

Factsheet

October 2014

A fundamental assumption of Emergency Management is that response starts at the most immediate level, and scales up as required. It is clear that across the spectrum of Emergency Management – Prevention, Preparation, Response, Recovery (PPRR) - Local Councils, as the tier of Government closest to the community, can contribute in many ways to emergency management.

This project aims to improve the emergency management capability of Local Government for harm minimisation in response to natural hazards.

BACKGROUND

Emergency Management Planning is a multi-faceted process that requires:

- A strong and resilient Council
- An effective Local Emergency Management Committee (LEMC)
- Support from all the relevant combat agencies and functional area authorities
- An informed, engaged, and resilient business community,
- Informed, engaged, and resilient communities that support each other and understand their roles in emergency management.

An engaged and responsive Council will promote both a safer community, in terms of natural hazards (flood, fire, storm, coastal erosion, heat waves), and a more sustainable environment to support their communities.

A key benefit of an holistic approach to emergency management is the economies achievable by working effectively across Council functional areas and taking an integrated approach, including external partners and the combat agencies.

The SCCG is developing the “Health Check”, a tool that allows a Council to review their own performance in Emergency Management and to identify opportunities for improved outcomes, with reporting functions for ease of communication with the Council and the community.

The “Health Check” promotes an holistic approach, allowing councils to:

- enhance engagement with partners and stakeholders
- improve organisational resilience,
- improve the overall planning for emergency management
- facilitate efficient utilisation of resources
- support the engagement of organisations and communities in emergency management planning
- facilitate emergency management activities with the LEMC
- facilitate communication and integration with other Emergency Management functional areas.



THE PROJECT

While Local Government acts as a partner in EM, legislation does not define clearly the tasks required of Local Government.

We have taken the approach of looking at the existing services and functions of Local Government and asking how these roles contribute to emergency management planning. This approach provides an opportunity to strengthen and/or diversify those existing roles so they have ownership and skills within councils to contribute to EM, and to broaden the understanding of, and commitment to, emergency management planning across the organisation.

It is clear that across the spectrum of EM – Prevention, Preparation, Response, Recovery (PPRR) - Local Councils, as the tier of Government closest to the community, can contribute in many ways.

Advisory committee

An Advisory Committee (AC) assisted the SCCG in the scoping and framing of the project, and achieving the Project Goals, outcomes, and deliverables.

Representatives from Member Councils (3), the State Emergency Service, Ministry of Police and

Emergency Services, Rural Fire Service, Local Government NSW, NSW Health Emergency Management Unit, Division of Local Government, Office of Environment and Heritage, University of Sydney, University of Western Sydney, and Department of Planning and Infrastructure participated in the AC.

CONTEXT

The United Nations' *Hyogo Framework for Action 2005-2015* (HFA) spells out five specific Priorities for Action:

1. Making disaster risk reduction a priority
2. Improving risk information and early warning
3. Building a culture of safety and resilience
4. Reducing the risks in key sectors
5. Strengthening preparedness for response

The National Strategy for Disaster Resilience (NSDR), prepared for the Council of Australian Governments (COAG) in 2011, mirrors these priorities in focusing of Prevention and Preparation for EM. The SCCG based the form and contents of the *Health Check* on the NSDR.

The **Seven Priorities of the NSDR** are the key drivers for the *Health Check*.

The Seven Priorities of the National Strategy for Disaster Resilience	
Priority 1	Leading change and coordinating effort Leadership drives improvements in disaster resilience. All partners, within their sphere of influence, are responsible for driving change to maximise the benefits from limited resources.
Priority 2	Understanding risks Consistent approaches to risk assessment and a better understanding of risk can help governments use their limited funds and resources in the most effective way to mitigate natural disaster risk and build resilience.
Priority 3	Communicating with and educating people about risks The Strategy acknowledges that we can affect risks but we cannot eliminate them. Communities and governments need to discuss risks openly in order to anticipate and manage them. Communication of disaster risk information should be clear and authoritative, and relevant and useful to particular situations.
Priority 4	Partnering with those that effect change Developing integrated and collaborative relationships across government, business and the not-for-profit sector is well recognised as an important factor in building disaster resilience. The Strategy explicitly recognises that a disaster resilient community is one that works together to understand and manage the risks that it confronts
Priority 5	Empowering individuals and communities to exercise choice and take responsibility Fundamental to the concept of disaster resilience, is that individuals and communities should be more self-reliant and prepared to take responsibility for the risks they live with. For a resilient nation, all members of the community need to understand their role in minimising the impacts of disasters, and have the relevant knowledge, skills and abilities to take appropriate action
Priority 6	Reducing risks in the built environment Having knowledge and understanding of hazards and risks is of little use unless the information can be translated into relevant controls and mechanisms for dealing with them. Planning approaches that anticipate likely risk factors and the vulnerability of the population can reduce future possible impact of disasters
Priority 7	Supporting capabilities for disaster resilience Building and sustaining capabilities and community resilience requires significant human and physical resources within an ever changing future. This resourcing requires governments and agencies to adopt continuous learning principles, and to monitor outcomes so drive efficient use of resources

All available evidence supports the importance of Prevention and Preparation as the most cost-effective components for emergency management planning and building resilient communities, and the areas where Local Government can have key inputs not only for its own strategic and business planning but also as support for combat agencies preparing for natural hazards.

GOOD PRACTICE PLANNING

Emergency Management (EM) fits into a broader context of strategic adaptation planning. Sound planning is critical to successful EM. Based on a review of the literature, effective adaptation plans should be:

Integrated	<i>Consistent with other plans / policies and integrative of stakeholders' interests</i>
Equitable	<i>Costs and benefits are identified and distributed equitably</i>
Sustainable	<i>Quadruple bottom line considerations (environmental, social, economic, governance) are taken into account</i>
Informed	<i>Diverse knowledge types and sources are included (e.g. scientific, local and indigenous knowledge)</i>
Responsive	<i>Plans are flexible enough to respond to changing circumstances and accommodate uncertainties</i>

THE HEALTH CHECK

Framing the health check

The SCCG framed the Health Check based on the seven Priorities from the Nation Strategy for Disaster Resilience (NSDR) **See opposite**.

The *Health Check*, using this holistic approach, seeks to engage all areas of Council in a “community safety” approach to emergency management.

The traditional “Civil Defence” model has been important and many of those functions remain. The priority for emergency management, at all levels, has often been to Response and Recovery, and we seek to promote Prevention and Preparation within a “shared responsibility” approach. The *Health Check* accommodates the needs of Councils, across varying contexts of size, character and hazards faced. A common process across Local Governments will assist local planning for emergency management, providing the opportunity for collective learning and improved efficiency.

Accordingly, the tool will be applicable to all local councils in NSW and will be freely available to interested agencies. We hope that by using a nationally relevant approach the *Health Check* will be of interest to all local governments in Australia.

Trialling the Health Check

The SCCG engaged 30 city and regional councils from across NSW, of different sizes and environments, in an extensive trial of the *Health Check* to test the usefulness and usability of the contents and format.

The SCCG asked Councils to:

- Engage staff from all relevant functional areas in Council to complete the *Health Check*,
- Record the results and provide the SCCG with copies of the completed *Health Check*, which will be completely confidential in terms of identifying contributing councils
- Complete the evaluation form and provide us with a rigorous evaluation, and suggestions for improvement of the *Health Check*
- Consider other support that might be useful for Local Government staff engaged in all aspects of emergency management planning

User feedback guided the development of the *Health Check* to be more user-friendly with more information and support.

The trial version used KPIs for evaluation but participants reported that this level of detail was unnecessary and tended to limit discussion to particulars rather than addressing the broader strategic planning context and thinking creatively across organisational roles.

The new format:

- Simplifies the evaluations
- Separates the functions of Councils and LEMCs
- Provides a Home Page for each section with a snapshot of results
- Provides a separate evaluation page for each Goal

- Allows easy navigation throughout the document
- Provides standard reporting outputs

We have added the ability to capture current and possible actions to promote a solution-focused approach and for the actions to be included in reports and council delivery programs.

Using the Health Check

The *Health Check* identifies a series of Goals that Councils can use to assess their EM plans against good practice principles. Ideally, users would review the current programs *prior to* developing a plan or strategy so that it can guide the planning process. The *Health Check* can also identify strengths and weaknesses in existing plans.

The rating criteria for this assessment are subjective and designed to stimulate discussions between staff as to the level of performance of Council. Scoring is on a five step scale:

1. little or none
2. below expectations
3. meets expectations
4. above expectations
5. outstanding

The key is obtaining consensus on the relative scores across the seven Priorities, recognising that good practice is a stretch target for most councils now. There are no right or wrong answers, rather a process to consider current commitments and to identify areas of opportunity for improvement and to develop options and priorities for action.

If staff are unsure about how to rate Council's performance, the 'Prompts' in the *Health Check* stimulate discussion, and suggest possible actions for improved outcomes. Remember that there are no right or wrong answers and the consensus of staff is adequate. A key part of the *Health Check* evaluation is a discussion across all

stakeholders to develop a shared understanding of EM and appreciate the ways all areas of council can contribute to improved outcomes for council and the community.

A shortfall, identified through the process of completing the *Health Check*, may undermine the success of Council's plans at the point of implementation. Consider how Council might revise their programs and/or plans to address any shortfalls and add to the possible/proposed action table.

Evaluation

The *Health Check* separates the roles of councils and the LEMCs into separate sections. Each section has a separate Home Page with the associated Goals.

This separation allows a complementary evaluation of the two roles without overlap of Goals or any presumption that council will review the LEMC. Having the two sections allows councils and LEMCs to work together to clarify roles and develop integrated approaches to emergency management planning in their area.

The Health Check is not an audit of the council by the SCCG. Nor is it an audit of the LEMC and the combat agencies by councils. It is a tool to provide a framework and platform for internal review and progress towards improved emergency management planning.

In developing the *Health Check* we wanted a process that would promote resilience and a path towards an integrated "community safety" approach for local government. We saw that the potential to integrate emergency management more explicitly into the **Integrated Planning and Reporting Framework** would promote a community discussion of priorities and identify clear commitments for inclusion in Delivery Programs and Financial plans. Capturing and evaluating current and possible actions means that identifying gaps is then an opportunity for engagement and progress.

For more information contact:
 Sydney Coastal Councils Group
 02 9246 7791
info@sydneycoastalcouncils.com.au

Funded under the joint State and Commonwealth Natural Disaster Resilience Program 2012-2013

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