



Collaborative Action: Addressing the needs of people at risk
from climate change, emergencies and disasters project
2022-2024

Mid-term Review Report
May 2023



This project was funded under the Disaster Risk Reduction Grants Program by the Australian Government and South Australian Government.
Views and findings associated with this initiative/project are expressed independently and do not necessarily represent the views of State and Commonwealth funding bodies.



Contents

Contents.....	ii
1. Introduction.....	1
2. Scope of the review	2
3. Project outputs and outcomes	2
4. Review of previous People at Risk in Emergencies Action Group	3
5. Project Planning.....	3
6. Project Implementation.....	10
7. Engagement and Collaboration.....	15
8. Measures against the Framework.....	17
9. Monitoring and Evaluation Outcomes	18
10. Conclusion.....	22
Appendix 1.....	23
Appendix 2.....	26

1. Introduction

The Collaborative Action: Addressing the needs of people at risk from climate change, emergencies and disasters (PaRE) project is a 2year project funded under the Disaster Risk Reduction Grants Program by the Australian Government and the South Australian Government. from May 2022 to April 2024.

The project is a collaboration between Australian Red Cross and South Australian Council of Social Service (SACOSS). SACOSS is funded for 0.6FTE and Red Cross 0.4FTE.

The ultimate purpose of this project is to improve outcomes for people more at risk as a result of an emergency event/disaster, noting they are significantly over-represented in emergency impact data, and often have a more challenging disaster recovery journey.

The project was designed to take an 'all hazards' approach to considering and addressing disaster and other significant emergency related risk through working collaboratively to reinvigorate action on the [People at Risk in Emergencies Framework](#) (the Framework) for SA and development of the 2nd Implementation Plan (IP2).

The key phases of the project include:

Review and planning

- Review of the past People at Risk in Emergencies (PaRE) Framework Action Plan and outcomes
- Review of the PaRE Action Team engagement structure
- Planning the revised engagement structure
- Developing a new Action Plan

Implementation

- The new engagement structure meets regularly, with executive support provided by Red Cross and SACOSS
- Action Group members undertake agreed activities as per the Action Plan.
- SACOSS and Red Cross provide facilitation, support, policy advice, further stakeholder engagement and advocacy across the health and community service and emergency management sectors.
- Minimum six-monthly reporting to SEMC (via sub-committee) through the Resilience, Recovery and Engagement Sub-Committee.

Evaluation

- A mid-project review and final evaluation will report against an agreed evaluation framework and be made publicly available.

2. Scope of the review

This review will address:

- The key phases of the project
- Achievement of project outcomes and outputs
- Breadth and depth of collaboration
- Adherence to the People at Risk in Emergencies Framework for South Australia.

3. Project outputs and outcomes

Project outcomes include:

- Increased involvement of stakeholders relevant to population groups that may be at increased risk in emergencies in implementation of the Framework (i.e. Department of Human Services, Dept of Health (aged care), NDIA and organisations supporting people living with chronic health conditions, including Aboriginal people through possible involvement in the Action Team and implementing strategies or policies in their respective sectors.
- Increased collaboration and coordination around implementation of recommendations coming out of key documents or frameworks relating to promoting the safety of people who may be more at risk from climate events and disasters. E.g. Person Centred Emergency Planning and implementation of disability royal commission – National disability strategy.

Project outputs include:

- A sustainable, systematic, and coordinated approach to enhancing the safety of people who may be at increased risk due to the impacts of climate change, emergencies or disasters.
- Review of existing People at Risk Action Group and associated implementation plan (2018-2020), recommendations and operational guidelines for successful action
- New PaRE Implementation Plan
- Communication Plan review (2-3 sessions independently facilitated) report, and recommendations.
- New Action Group/ engagement structure is established, and meets according to reviewed Terms of Reference
- Actions from the updated Implementation Plan are implemented
- Engagement Plan developed for the development of a new People at Risk Framework for 2023-28.
- Formalised connections with RRE sub committee

4. Review of previous People at Risk in Emergencies Action Group

The first phase of the project was the review process including all previous members of the Action Group (reviewing both work and ways of working to date).

The review process was undertaken by Red Cross, facilitated by staff members not involved in the previous project, or the project going forward.

The review focused on the First Implementation Plan and work of the People at Risk in Emergencies Action Group (Action Group) to November 2019, including membership and ways of working, to identify recommendations for an updated Implementation Plan and governance structure. The methodology for the review involved individual interviews with members of the previous People at Risk in Emergencies Action Group. All previous members were invited to participate, with five interviews undertaken in total.

Many of the members of the Action Group had moved on to different roles and were unable to contribute to the review. Input from those who were able to participate led to the formulation of the following recommendations:

1. The collective voice of the action group could be better harnessed to influence resourcing for initiatives aligned to the priorities, as well as policy, training and accreditation, systems level influence, communication systems, and defining standards across government and relevant sectors.
2. Build on actions from the original Action Group's work between Emergency Management and community and health sectors, including making training available to stakeholders.
3. Improve the clarity and definition of roles and responsibilities of the group's members, particularly as they relate to responsibility for the Implementation Plan's actions.
4. Break down broader tasks into sub-parts and scale down the scope to ensure they are clearly defined and manageable.
5. Ensure actions tasked to the group and to individual members are appropriately aligned to their role and level of influence in the organisation they represent and to maximise benefit from the actions.

5. Project Planning

5.1 Governance

The project team were required to have a project reference group, with endorsed terms of reference. (appendix 1). The reference group has met to provide strategic advice and feedback at key decision making stages in the project:

- July 2022- endorse the project plan and terms of reference for the group
- August 2022 – endorse a change to the consultation strategy (brief online meeting only)
- September 2022 – provide feedback on the draft engagement structure and draft IP2
- March 2023 – provide advice and feedback on the monitoring and evaluation strategy and a minor project variation. We also discussed an event proposal that was beyond the requirements of the project.
- May 2023 – provide feedback on the draft mid-project review

Meetings are held in-person and online to provide best accessibility and efficiency.

There has been a clear delineation between the role of the reference group to guide the project, and the People at Risk in Emergencies Policy and Strategy Group to guide and deliver on the IP2.

The flexibility of meeting as required, including the option of having brief online check in meetings such as we did in August, has ensured meetings are purposeful and enabled the reference group to be an effective mechanism to provide guidance for the project.

5.2 Consultation

The initial plan for the consultation process that was to inform the development of the new engagement structure and the IP2 through:

- Undertaking a planning process with previous Action Group members to identify key stakeholders and the most effective way to engage them (Action Group plus any other strategies or structures).
- Undertaking a planning process with the revised Action Group (and other stakeholders as appropriate) to identify key priority actions for inclusion in the revised Implementation Plan.

Once the review process was underway, we realised that this approach was flawed for a number of reasons:

- There were few members of the Action Group still available to participate in the process.
- The ‘revised Action Group’, was not formed, and could only be formed on the basis of the opinions of project staff without some other process to inform decisions.

A proposal was put to the project reference group to hold two forums, with one being in-person and the other being online. The forums would be promoted widely, with invitations going to stakeholders across the health and community services sector (government agencies, regulators, statutory bodies, peak bodies and service providers) and the emergency management sector. If we did not get representation of populations considered to be at elevated risk, we could follow up with targeted meetings. This proposal was endorsed and provided an effective platform to inform our work.

A total of 18 people participated in the in-person forum, with an additional 17 people participating through the online forum. The list of organisations represented among attendees is provided in Appendix 1.

Although there was broad representation across emergency management and health and community service organisations at the forums, there were some priority groups that were not adequately represented. These include:

- Homeless
- Aboriginal
- CALD
- Family and domestic violence
- Older people and aged care
- University sector

Efforts were taken to arrange individual meetings with organisations working with these groups to increase engagement and input into identifying priorities for the implementation plan. Their feedback was incorporated into our decision making processes.

5.2.1 Outcomes and reflections on consultation about the engagement structure

The recommendation emerging from the consultation regarding the engagement structure was to have a 2 level structure:

- Level 1: Engagement including senior representatives from multiple sectors to identify and resolve high-level, systemic, state-wide issues
- Level 2: Engagement which is action oriented and includes senior representation multiple sectors to identify and resolve sector-wide, regional and population level issues

On reflection by project staff and the project reference group on the scope and capacity of the project, a decision was taken to have a 2 level engagement structure, but to have level 1 address policy and strategy, and level 2 address actions through working groups.

The Policy and Strategy Group was formed, and had its first meeting in November 2022. The Terms of Reference, including the membership forms Appendix 2.

5.2.2 Outcomes and reflections on consultation on the development of the Second Implementation Plan

Through the forums and meetings, participants were asked:

- a) What are the risks we should be most concerned about?
- b) Who or where are the people we should be most concerned about?
- c) How can these issues best be addressed?

The following issues were raised:

- Social isolation and mental health issues
- Negative impacts on children and young people
- Homelessness/Insecure, inadequate and inappropriate housing
- Accessibility issues in emergency preparedness, response and recovery
- Inconsistency in local government responses to emergencies

- Information and Communications
- Essential Services
- Health risks

Six key themes were identified through forum participant ideas about how these risks could be best addressed:

1. Increase preparedness of particular at risk communities
2. Improve housing, and residential planning and building regulations
3. Increase children and young people's emergency preparedness
4. Consolidate the role of local government in Prevention, Preparedness, Response & Recovery (PPRR)
5. Improve reliability and accessibility of essential services
6. More accessible and appropriate media, communications and emergency information

These issues and themes were discussed, amended and prioritised by the Policy and Strategy Group to form IP2 (Appendix 3).

The project team were aware that the IP2 would reflect the stakeholders engaged in its development. The project is limited by the staffing hours available so while we actively sought out stakeholders from some parts of our sector that did not participate in the forums (such as the sectors supporting Aboriginal people, CALD communities and people experiencing homelessness), we also recognised that we did not have the capacity to engage with all the potential stakeholders. The more broadly we engaged, the bigger the IP2 could be, making it unmanageable and unachievable. We decided to go where the energy was to make change, and further committed to engaging with Aboriginal stakeholders because they have not been a focus of any previous disaster resilience or risk reduction work in SA. We believe this was the right decision for us, acknowledging the IP2 has been designed as a live document, so if additional resources and opportunities arise, we can add priorities and actions.

5.2.3 Monitoring and Evaluation Strategy

In the project plan, the project team committed to a mid-project review and final evaluation, reporting against an agreed evaluation framework, which will be made publicly available.

The main focus for monitoring and evaluation since April 2022 has therefore been the development and initial implementation of a Monitoring and Evaluation (M&E) Strategy to report against and for framing the evaluation (refer to next page). As the breadth of this project is quite large, the team proposed to narrow the scope of the Strategy, designing it specifically around the People at Risk in Emergencies Framework Second Implementation Plan (IP2) as the key piece of work under the current project. As a result, the Strategy covers the period that the IP2 is in effect, January 2023 to the end of December 2025, and so it is important to note that the M&E Strategy extends beyond the scope of the current project and the final evaluation for this project will be at the halfway point for the IP2 M&E Strategy.

Since the Policy and Strategy group are the group responsible for implementation of the IP2, the Strategy therefore also provides the overarching approach for M&E specific to the work of that

group, as outlined in the group's Terms of Reference. This group was therefore consulted for feedback and advice on the M&E Strategy and they endorsed the 2 page Strategy document with key evaluation questions/indicators and program logic in February 2023, to progress gathering baseline data through surveys. The Project Reference Group has also reviewed and endorsed the document. The Strategy will be updated as required by the relevant groups, including further information being added to be more explicit about some of the assumptions in the program logic model and any supplementary information required to support the working groups going forward.

Given the focus of this strategy on the IP2 and the work of the P&S group, data and evaluation measures in this document will not focus on the overarching long-term objective identified for the People at Risk in Emergencies Framework, as indicated in the top layer of the program logic model:

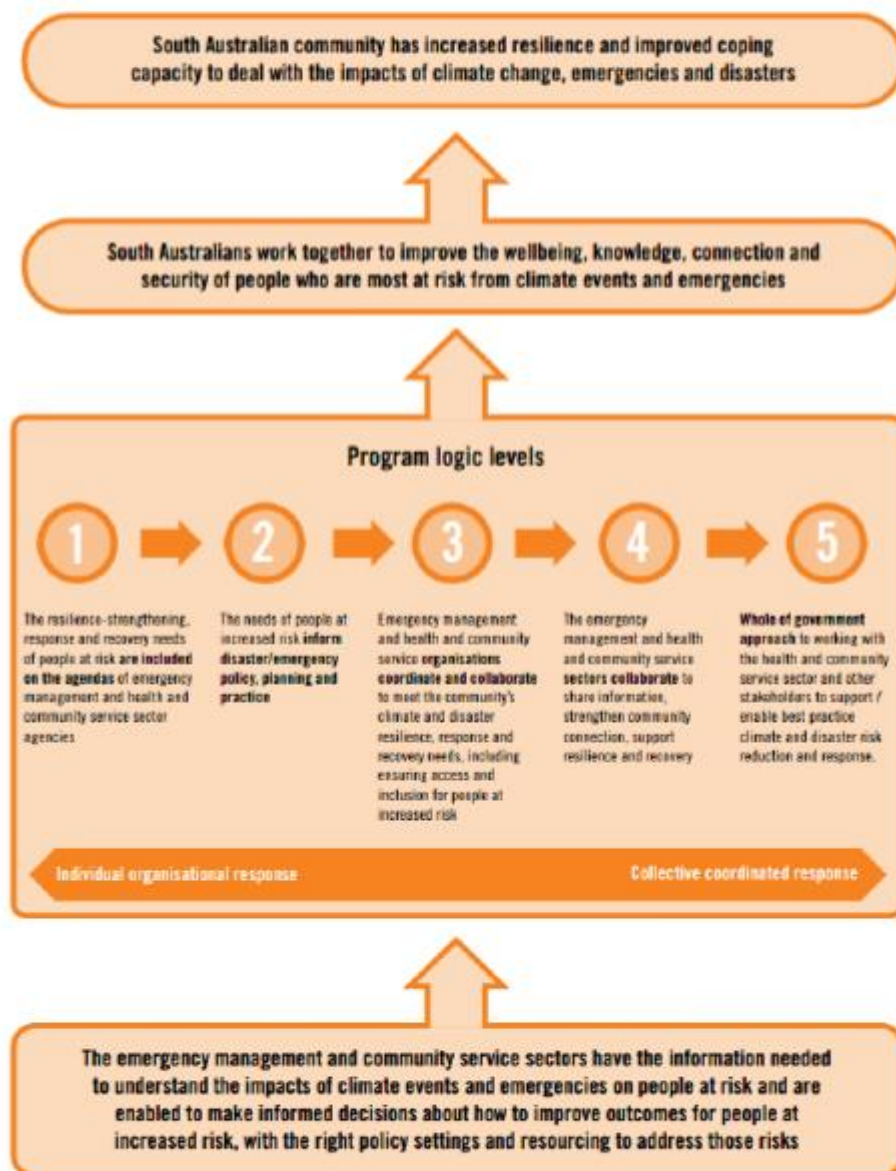
- *The South Australian community has increased resilience and improved coping capacity to deal with the impacts of climate change.*

Working Groups, however, will be encouraged to explore progress towards this goal in the monitoring and evaluation plans under their relevant initiatives. Specific initiatives undertaken by the P&S group to respond to the cross-cutting themes should also provide data and relevant information to contribute to an assessment against this goal. A meta evaluation of the various initiatives addressing the actions under IP2 could perhaps best assess progress towards this goal, but this is not within the scope of the current project or this M&E strategy.

The monitoring and evaluation framework can be found below.

Monitoring and Evaluation Strategy

Program Logic Model



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Monitoring & Evaluation Questions	Indicators	Possible data sources
Relevance		
1. Did the 2nd Implementation Plan, and the PaRE Policy and Strategy group's work to operationalise it, address the disaster risk reduction needs of population groups prioritised in the Implementation Plan?	No. selected priority population projects implemented No. population groups addressed No. cross cutting theme initiatives addressing priority populations Stakeholders report positive engagement with the initiatives being implemented	Working group reports Meeting minutes Project tracking Project evaluation reports
Impact		
2. What contribution has the 2nd Implementation Plan made to increasing state-level activity towards reducing the impacts of emergencies on people most at risk in our communities?	State level funding of initiatives in the Second Implementation Plan (IP2) No. logic level 5 initiatives implemented State agency involvement in initiatives in the IP2	Grant funding records Logic tracking Project evaluation reports
3. What contribution has the Second Implementation Plan made towards identifying the best ways for governments, organisations and communities to work together to increase the safety and wellbeing of people most at risk in emergencies?	No. collaborative initiatives and extent of collaboration Conference presentations Case studies identify the best ways to work together for positive population outcomes No. PaRE Thread 4 initiatives implemented	Working group reports Project evaluation reports
4. What, if any, unintended consequences (positive and/or negative) have been brought about directly or indirectly?	No. positive or negative unintended consequences recorded	Case studies, interviews Meeting minutes, eval reports
Effectiveness		
5. To what extent does the PaRE Policy and Strategy group and the Second Implementation Plan enable a whole of government approach to working with the health and community services sector and other stakeholders to support the implementation of best practice preparedness, recovery, response, and resilience strengthening activities for climate events and emergencies?	No. logic level 5 initiatives implemented State/federal/local government collaboration in initiatives with the health and community service sector Case studies identify best practice approaches; conference presentations held No. initiatives developed to strengthen capacity of the health & community service sector to implement best practice disaster risk reduction, response & resilience	Logic tracking Interviews Project evaluation reports

6. To what extent has the work of the PaRE Policy and Strategy Group contributed to better equipping South Australians to prepare, respond to and recover from climate events and emergencies?	No. logic level 1 projects implemented No. PaRE framework Thread 3 projects implemented	Data through ODA Project evaluation reports
7. To what extent has participation by member organisations in the PaRE Policy and Strategy Group increased investment and engagement in disaster risk reduction and strengthening community preparedness/resilience?	Time and no. of orgs/ involved in P&S and working groups, No. hours/meetings held No. orgs involved in initiatives and no. initiatives funded/implemented Group members report increased investment and engagement in disaster risk reduction and resilience strengthening within own organisations & communities	Survey and or interview Track investment
Efficiency		
8. To what extent have the actions in the implementation plan been achieved?	No. actions implemented Stakeholders report the extent to which actions have been achieved	Project tracking/eval reports Meeting minutes
Sustainability		
9. To what extent are outcomes achieved by the PaRE Policy and Strategy Group likely to be enduring beyond the timeframe of delivery?	Policy or legislative change; new systems embedded at org, sector or state level No. initiatives strengthen individual, community, org, sector or state level capacity Stakeholders report increased commitment and capacity to disaster risk reduction and resilience strengthening	Survey and/or interviews Meeting minutes Project tracking & evaluation reports

6. Project Implementation

6.1 P&S group

The Policy and Strategy group meets bi-monthly and has met three times at the time of writing this report. Their achievements so far have been to:

- Endorse Terms of Reference
- Refine content for the IP2
- Endorse the IP2
- Prioritise population groups and cross cutting themes to be addressed through working groups
- Endorse the Monitoring and Evaluation Strategy
- Explored initiatives to reduce social isolation and strengthen community resilience

6.2 IP2 priorities and actions

Cross cutting themes

CC1: Emergency preparedness, response, recovery and resilience

Actions
1.1 Provide emergency planning tools in accessible formats, with support available for those who are unable to develop an emergency plan within their own resources.
1.2 Increase the preparedness of particular groups of people with disability/chronic health and mental health conditions, through increasing accessibility to information and services, creating or strengthening community connections, and addressing social isolation, safety and mental health issues.

CC2: Information, education, communications and media

Actions
2.1 Better utilise community/religious groups and community radio to promote disaster resilience and response information and resources to diverse cultural groups and specific community locations.
2.2 Develop up-to-date information, resources and tools addressing climate and disaster risk that are culturally appropriate and available in relevant languages for the purpose of supporting preparation, response, recovery and resilience.
2.3 Work with media and communications specialists to review how information and messaging about extreme weather and disasters is communicated to maximise effective reach while utilising a trauma informed approach to minimise negative mental health impacts.

CC3: Service and program funding models

Actions
<p>3.1 Review and to improve cross-sector and cross-government planning and funding for services to be inclusive of the emergency preparedness needs of people with disability, mental health and chronic health issues. Increase the disaster preparedness of organisations that support people with complex needs, including adequate planning and resourcing for regulatory obligations.</p> <p>3.2 Promote to relevant decision makers ways to improve funding flexibility to enable service providers to respond to the needs of their community in response to disasters, without incurring loss or penalty.</p> <p>3.3 Support the development of guidelines/ regulations, training and resources for all health and mental health service providers, to enable the adoption of policies, procedures or practices related to extreme weather and disasters and the safety and wellbeing of assets, staff and the people and communities they work with.</p>

CC4: Housing and development

Actions
<p>4.1 Review regulatory requirements and practice regarding new construction in flood zones with a view to minimising risk to property, lives and the economy, including access to affordable insurance and the consideration of actions to particularly respond to the needs of emerging risk communities such as north-western Adelaide, and communicate proposed recommendations for improvement to relevant stakeholders.</p> <p>4.2 Review strategies for increasing the thermal effectiveness and energy efficiency of existing housing, including public, social and rental housing and communicate any recommendations for improvement to relevant key stakeholders.</p> <p>4.3 Work collaboratively to develop plans for the upgrading of Aboriginal housing in remote SA.</p>

Priority populations

PP1: Aboriginal people and communities

Actions
<p>1.1 Work with and support Aboriginal communities to update climate risk and resilience plans</p> <p>1.2 Explore the impact of water and energy security on remote Aboriginal communities, and identify opportunities to strengthen community capability, facilities and infrastructure to develop climate and disaster resilience, and communicate findings to relevant stakeholders.</p> <p>1.3 Work with Aboriginal organisations and communities to develop training materials, programs and resources to build the capacity of the local Aboriginal workforce to address climate change and disasters.</p>

PP2: Young people

Actions
2.1 Implement initiatives that increase youth voice and engagement in emergency preparedness, management and planning, including through co-design processes and high-level governance and organisational structures and collaborations.
2.2 Implement projects that increase young people's education in disaster resilience, their personal emergency preparedness and their engagement in local community activities, planning and management of emergencies.

PP3: Culturally and linguistically diverse communities

Actions
3.1 Explore a model for high level collaboration between community stakeholders/leaders and emergency services organisations to improve emergency preparedness and respond to the diverse needs of CALD communities.
3.2 Utilising effective engagement and communication strategies, undertake emergency prevention preparedness and planning with identified communities (including house fire prevention in CALD communities).
3.3 Address access to insurance for CALD communities for whom insurance is a new concept.

PP4: People with disability, experiencing isolation or homebound by physical or mental health conditions

Actions
4.1 Explore strategies for implementing person-centred emergency planning and expanding its use across SA.
4.2 Explore strategies for maximising the health and safety of people in emergencies who are essentially immobile or unable to leave their home due to health, mental health or disability and communicate any recommendations to relevant stakeholders.

PP5: People experiencing homelessness

Actions
5.1 Review Code Red and Code Blue extreme weather policy in relation to extreme heat, identify areas for improvement and communicate these to relevant stakeholders.

6.3 Working groups

The Policy and Strategy Group prioritised one cross cutting theme and two population groups to address through working groups. Membership of each of the working groups can be found in Appendix 1.

The *CC1: Emergency preparedness, response, recovery and resilience* working group formed in April 2023 and is facilitated by Red Cross. There is no funding to deliver on the actions, but to date the working group has met twice. The group has endorsed their Terms of Reference and the draft workplan prioritised identifying and mapping existing emergency planning resources and tools aimed at households and individuals, and in anticipation of the upcoming season will likely initially be focused on materials specific to reducing heatwave and bushfire risk. This work is also expected to involve identifying gaps, barriers and accessibility issues and ways to work together to increase the reach of this material to those most at risk.

Red Cross also facilitates the *PP2: Young people* working group as they have been funded to deliver youth projects that will assist in achieving the PP2 actions. The group is expected to come together for the first time in June 2023 and also act as the Steering Group for the Youth in Emergencies Development Program. This program has recently commenced, with one staff member already working on the project, recruitment for the second role is underway, and formalised partnerships being established with the SA CFS (also recruiting a staff member for the project), the Commissioner for Children and Young People and the Duke of Edinburgh International Award. An online forum with young people is expected to also occur in June.

The *PP4: People with disability, experiencing isolation or homebound by physical or mental health conditions* working group formed in March 2023 and is facilitated by SACOSS. To date, the group has met twice, endorsed terms of reference and developed a work plan. Their initial priority is to get more South Australians trained in Person Centred Emergency Planning. At this stage, only 2% of people who have completed the training are from South Australia, and we aim to significantly increase this number.

6.4 Addressing other priorities and actions

PP1: Aboriginal people and communities was also identified as a priority, however, a decision was made not to allocate a working group because the actions would require funding to enable them to be delivered. Aboriginal Health Council SA has been funded to have a consultant undertake an assessment of the Aboriginal health sector disaster resilience and readiness and it is hoped that further funding will be sourced so Aboriginal Health Council SA can lead on this work with support from a working group.

CC3: Service and program funding models will be addressed directly by the Policy and Strategy Group and is on the agenda for the June 2023 meeting.

SACOSS is independently working on *CC4: Housing and development* action 2 addressing the thermal effectiveness and energy efficiency of housing, in particular public and rental housing. We participated in national advocacy to raise the NATHERS rating of new housing, which has resulted in new housing being required to meet a rating of 7 (up from 6) from October 2023. We have also

made a submission to the Residential Tenancies Act Review which included advocating for energy efficiency standards for rental housing – including public housing.

As opportunities arise, project staff will identify stakeholders and funding sources and either develop grant applications or support others to seek funding to address other cross cutting themes or priority groups. Where actions can be delivered without additional funding, they may be acted upon by the Policy and Strategy group.

7. Engagement and Collaboration

The application for funding for this project included a commitment to the development of strong, strategic and connected networks between and across the emergency management and health and community service sectors. We would involve representatives across health and community services which may include health and mental health, disability, aging, children's services, CALD communities and Aboriginal communities together with emergency services and emergency management agencies.

Our engagement has been across the breadth of sectors and organisations that we committed to engaging with, as is demonstrated in appendix 1. Stakeholders have included:

- Emergency management agencies
- A broad range of health and community service providers
- Peak bodies
- Statutory bodies
- Commonwealth agencies and regulators
- Disaster resilience experts

Our project has had cross sector engagement at every stage; from the Project Reference Group, consultation forums, Policy and Strategy Group and working groups.

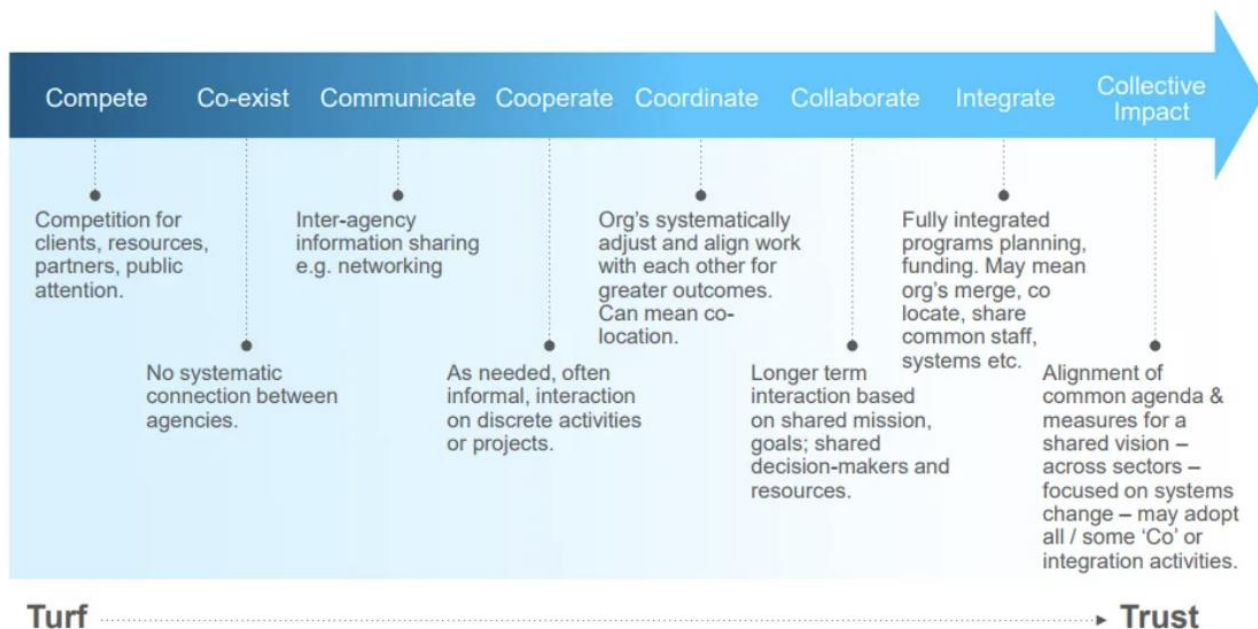
Engagement throughout the project has had multiple purposes which broadly reflected four of the five levels of the [IAP2 Spectrum](#). While this spectrum was designed around public participation, we have used it to reflect our stakeholders across emergency management and the health and community service sector:

- a. To provide information
 - Informing stakeholders about the project
 - Informing stakeholders about DRR and other grant opportunities
 - We are working with stakeholders to hold an event to inform health and community service providers about the weather outlook and risks to prepare for in the coming summer/ fire season, along with risk management activities planned by state government agencies, and best practice risk management approaches in the health and community service sector.

- b. To consult
 - Consulting cross sector stakeholders on the engagement structure and IP2 development
 - Seeking advice on project implementation
- c. To involve
 - Involving stakeholders in setting priorities for working group development and activities
 - Involving stakeholders in the development of the M&E strategy
- d. Collaborate
 - The Red Cross and SACOSS collaboration provide the foundation for all of our work
 - Working group collaborations
 - Collaborating to plan, promote and host events

The ongoing collaboration takes place at the Policy and Strategy Group which began in November 2022 and working groups which began in March 2023. The relationships are still quite new, but they have been working respectfully, purposefully and productively.

Our monitoring and evaluation strategy include use of the sliding scale by Collaboration for Impact to measure how we work together. To date, a baseline survey has been undertaken, but the relationships are still too new to monitor any change. Project staff assessment is that we are mostly working at the *communicate* and *co-operate* level.



8. Measures against the Framework

The People at Risk in Emergencies Framework was developed in 2018 by Red Cross for the Government of South Australia, and in collaboration with emergency management agencies. It is due for review in 2023, but continues to be a useful document to align our work against.

The aims of the Framework are to:

- Reduce the impacts of emergencies on people who are most at risk in our communities;
- Identify the best ways for individuals and organisations to work together to increase the safety and wellbeing of people most at risk in emergencies;
- Facilitate a greater sharing of responsibility for emergency preparedness, response and recovery as a wider range of organisations play a role in supporting people most at risk.

The Framework includes 5 guiding principles. The table below indicates the principles and how our project is applying them to our work.

Principles	Application
It starts at home	The CC1: <i>Emergency preparedness, response, recovery and resilience working group</i> aims to address the needs of at risk populations by addressing their own preparedness, response, recovery and resilience by ensuring accessible and appropriate communications and tools, including a focus on CALD and Aboriginal communities.
Everyone can contribute	<p>The PP2: <i>Young people working group</i> recognises that young people have often been left out of conversations about emergency preparedness and response. The work of this group will help create opportunities for them to be more informed and engaged in decision making and action, to build their capacity, confidence and resilience.</p> <p>The breadth of our engagement indicates our commitment to applying this principle, and while we have broad cross sector involvement, we are now building the involvement of people with lived experience.</p>
In a community context	The health and community services sector is a very important part of communities across SA. They are also an important aspect of daily life for some of the most vulnerable South Australians. Engaging them in every part of this project has been integral as they are the ones with personal connection with many of the people who are most at risk in our communities.
Coordination is critical	This principle is the cornerstone of our work. Lots of people care about people who may be more at risk in emergencies, but without coordination, they may not act on that care, and if they do, it can be uninformed, ineffective, duplicating or creating unintended consequences.

	The previous iteration of people at risk in emergencies work provided executive support for meetings, with agencies and organisations independently undertaking projects. There was some reporting accountability, but little coordination or collaboration. The increase in staffing allocation for this project was designed to address that issue.
Privacy and autonomy	<p>The issues of privacy and autonomy are key factors for the PP4: <i>People with disability, experiencing isolation or homebound by physical or mental health conditions</i> working group.</p> <p>The Person-Centred Emergency Planning (PCEP) model is designed to inform and support people with disabilities (and other at risk populations) to make their own emergency plans. Issues of privacy and autonomy will also be addressed by the group when exploring strategies for maximising the health and safety of people in emergencies who are essentially immobile or unable to leave their home.</p> <p>One of the risks in having statewide strategies to support populations, is that the wishes and rights of individuals can be ignored.</p>

9. Monitoring and Evaluation Outcomes

Aligned to the M&E Strategy, three surveys were developed. Two were ready to be sent out to the P&S group in mid-March and it was requested that the surveys be completed in advance of the April meeting so that the initial findings could be presented and discussed at that meeting. These 2 surveys were separated, as Part 1 involved an initial mapping exercise against the actions which was not anonymous/confidential, as we required the name of the organisation to allow follow up for further details against the responses. Participants were informed that if they felt they did not have the requisite knowledge, they could feel free to seek input from others in their organisation.

Part 2 assessed collaboration factors (based on the independent standardised Wilder Collaboration Factors Inventory), which needed to be anonymous/confidential to enable honest assessment of the present functioning of our collaborative group, against the relevant factors considered essential to successful collaborations (<https://www.wilder.org/wilder-research/research-library/collaboration-factors-inventory-3rd-edition>). Participants were informed that we intend to repeat the survey again at least once within the next 12 months for monitoring and continuous learning purposes and that only one person from each organisation could complete the survey – this being the individual who has attended the most meetings/substantive P&S group member.

The development of baseline measures based on the program logic model in the M&E Strategy experienced delays due to technical difficulties, and so the 3rd survey was not available to be sent out electronically until after the April meeting and so some stakeholders completed the survey in hard copy. To enable honest answers, that survey is also anonymous and confidential.

Survey 1

At the time of this report, 9 valid responses to this survey have been completed by project stakeholders on the P&S group. Three responses were received by one stakeholder agency and so the results for that stakeholder have been combined into 1 response to ensure no one stakeholder agency receives a greater weighting than any other.

In terms of those agencies that responded to the survey, it was found that the majority of agencies worked with people with disabilities; noting that agencies could select multiple options (refer Table 1).

Table 1: Population groups P&S group agencies who completed the survey work with

Value	Frequency	Percentage
People with disabilities	6	66.67
Aboriginal communities	5	55.56
Children and young people	4	44.44
People experiencing homelessness	4	44.44
CALD communities	4	44.44
Member organisations	4	44.44
People experiencing emergencies/disasters	4	44.44
People experiencing poverty or unemployment	3	33.33
People with chronic physical health conditions	3	33.33
People with experience of family violence	3	33.33
People experiencing mental health conditions or substance abuse issues	3	33.33
Frail older people	3	33.33

Accounting for those agencies for whom we did not receive a completed survey (informals), yet being aware of the population groups that these agencies are known to work with, the below table has been developed:

Table 2: Population groups P&S group agencies likely work with

Population group	No. agencies	% agencies
People with disabilities	9	50
Children and young people	8	44
People experiencing emergencies/disasters	8	44
Aboriginal communities	7	38
People experiencing homelessness	6	33
CALD communities	6	33
Member organisations	6	22
People with experience of family violence	6	33
People experiencing mental health conditions or substance abuse issues	6	33
People experiencing poverty or unemployment	4	22
People with chronic physical health conditions	5	28
Frail older people	4	22

People with disabilities were still the main population group that stakeholder agencies worked with (50% of agencies), closely followed by children and young people and people experiencing emergencies/disasters.

The survey also identified that many of the stakeholder agencies on the P&S group had already contributed to action areas identified in the IP2 prior to the development of the plan. In particular, two-thirds of respondents had already worked towards increasing the preparedness of particular groups of people with disability/chronic health and mental health conditions through increase accessibility to information and services, creating or strengthening community connections, and addressing social isolation, safety and mental health issues (CC1.2). More than half had also explored strategies for implementing person-centred emergency planning and expanding its use across SA (PP4.1). The findings showed that for most of the actions at least one agency had indicated that their organisation had already made some sort of contribution that area, and only 1 action against which none of the respondents indicated any prior contribution: PP3.3 Address access to insurance for CALD communities for whom insurance is a new concept.

Survey 2

The Wilder Collaboration inventory conducted at this early stage of the reinvigorated Policy & Strategy Group can assist us with a baseline measure of the strength of the collaboration. Scores of 4 or more against any factors are considered strength areas that do not need attention and any areas scoring below 3.0 are considered to be areas of concern requiring further attention and consideration by the project team and the group. These results will be presented at the June 2023 meeting of the Policy and Strategy group for discussion and identification of potential ways to address areas requiring further attention. Seven valid responses to the survey have been received to date with the following findings emerging:

Existing strength areas

- History of collaboration or cooperation - organisationally
- Unique purpose

Areas of concern/development

- History of collaboration - at a state level
- Appropriate cross section of members
- Members share a stake in both process and outcome
- Multiple layers of participation
- Development of clear roles and policy guidelines
- Adaptability to changing circumstances
- Appropriate pace of development
- Sufficient funds, staff, materials and time

Survey 3

Six responses to survey 3 have been received to date and are currently in the process of being analysed.

Achievement of project outputs and outcomes

Project output	Status
A sustainable, systematic, and coordinated approach to enhancing the safety of people who may be at increased risk due to the impacts of climate change, emergencies or disasters.	In progress
Review of existing People at Risk Action Group and associated implementation plan (2018-2020), recommendations and operational guidelines for successful action	Complete
New PaRE Implementation Plan	Complete
Communication Plan review (2-3 sessions independently facilitated) report, and recommendations	Not completed due to few previous members being available
New Action Group/ engagement structure is established, and meets according to reviewed Terms of Reference	Complete, ongoing
Actions from the updated Implementation Plan are implemented	In progress
Engagement Plan developed for the development of a new People at Risk Framework for 2023-28.	Complete
Formalised connections with RRE sub committee	In progress

Project outcomes include:

- The first of our outcome relates to Increased involvement of stakeholders relevant to population groups that may be at increased risk in emergencies in implementation of the Framework. The extent of involvement in the Policy and Strategy Group as well as the working groups is a clear demonstration that the project is tracking very well against this outcome. The tools used as part of the monitoring and evaluation strategy are designed to track the breadth and level of collaboration occurring through the project. The final project evaluation in April 2024 will demonstrate achievement of this outcome more objectively.

- The second outcome relates to Increased collaboration and coordination around implementation of recommendations coming out of key documents or frameworks relating to promoting the safety of people who may be more at risk from climate events and disasters. E.g. Person Centred Emergency Planning and implementation of disability royal commission – National disability strategy. One of the first actions to be worked on involves promotion of PCEP to have more people trained and have it applied across other groups, such people who are older or living with chronic physical or mental health conditions. We are still in the early stages of actioning the IP2, however we are on track towards achieving this outcome.

What we learned

At the April Policy and Strategy meeting, we had hoped to present emerging findings from the surveys, however, unfortunately, it was determined there were insufficient responses to the surveys and it was not possible to have a discussion or make any decisions about the survey results at that time. There are now sufficient responses and so the survey findings are planned to be discussed at the upcoming 6 June 2023 meeting.

We have learned that due to time pressures and capacity constraints many stakeholders found it difficult to take the time to complete surveys and so allocating time within the scheduled meetings to complete the survey/s may be the best way going forward. We could use workshop activities or mobile phone technologies to achieve this. In addition, we learnt that 3 surveys- no matter how simple and how quickly they are able to be completed, was perhaps too many and we will look to consolidate these opportunities for input into one format in future, where possible.

10. Conclusion

This project to address the needs of people most at risk in emergencies is still in its early stages. The first six months of the project focussed on the review of previous work, and consultation to develop a new engagement structure and IP2. This was followed by a prioritisation process and formation of working groups which are now beginning to address their actions in the IP2.

The project has demonstrated that is being implemented in accordance with the values and principles of the People at Risk in Emergencies Framework.

The level and breadth of engagement and collaboration at all stages of this project is a reflection that the project is being delivered in a way is building relationships across the emergency management and health and community services sectors. This is a key focus for the project.

It will be the actions implemented by the working groups that will start to make more direct impact on people at risk along with any strategic work undertaken by the Policy and Strategy Group. The project team is confident that the project approach, which addresses policy and strategy as well as implementation of actions is being effective. With monitoring and evaluation occurring at both levels, we will have evidence of this in the final evaluation report in April 2024.

Appendix 1

List of stakeholders

Policy and Strategy Group

- SAFECOM
- SA Country Fire Service
- SA Health
- SA Housing Authority
- SA State Emergency Service
- Department for Premier and Cabinet
- Department for Human Services
- Office for Data Analytics
- Commissioner for Children and Young People
- NDS/ Community Living Australia
- Aboriginal Health Council SA
- Sonder
- Multicultural Communities Council of SA
- ac.care
- Lived Experience Leadership and Advocacy Network
- Aged and Community Care Providers Association
- Local Government Association of SA
- Red Cross
- SACOSS

CC1: Emergency preparedness, response, recovery and resilience working group

- Australian Red Cross
- SAFECOM
- Department of Human Services
- South Australian Housing Authority
- SA Health
- Department of Premier and Cabinet – Security Emergency Recovery Management
- Multicultural Communities Council SA
- SA Country Fire Service

PP2: Young people working group

- Australian Red Cross
- SAFECOM
- Department of Human Services
- SA CFS
- Office of the Commissioner for Children and Young People (CCYP)
- (discussions with additional stakeholders are underway)

PP4: People with disability, experiencing isolation or homebound by physical or mental health conditions working group

- NDS/ Community Living Australia
- ME/CFS Australia (Chronic Fatigue consumer peak body)
- Department for Human Services
- Housing SA
- SA Health
- Adelaide Hills Council
- Country Fire Service
- Lived Experience Leadership and Advocacy Network
- SACOSS

Consultation Forums and meetings

- SA Financial Counselling Association
- City of Mount gambier
- Commissioner for Children and Young People
- HCO Disability
- Commissioner for Aboriginal Children and Young People
- Department of Health & Aged Care
- SA Police
- Uniting SA
- NDIS Quality and Safeguards Commission
- Mental Health Coalition SAHCSA
- Department for Human Services
- SACOSS
- Red Cross
- Wheatfields Incorporated (Aged Care)
- SA Health
- SA Country Fire Service
- SA Council on Intellectual Disability
- Adelaide Hills Council
- SAFECOM
- Good Shepherd Australia New Zealand
- Asthma Australia
- ME/CFS South Australia Inc
- Multicultural Communities Council of SA
- Australian Refugee Association
- Hutt Street Homeless Service

Other

Through the development and implementation of the project, we have additionally engaged with:
National Emergency Management Agency

- Bureau of Meteorology
- Primary Health Networks
- COTA
- Councils of Social Service
- Adapt West
- Mount Barker Council
- Daniel Aldrich, Fullbright Professor, Torrens Resilience Institute
- Dr Mark Crossweller, Ethical Intelligence

Appendix 2

Disaster Risk Reduction Project Reference Group Terms of Reference

**Collaborative Action: Addressing the needs of people at risk from
climate change, emergencies and disasters**

1. Project Background

The Collaborative Action: Addressing the needs of people at risk from climate change, emergencies and disasters project is a 2year project funded was funded under the Disaster Risk Reduction Grants Program funded by the Australian Government and the South Australian Government. The project is accountable to SAFECOM. Views and findings associated with this initiative/project are expressed independently and do not necessarily represent the views of State and Commonwealth funding bodies.

The ultimate purpose of this project is improved outcomes for people more at risk as a result of an emergency event/disaster, noting that they are significantly over-represented in emergency impact data, and often have a longer and/or more challenging recovery journey following their experience of an emergency.

Through the project we will take an 'all hazards' approach to considering and addressing disaster and other significant emergency related risk. Subsequently, engagement within identified sectors and strategies undertaken will consider a breadth of climate risks and hazards including events such as fires, floods, heatwaves, storms, and air pollution, as well as events as such as pandemics, droughts and plagues which are expected to increase in frequency due to our changing climate. Each of these events and disasters impact on the physical health and wellbeing of people living with vulnerabilities.

Key phases of the project include:

Review and planning

- Review of the past People at Risk in Emergencies (PaRE) Framework Action Plan and outcomes
- Review of the PaRE Action Team engagement structure
- Planning the revised engagement structure
- Developing a new Action Plan

Implementation

- The new engagement structure meets regularly, with executive support provided by Red Cross and SACOSS
- Action Group members undertake agreed activities as per the Action Plan.
- SACOSS and Red Cross provide facilitation, support, policy advice, further stakeholder engagement and advocacy across the health and community service and emergency management sectors.

- Minimum six-monthly reporting to SEMC (via sub-committee) through the Resilience, Recovery and Engagement Sub-Committee.

Evaluation

- A mid-project review and final evaluation will report against an agreed evaluation framework and be made publicly available.

2. Reference Group Role and Purpose

The reference group will assist the SACOSS and Red Cross PaRE project team with strategic advice to maximise the impact of the project, including but not limited to:

- feedback on the project plan
- ways to encourage sector organisations to engage in the project
- advice for project evaluation
- support and promotion of the project within their sector
- problem solving issues that arise as the project is implemented
- guidance on planning for sustainability and next steps at the conclusion of the project.
- seek advice and guidance from stakeholders with relevant expertise
- collectively influence and advocate for appropriate resourcing and policy changes necessary to support the project

3. Membership

Membership on the Reference group includes a representative from:

- South Australian Council of Social Service
- Australian Red Cross
- South Australian Fire and Emergency Services Commission
- SA Health
- SA Police
- SA Country Fire Service
- Mental Health Coalition SA
- ac.care

4. Meetings and Attendance

The group will meet 7-8 times during the course of the project and may convene out of session meetings as required.

Meeting agendas and notes will be kept and distributed to the group by the SACOSS. Participation in meetings may be face to face, or via an online platform such as Microsoft Teams.

Members may nominate a proxy to attend in their absence.

Review:

These Terms of Reference may be revised as need arises with input from the Steering Committee/Group.

Duration:

The Reference Group will continue until the Project completion date in April 2024.