of building.
- QAS/SES/QFES (Rural) shares other part of building.
- QAS has one (1) ambulance vehicle and up to two (2) volunteer first responders located in Greenvale. The first responders are supported by Townsville QAS and/or Retrieval Services Queensland in the allocation of helicopter or fixed wing responses. These first responders have the capacity for the provision of basic life support. Activation of a QAS response is through triple zero (000).

Ravenswood:

- Royal Flying Doctor visits Ravenswood once per month.
- A clinic has been set up in the Ambulance Building in Ravenswood.
- There is a nurse on each shift at the mine.
- Activation of a QAS response is through triple zero (000).
- There is a helipad near the mine site.

There are several Allied Health Workers that drive in and drive out of the Charters Towers Region. In response to a pandemic, drive in and drive out allied health services, may be suspended due to travel restrictions, however some are moving to online services eg, telehealth.

UnitingCare has a Blue Nursing Service located in Charters Towers which provides nursing care to in-house clients.

Charters Towers Health Facility staff, have representation on the Charters Towers Regional Council's Local Disaster Management Group, as a core member.

As a Queensland Health facility, they are taking their lead from Queensland Health to address staffing and resource supply issues for the Charters Towers Health Service. It is noted however, the health service relies heavily on external agency nursing staff and during a Pandemic, access to this specifically skilled workforce may become difficult. As a component of the Charters Towers Health Facility's Business Continuity Plan, any staff or resource issues are escalated to the Townsville Hospital and Health Service (THHS) for action.

In the case of a Pandemic, the risk of an increase of fatalities is higher especially given the number of high-risk complex health issues within the Community. The THHS have agreed to support the Charters Towers Health Facility with a mobile mortuary if required. Procurement, transportation and installation of this asset will be at the cost of Queensland Health.

2.2 Medicine

The Charters Towers Health Facility pharmacy is supplied by the Central Pharmacy (Brisbane) however any issues with continued medicine supply will be escalated through the Townsville Hospital and Health Service in accordance with their internal policy arrangements and BCP. For oversight only, Charters Towers Health Facility will notify the LDMG Local Disaster Coordinator and Chair or as otherwise directed, if they experience any essential medicine supply issues.

All isolated/quarantine persons will liaise with the Townsville Hospital and Health Service, by telephone, of their need for prescription medication.

Some panic buying in mainstream communities may cause temporary shortages of general over-the-counter medicines such as paracetamol, ibuprofen and Ventolin. However, this is not expected to impact the Charters Towers Health Facility pharmacy for long periods of time; therefore, ensuring safe supply for the Charters Towers health service.

There are two chemists located in Charters Towers. Both pharmacies, have business continuity plans in place, and will take guidance from both the Department of Health (Australian Government) and Queensland Health in respect to the social distancing measures.

Chemists may move staff to shifts and split it workspaces and limit the number of customers, into the business at any one time. Staff may be made available to work only with webster pack medications.

Both pharmacies are generally well stocked with Pharmaceutical supplies.

2.3 Food Supply

The Charters Towers community is serviced by both Cornetts IGA and Woolworths as major supermarkets and several smaller grocery stores including items sold from fuel service stations.

Townships and localities throughout the region are serviced by small shops and fuel service stations. Depending on where people reside, within the Charters Towers region, some may travel to larger centres to do a major shop eg. Charters Towers, Townsville, Ingham, Atherton and Ayr.

Cornetts IGA and Woolworths supply a wide range of food items. Both have re-supply mechanisms in place and the Local Disaster Management Group consults with management on a regular basis in respect to stocks.

Both Cornetts IGA and Woolworths have advised of their preparedness for people to order over the telephone and ask for supplies to be placed aside. Cornetts IGA requires payment prior to collection. Woolworths have stated that they are happy to place the items aside and accept payment on collection.

Woolworths, as part of the COVID-19, have introduced a number of social distancing practices and supply restrictions including, but not limited to:

- allowance of a certain number of people into the store at any one time, together with security guards patrolling the areas;
- social distancing in ques;
- installation of Perspex screens separating the customers and checkout operators, and;
- high demand supplies eg. hand sanitiser and long life milk have an allowance of two per customer.

Woolworths do provide a delivery service where people can order items online.

Cornetts IGA have placed supply restrictions on certain products including but not limited to hand sanitiser and toilet paper.

Transportation of goods is considered an essential service and will not be impacted by any travel bans which may be implemented by government.

Should Cornetts IGA and Woolworths have difficulty in obtaining goods from their suppliers due to a nationwide shortage or distribution issue, both have agreed to advise the Charters Towers LDMG Local Disaster Coordinator of the situation and work collaboratively to identify possible solutions.

A Request for Assistance may be considered for escalation through the Townsville District Disaster Management Group if all other options locally have been exhausted.

For people isolating in their own dwelling, family and friends will be required to provide essential supplies such as food and medicines.

Where the patient has no external or family support, Queensland Health will arrange support services for the patient.

2.4 Fuel /Gas

There is not expected to be a shortage of fuel and/or gas for the community unless essential services transportation is ceased. If required this commodity may require strict control measures.

2.5 Public Utilities

Council is currently enhancing their Business Continuity Planning in the event of a Pandemic to mitigate adverse impacts of the emerging virus or disease such as a COVID-19 outbreak and ensuring continuation of critical business and the health and safety of the community. The safety of the staff and community is the main priority.

It is recognised that Council has staff to operate, repair and maintain essential water and sewerage infrastructure.

Charters Towers Regional Council's Business Continuity in respect to the Pandemic, is attached to this document as Appendix One.

Telstra/Optus/NBN/Queensland Energy (Ergon) have Business Continuity Plans in place.

2.6 Existing Environmental Health Arrangements

Charters Towers Regional Council have procedures and standards for the provision of suitable environmental health in the community.

These are to be used to provide Public Health services to the community. The Council will escalate any request for additional resources through the Charters Towers LDMG and Townsville District Disaster Management Group (DDMG) if required.

Council has a [Public Health Sub-Plan - 2019-2020](#), in place and has included this information in its Business Continuity planning.

2.7 Funerals

Charters Towers Funerals is a central point of contact for advice to family members organising funerals.

Charters Towers Funeral home has a mortuary capacity of five (5).

This practice will continue throughout the Pandemic to ensure adequate control measures are applied.

The Charters Towers Ministers' Fraternal, a Core Member of the LDMG, are conducting services in accordance with social distancing requirements and the number of people allowed to gather in any one place.

Charters Towers Funerals has a Business Continuity Plan in place.

2.8 Transportation

Charters Towers has logistic services for supply chain delivery through road, rail and air and passenger transport is available through Bus Queensland and Queensland Rail.

3.0 MASS GATHERINGS

In response to a pandemic, and as a precautionary measure, Charters Towers Regional Council, will, in accordance with the Department of Health and Queensland Health directives, close its non-essential public facilities together with playgrounds and camping grounds.

Businesses and community groups, within the Charters Towers region, together with the Charters Towers Chamber of Commerce and Mines Inc. will be required to follow the Australian and Queensland Government's direction.

Businesses that continue to trade will be required to introduce social distancing measures including but not limited to:

- signage requesting social distancing;
- in respect to cafes, removal of chairs and tables and have moved to providing take away services, and
- markings on floors where people are required to stand when queuing.

In respect to pandemic advice, relating to Mass Gatherings please refer to the [Australian Government, Department of Health](#). These rules are enforceable and carry a significant penalty for non-compliance.

4.0 COMMUNITY INFORMATION AND MESSAGING

The Charters Towers Regional Council's LDMG will continue to provide strong leadership to their community and will focus the messaging on locally relevant information.

The LDMG through its members will continue to support whole of government community messaging, provided by the Queensland Government.

The LDMG has agreed that Charters Towers Regional Council will be the single point of contact for the collation and dissemination of information for the community.

LDMG members are then responsible for onforwarding information on their noticeboards and social media networks.

Only information from the Australian and Queensland Governments should be disseminated throughout the community.

Charters Towers Regional Council will set up a designated web page on their website.

Council's Emergency Dashboard <http://www.getready.ctrc.qld.gov.au/> will also have a pandemic tab to link people directly to the designated web page.

Community information and public messaging is in accordance with Council's [Public Information and Warnings Sub-Plan 2019-2020](#)

5.0 VOLUNTEERS

In response to a pandemic, QFES volunteers, in this case SES, as Core Members of the Local Disaster Management Group, will cease meeting, however will activate as required.

Fire Services (Rural) are currently the same.

6.0 RECOVERY

Recovery process will align with the Queensland Recovery Plan and Council's Recovery Sub-Plan, which at the time of writing this sub-plan, is currently in draft.

7.0 REFERENCE TO STANDARD FOR EMERGENCY MANAGEMENT

Managing Risk

The management of risk is fundamental to making the community safer. Risks need to be identified for both natural and human caused hazards. Entities have a shared responsibility to work together with their community to develop integrated strategies to manage these risks.

1. There is a shared understanding of risks for all relevant hazards.
2. Risk is managed to reduce the impact of disasters on the community.

CHARTERS TOWERS REGIONAL COUNCIL

Scope

All employees of Council have a responsibility to assist in minimising the spread or preventing opportunities for transmission amongst Council staff, volunteers, contractors, their families and the community.

The following details Council's actions and aims to ensure that staff will be protected, and volunteers and contractors will have the knowledge to make decisions and the community can, as far as is possible, be confident that the maintenance of essential services to the Charters Towers Region will continue during a pandemic.

The following information is to be distributed and communicated to all Charters Towers Regional Council employees, contractors and volunteers for action by those persons responsible for its implementation and operation at all levels within the organisation.

Objectives

Act in accordance with:

- advice and information provided by the Lead Agency: Queensland Health and by the National Cabinet and Queensland Department of Premier and Cabinet and;
- advice and information provided by the Department of Prime Minister and Cabinet and Department of Health;
- advice and information provided by the Local Government Association of Queensland Inc. in respect to Industrial Relations, Business Continuity and Guidelines for Employees, and
- advice and information provided by the District Disaster Management Group.

Provide accurate and timely information and guidelines to all Council staff to ensure they are well informed about the situation and have adequate health advice to take measures to protect themselves.

Ensure Council's essential services are maintained.

Consider and act upon the closure of non-essential services as recommended by the relevant authorities.

Minimise transmission to Council staff.

Strategies

The strategies to ensure the objectives are met include:

➤ **Communication:**

- It will be important for the success of the response to ensure that timely information is provided to Council staff. The Business Continuity Planning Committee will meet regularly and the Office of the Chief Executive Officer, in consultation with relevant staff from Corporate and Community Services and Infrastructure Services will provide information for dissemination of any relevant information provided by State Government including the pandemic phase and risk of transmission. Information and updates will be provided through several different media platforms eg. regular emails, intranet, SMS, posters and paper-based information.

➤ **Ensure critical functions are maintained:**

- Business Continuity Plans are to be developed for each section that provide vital information regarding key personnel, skills and core business functions. These plans will assist with maintaining critical functions of Council with reduced staff numbers due to illness within the community.

➤ **Minimise Transmission:**

- Measures will be taken to ensure that transmission of the virus to staff is reduced. A number of strategies will be employed including:
 - remind all staff of food personal hygiene practices;
 - recommend staff participate in annual influenza vaccination programme;
 - recommend staff displaying symptoms to stay away from their location of employment and self-isolate. During the self-isolation period, staff are required to stay in contact with their managers;
 - reducing travel inter/intra state to minimise exposure and cancelling indefinitely in the event that the pandemic reaches critical levels;
 - introduction of social distancing (1 to 1.5M) throughout all Council facilities;
 - stagger morning tea and lunch breaks to reduce the number of people in smoko rooms at any one time;
 - reducing the number of face to face meetings and implement online conferencing via a number of platforms including but not limited to: Zoom, Skype for Business; Microsoft Teams as well as participation in teleconferencing;
 - reducing customer face to face contact by closing all facilities, upon advice from Government authorities;
 - recommending critical staff to work from home as and when required, and
 - distribution of personal protective equipment to reduce transmission (ie. Face masks, tissues, gloves, alcohol wipes, hand sanitiser etc.).

➤ **Protect staff and customers:**

- Staff will be encouraged to remain at home if they suffer symptoms. This will ensure that further spread of the disease does not affect co-workers. If any of their family is also suffering symptoms staff will be given the opportunity to remain at home to take care of their family, in accordance with Employee Guidelines. Staff will be given personal protective equipment should the need arise and changes to customer interfaces may also be triggered to reduce face to face contact with customers. Additional cleaning of work surfaces and public areas will be instigated.

Coordination and Control

Office of the Chief Executive Officer will play a lead role and will work in conjunction with the Directorates of Corporate and Community Services and Infrastructure Services.

Internal and external communications will be provided by the Directorate Corporate and Community Services in conjunction with the Office of the Chief Executive Officer and the Public Information and Warnings Sub-Plan.

A designated web page, on Council's Official website, will be set up by Corporate and Community Services staff.

Council's Emergency Dashboard will be set up with a tab, re-directing the public to the designated web page. Council's Executive Officer of the Local Disaster Management Group will, in accordance with the Public Information and Warnings Sub-Plan, prepare daily information bulletins and key messaging, based on the Whole of Government Key Messaging, provided by the Crisis Communication Network, Queensland Department of Premier and Cabinet. Corporate and Community Services staff or Executive Officer of the Local Disaster Management Group will upload the updates, to the web page, on a daily basis.

Queensland Health is the lead agency for the Pandemic. Council's Local Disaster Management Group will monitor the situation in conjunction with the Townsville District Disaster Management Group and will affect the phases of response as the various triggers for each of the phases are reached that is:

- **Alert**
- **Lean Forward**
- **Stand Up**
- **Stand Down**

The Office of the Chief Executive Officer will have overall responsibility for ensuring Council's essential services are maintained.

This plan has been developed in response to the Novel Corona Virus 19 (COVID-19) however will remain insitu for future pandemics.

Dependent on the serious nature of the pandemic it may affect domestic and international supply chains.

Council's Chief Executive Officer has advised the Directors of Corporate and Community Services and Infrastructure Services of the need to:

- ensure that all staff have access to information being distributed by the Office of the Chief Executive Officer;
- ensure maximum stocks of essential stocks for essential services are procured, that could be affected by global freight restrictions;
- ensure that there is a baseline payroll file available that can be uploaded if payroll staff are affected;
- ensure that there are sufficient laptops available for staff who may need to self-isolate and work from home remotely together with sufficient software licences to enable this to occur;
- test the capacity of the remote terminal server access, and
- ensure that there are enough staff to provide services if educational facilities from kindergarten to secondary schools are closed and staff are required to stay home and care for children.

Recovery Measures:

Council acknowledges that there will be potentially some far reaching impacts resulting from a Pandemic, particularly in relation to small business operations in the Region. Council will be considering what economic relief may be required to assist residents and businesses to return to normal longer term, this consideration is proposed to occur in conjunction with Council's upcoming budget processes

Table: Essential Services and Actions:

Name of Section	Directorate	Essential Service	Priority	Actions Taken
Customer Service	Corporate and Customer Services & Infrastructure Services	General enquiries and services requests	1	Hand Sanitiser located on front reception counters. Regular cleaning of benches. Closure of reception areas including administration and depots
Media	Corporate and Customer Services	Internal communications	1	All of Staff emails and direction to Council's Emergency Dashboard

Name of Section	Directorate	Essential Service	Priority	Actions Taken
Media	Corporate and Customer Services	Media relations	1	Media Releases provided to all media outlets including, television, print and radio
Finance	Corporate and Customer Services	Receipting/Payments	1	Business as Usual Operations
Payroll	Corporate and Customer Services	Payroll delivery	1	Business as Usual Operations
Information Technology Services	Corporate and Customer Services	Information Systems applications	1	Business as Usual Operations
Information Technology Services	Corporate and Customer Services	Voice and Data (Telecommunications)	1	Business as Usual Operations
Maintenance Delivery	Infrastructure Services	Emergency Response	1	Business as Usual Operations
Environmental Services	Infrastructure Services	Provision of health information and advice	1	Business as Usual Operations
Environmental Services/ Waste	Infrastructure Services	Collection and transport of waste	1	Business as Usual Operations
Environmental Services/ Waste	Infrastructure Services	Provision of waste facilities	1	Business as Usual Operations
Environmental Services/ Water & Waste Water	Infrastructure Services	Maintenance of water and waste water network	1	Business as Usual Operations
Water	Infrastructure Services	Operation of water and wastewater network	1	Stocks of Chlorine at maximum level to September 2020 Business as Usual Operations
Workplace, Health and Safety	Office of the CEO	Health and Safety of workers	1	Business as Usual Operations

QUEENSLAND HEALTH

In respect to the COVID-19 pandemic, Charters Towers Health Facility have taken the following actions:

- Locked down the Charters Towers Health Facility with call button/swipe access only as per afterhours access
- Erected signage to advise visitors of how to proceed during lockdown
- Waiting areas have been separated
- Area made available to assess people who meet the symptoms of COVID-19
- Communicating with both medical transportation services provided by road and by air. Considering this Charters Towers Health Facility requested QAS to be made a Core Member of the Charters Towers Regional Council's Local Disaster Management Group

QUEENSLAND POLICE SERVICE

- Core member participation in LDMG and link to operational police tasking
- Maintain sufficient business as usual response to satisfy core duties
- Support external agencies, in particular Queensland Health and CTIRC, with relevant monitoring and enforcement as required
- Enact state response plan to pandemic, including public education and enforcement
- Forward planning and roster amendments for Disaster Management responses
- Develop centralised/coordinated (flexible) rostering capability to cover losses at work units
- Review Business Continuity Plan for immediate enactment, including multiple work hubs to enforce separation of staff
- Re-skill /re-deploy identified additional staff to maintain critical service delivery
- Implementation of risk management responses persons suspected/identified with pandemic symptoms
- Re-directing services and postponing non-essential services
- Establish supply chain for suitable PPE

QUEENSLAND FIRE AND EMERGENCY SERVICES – FIRE & RESCUE – URBAN CREW

- Regular Sit Reps from Fire and Rescue will be made available regarding capacity and response based on recommended restrictions imposed by Health and government Authority

QUEENSLAND FIRE AND EMERGENCY SERVICES – STATE EMERGENCY SERVICES

- Ceased all official training and community activities.
- Local Controller has advised that SES keeping updated via QFES Agency Update.
- Will activate as and when required.

QUEENSLAND FIRE AND EMERGENCY SERVICES – EMERGENCY MANAGEMENT COORDINATOR

- Monitoring pandemic event.
- Providing training online to new members.
- Supporting local authorities as required.

- Maintenance of “business as usual” response;
- PPE stock levels maintained via internal supply chains; and
- The QAS Pandemic Influenza Response Plan may be activated; and
- Townsville Local Ambulance Coordination Centre (LACC) may be activated with Charters Towers Station reporting as required; and
- QAS State Incident Management Room (SIMR) may be activated with Townsville LASN reporting as required;

PROSPECT COMMUNITY SERVICES

- Prospect Community Services’ Business Continuity Reference Group continues to meet weekly
- Closure of front doors to the general public. Clients still have ability to make contact by telephone.
- Engaged a local business to support with the continuity of our Emergency Relief Program. The business is cooking meals which are then frozen. The meals will be given to community members who seek ERF support. Where possible non-perishable food boxes will be provided to person’s requesting these boxes, until such time that they are exhausted. Prospect Community Services have chosen to do business in this manner because of purchase limitations at local supermarkets.
- Emergency Relief Program is still doing intake over the phone and the packages are delivered to the front gate by Family and Youth Support staff. Packages can be left outside the office front doors for pick up as requested.
- Personnel are being moved to new offices where concerns have been raised around social distancing
- The Family and Youth Support Program are continuing to deliver the breakfast program to the community. This is now packaged and available for takeaway.
- The Disability program continues to deliver supports.
- The Domestic and Family Violence program is continuing to do intakes for victims of domestic violence. There is some uncertainty around this due to the closure of the borders.
- The housing program is maintaining contact with tenants.
- The option for Prospect Community Services staff to work from home is being continually monitored and addressed on a needs basis.
- PPE remains to be an issue for the sector.
- Continuing to post on Facebook and reminding the community we are still operating and that ERF is available.
- Closure of Connect building in Gill Street. Staff will continue to operate from there. The only service affected at present, from that Office, is the NDIS funded support’s coordination. To ensure social distancing requirements, some of the staff from Prospect’s main office will move to the Connect building at some sometime in the future.

CHARTERS TOWERS MINISTERS’ FRATERNAL

- All worship services have been suspended in accordance with health directives from the Australian and Queensland Governments and in respect to mass gatherings.
- Ensuring that people are staying connected.
- Working with Dalrymple Villa and Eventide to ensure that contact is maintained.



Pandemic Sub-Plan - April 2021-2022

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