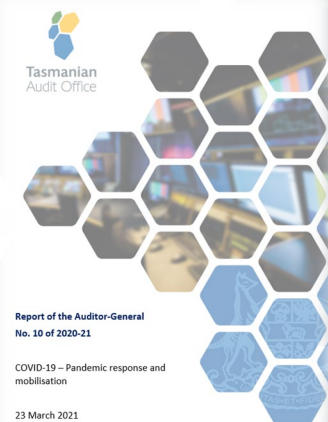# COVID-19: Pandemic response and mobilisation

Report of the Auditor-General
No.10 of 2020-21

Welcome and introductions

Review objective

The objective of the review was to express a limited assurance conclusion on whether the Government's management of the response to COVID-19 and mobilisation of resources was effective.

Lead agencies reviewed:

- Health

- Police, Fire and Emergency Management

- Premier and Cabinet.

Scope

The review looked at how the lead agencies worked together to establish governance arrangements, deploy human resources, and maintain effective lines of communication, supported by information management. It was confined to management at a state-wide level.

Timeline: February to May 2020.

Timeline of key events
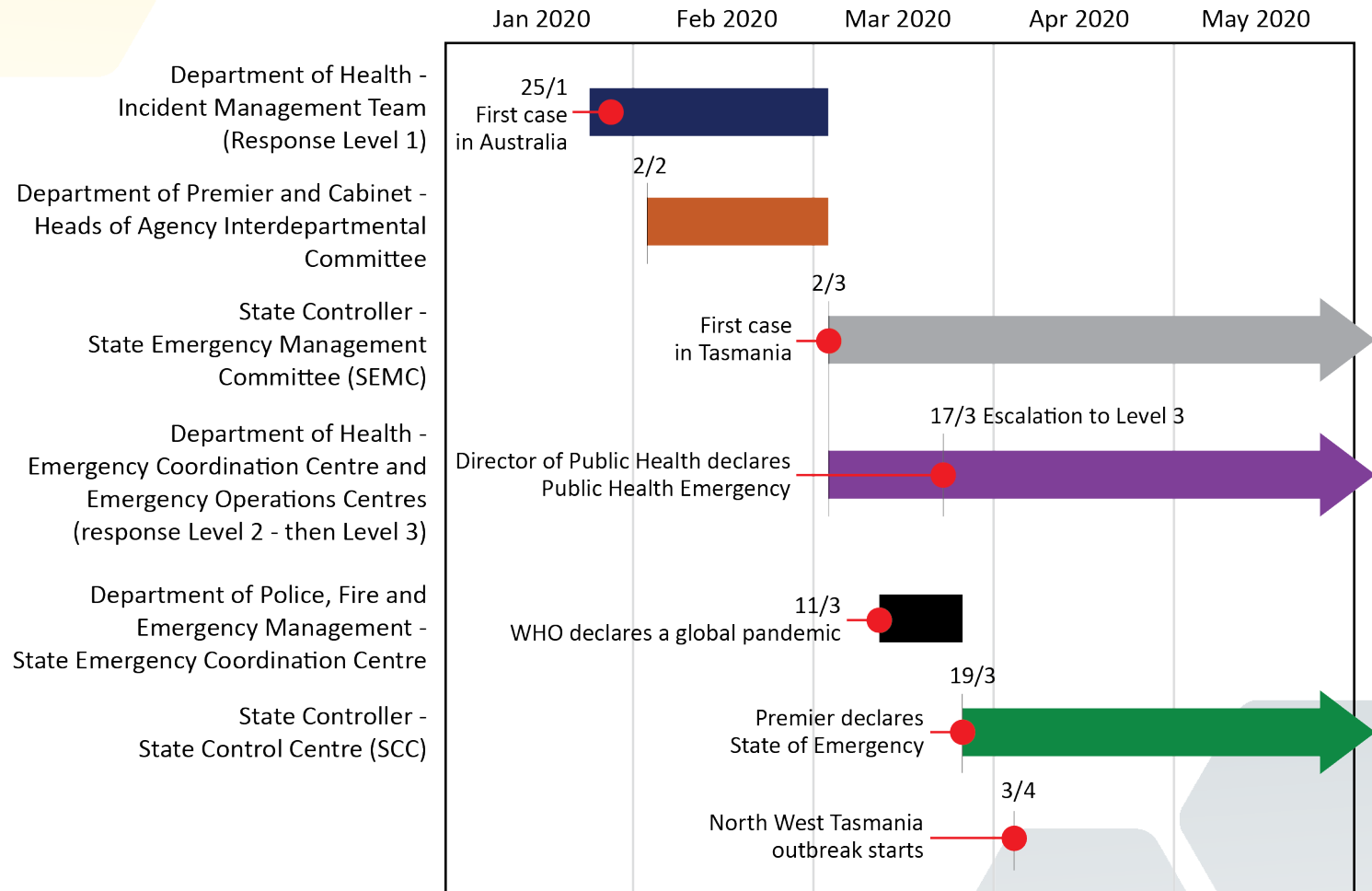
Scope exclusions

- Testing facilities

- Contact tracing

- Regional management of the emergency response, including the outbreak in North West Tasmania

- Management of Personal Protective Equipment

- Quarantine and border activities.

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Review criteria

1. Were the governance arrangements activated during the emergence of COVID-19 effective?

2. Were human resources deployed to manage and support the pandemic response sufficient and effective?

3. Was communication and information management to support the pandemic response effective?

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Conclusion

Based on the procedures I have performed and the evidence I have obtained, nothing has come to my attention that causes me to believe that, in all material respects, the Government's management of the response to COVID-19 and mobilisation of resources was not effective, as evaluated against the review criteria.

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Findings

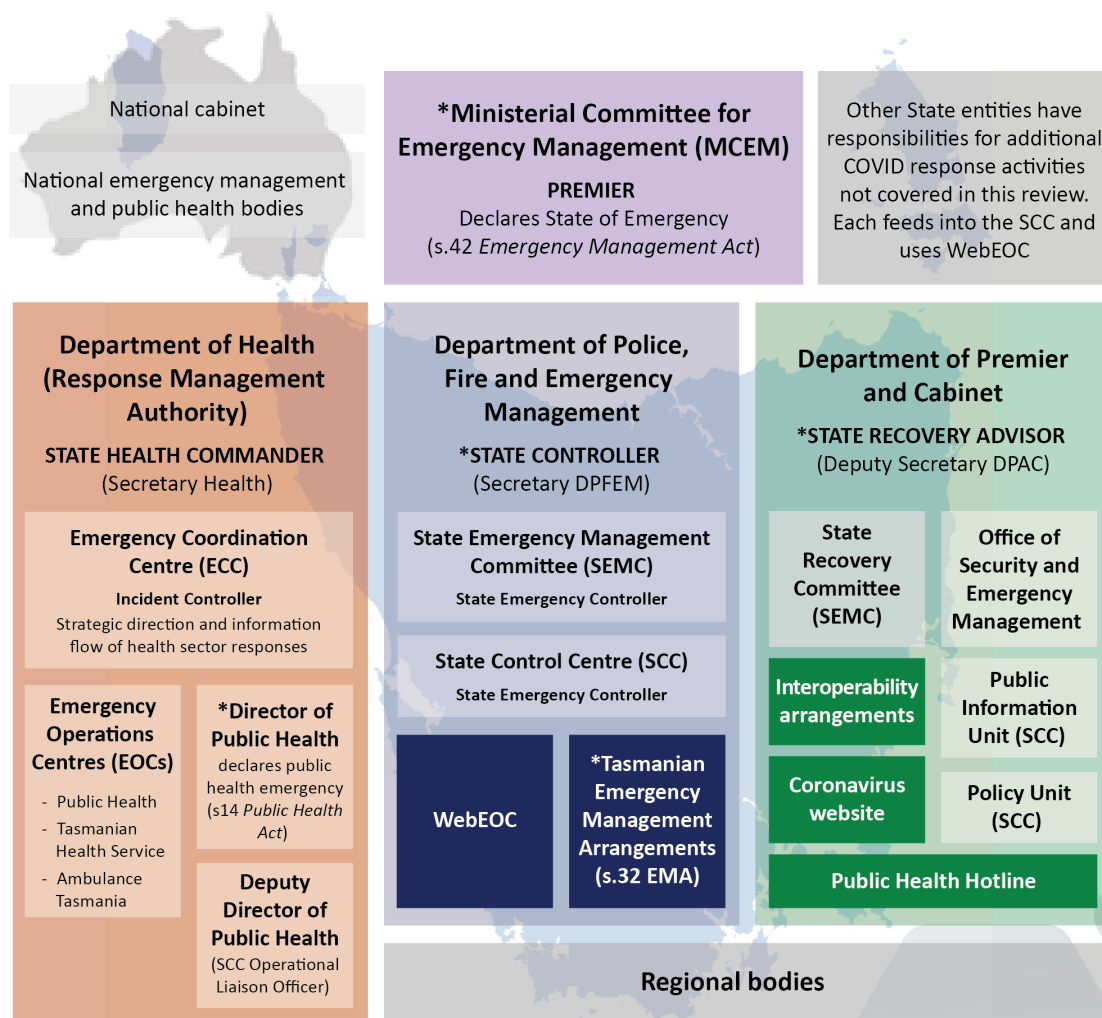# Governance arrangements activated during the emergence of COVID-19

- Governance arrangements enacted were effective with appropriate legislative authority and plans, structures, roles and responsibilities articulated.

- While not all existing plans were initially fit-for-purpose for a pandemic of this kind, these shortcomings were quickly identified and mitigated declarations were made.

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Governance arrangements activated during the emergence of COVID-19

- Structures were multifaceted, with parallel response functions operating at both the whole-of-state emergency and health responses.

- There were complex interrelationships.

- However, these structures were appropriate for the circumstances at the time, given the planning that had been done.

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Governance arrangements activated during the emergence of COVID-19

National cabinet

National emergency management and public health bodies

*Ministerial Committee for Emergency Management (MCEM)

PREMIER
Declares State of Emergency
(s.42 *Emergency Management Act*)

Other State entities have responsibilities for additional COVID response activities not covered in this review. Each feeds into the SCC and uses WebEOC

Department of Health (Response Management Authority)

STATE HEALTH COMMANDER
(Secretary Health)

Emergency Coordination Centre (ECC)
Incident Controller
Strategic direction and information flow of health sector responses

Emergency Operations Centres (EOCs)
- Public Health
- Tasmanian Health Service
- Ambulance Tasmania

*Director of Public Health
declares public health emergency (s14 *Public Health Act*)

Deputy Director of Public Health
(SCC Operational Liaison Officer)

Department of Police, Fire and Emergency Management

*STATE CONTROLLER
(Secretary DPFEM)

State Emergency Management Committee (SEMC)
State Emergency Controller

State Control Centre (SCC)
State Emergency Controller

WebEOC

*Tasmanian Emergency Management Arrangements (s.32 EMA)

Department of Premier and Cabinet

*STATE RECOVERY ADVISOR
(Deputy Secretary DPAC)

State Recovery Committee (SEMC)

Office of Security and Emergency Management

Interoperability arrangements

Public Information Unit (SCC)

Coronavirus website

Policy Unit (SCC)

Public Health Hotline

Regional bodies

* Referenced in legislation

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Governance arrangements activated during the emergence of COVID-19

- Due to the scale, changing nature and escalation of the pandemic, there were limitations with the breadth of capability and capacity for PHS to respond fully to all the demands that were placed on them. This issue was recognised early by DoH with PHS's role more targeted towards strategic public health advice and contact tracing.

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Human resources deployed to manage and support the pandemic response

- Overall, the deployment of staff to support the pandemic response was sufficient and effective.

- Procedures and guidance were in place to support emergency response deployment, which was undertaken quickly using people with appropriate knowledge and skills.

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Human resources deployed to manage and support the pandemic response

- Capacity for staff to focus on the response was largely provided through the backfilling of their substantive roles.

- Staff generally had the skills to undertake their roles, although role orientation could have been stronger for those State Control Centre staff with no prior emergency management experience.

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Human resources deployed to manage and support the pandemic response

- Health and wellbeing services were available, although some staff felt they could have been more targeted and tailored to the circumstances.

- Dependencies on key personnel resulted in fatigue and limited respite for some staff. Despite these matters, adequate human resources were made available to support the response.

- Staff said they were driven and bolstered by a strong sense of common purpose, comradery and mutual support.

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Communication and information management to support the pandemic response

- Communication and information management to support the pandemic response at the strategic level became more effective over time as adjustments were made to processes and capacity to provide information.

Tasmanian Government — Coronavirus disease (COVID-19)

Tasmanian Public Health Hotline: 1800 671 738

Communication and information management to support the pandemic response

- Lead agencies, through the Public Information Unit in the State Control Centre, coordinated whole-of-government information which was exchanged, monitored and updated as the response unfolded. This was aided by the deployment of the Deputy Director of Public Health to the State Control Centre.

- Combined, this broadly led to both communication into government and out to stakeholders and the broader community to be centrally coordinated with consistent messaging, based on public health advice.

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Responses

Responses

- Responses were received from the:
  - Premier and Treasurer
  - Minister for Health
  - Secretaries of Health, Premier & Cabinet and Police, Fire & Emergency Management.

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