



Risk Register Builder			
Risk Register/Assessment Title:		Hazards and risks associated with COVID-19 in the workplace	Register/Assessment Owner: Commissioner
Context:		The QFES workforce operate in a range of environments, from offices and call centres to training facilities, industrial areas, bushland, and high risk sites. Staff and volunteers work a range of shift types and may travel extensively. QFES is required to provide a safe workplace for its staff, volunteers, contractors and visitors.	Signature:
Date of Assessment:		21/01/2022	Date: 1/02/2022
Version:		0.3	Next review date: 31-Mar

Risk					Inherent risk rating				Controls	Residual risk rating					Future controls		Accountability		Target risk rating		
Risk No.	Risk (what can go wrong?)	Description (how can it happen? / causes)	Consequences (Qualitative)	Consequences (Quantitative)	Consequence	Likelihood	Rating Value	Rating Score	Current Controls	Consequence	Likelihood	Rating Value	Rating Score	Rating Variance - effectiveness of controls	Future controls	Action owner (& due date)	Risk Owner	Status	Consequence	Likelihood	Rating Value
1	Possibility of harm caused by the psychological characteristics of the work design and social conditions during the COVID-19 pandemic (workplace or home).	Exposure to distressing events involving COVID-19. Conflict and/or aggression amongst staff related to personal views on COVID-19 and/or COVID-19 vaccinations and/or control measures (e.g. masks). Stress as a result of COVID-19 workplace measures. Stress from isolation whilst working at home	Psychological injury (e.g. anxiety, depression, PTSD)  Chronic disease (e.g. heart disease, type two diabetes)  Physical injury (e.g. musculoskeletal disorders)	Increase in costs associated with workers compensation claims/premiums, injury management, reduced productivity, reduced organisational output, increased member turnover and depleted workforce.	Moderate	Possible	Medium	9	Safety and Wellbeing Policy. Early Intervention Program. Video (Microsoft teams) and teleconferencing facilities made available to all staff to maintain social connection and contact with the workplace. Leadership Advice Line available to increase managers capability with regard to supporting staff health and wellbeing. 24 hour counselling service available to support workers and their families. Peer support officers. Chaplaincy service in place. Domestic and family violence support program available to all staff. Leave entitlements available for staff who may become need time away from the workplace. SHE hazard and incident reporting system.	Moderate	Unlikely	Medium	6	3	Continue to monitor Queensland Health (QH), Public Service Commission (PSC) and Workplace Health and Safety Queensland (WHSQ) guidance and adjust control measures as required.	Assistant Commissioner QFES People	Commissioner	Watch	Moderate	Unlikely	Medium
2	Possibility of harm caused by the biomechanical characteristics of the work design in the home office in situations where increased telecommuting is required.	Poor ergonomic set up in the home office environment.	Acute and chronic related sprains/strains or other musculoskeletal disorders	Increase in costs associated with workers compensation claims/premiums, injury management, absenteeism, reduced productivity, reduced organisational output, increased member turnover and depleted workforce.	Moderate	Possible	Medium	9	Safety and Wellbeing Policy. Flexible work arrangements and telecommuting arrangements in place for staff working from home. Working from home risk assessment checklist in place to identify hazards, assess risks and put in place suitable control measures. Gateway videos related to suitable desk set-up and ergonomics in the home environment. Video (Microsoft teams) and teleconferencing facilities made available to all staff to maintain social connection and contact with the workplace. Leadership Advice Line available to support managers with work from home arrangements. SHE hazard and incident reporting system.	Moderate	Unlikely	Medium	6	3	Continue to monitor Queensland Health (QH), Public Service Commission (PSC) and Workplace Health and Safety Queensland (WHSQ) guidance and adjust control measures as required.  Implement the Prevention and response to workplace bullying procedure.	Assistant Commissioner QFES People	Commissioner	Watch	Moderate	Unlikely	Medium
3	Possibility of harm caused by exposure to COVID-19 in a QFES facility environment (e.g. Kedron, Albion, workshop, station, regional headquarters).	Corporate staff and / or operational staff attending a QFES office / workplace facility.	COVID-19 could be transmitted from a corporate staff member to a QFES operational staff member resulting in serious illness (including long term serious adverse health consequences even for those who recover) and death in extreme circumstances.	Increase in costs associated with workers compensation claims/premiums, injury management, absenteeism, reduced productivity, reduced organisational output, and depleted workforce.	Major	Possible	High	12	State Pandemic Plan and Associated Annexes. Standing Order (SO-Q-OM-5.13 QFES COVID-19 Activities - COVID-19 Vaccinations). QFES 2020-21 Deployment Plan: COVID-19 Specific. Floor plans identify requirements for physical distancing. Promotion of good hygiene practices. Handwashing facilities are kept clean, in good working order and appropriately stocked. QFES Events Covid Safe plans Alcohol based hand sanitizer and anti-bacterial wipes made available throughout all QFES facilities. Posters and signage installed in meeting and conference rooms, lifts, desk areas and kitchen facilities to comply with physical distancing requirements. A COVID Check In QR Code is in place and monitor workplace numbers and physical distancing requirements. A regular cleaning regime has been implemented for high touch areas such as desks, handles, lift buttons and bathroom facilities (PPE provided to cleaners). Emergency response procedures in place should a suspected or confirmed case of COVID-19 enter the workplace. Flexible work arrangements and telecommuting arrangements in place to manage staff numbers at QFES facilities. Onsite and offsite car parking facilities available to all staff to minimise commuting via public transport. Staggered start and finish times implemented where required, with option for staff to apply for extended work hours between 9.00am and 3.00pm. QFES operational doctrine and infection control procedures Access to QH COVID-19 testing facilities COVID-19 specific information available on the QFES Gateway and circulated via other communication channels and email Operational personnel have access to PPE (workplaces, appliances, regional and state cache) Personnel are encouraged to comply with QH and QG guidance and consider COVID-19 vaccination Video (Microsoft teams) and teleconferencing facilities made available to all staff. SHE hazard and incident reporting system. Workplace cleaning guides for suspected or confirmed case of COVID-19. Staff are provided time during work hours to receive COVID-19 vaccination where reasonably practicable	Major	Rare	Medium	4	8	Continue to monitor Queensland Health (QH), Public Service Commission and Workplace Health and Safety Queensland guidance and adjust control measures as required.  Mandatory COVID-19 vaccination policy for all QFES paid staff (except those with certified medical contraindications or exemption) who may be required to interact with other operational workers or members of the public will be required to receive their double dose of COVID-19 vaccine by a specified date and booster within one month of eligibility  Standing Order Rapid Antigen Testing - COVID-10 for specified activities (Deployments and Indigenous Communities)	Assistant Commissioner QFES People	Commissioner	Open	Major	Unlikely	Medium
4	Transmission of COVID-19 to or from member of the public to a QFES staff during delivery of critical services in an operational context (emergency / non emergency) - including COVID-19 activities.	QFES staff attend a range of operational settings and are required to work in close proximity with each other, other emergency service workers and members of the public in the course of their operational duties. This may occur in hospitals, aged care facilities, at risk communities, airports, high density housing, large scale venues where physical distancing and PPE may not always be adequate, suitable, worn correctly, reliably and without potential for damage or failure to sufficiently protect from COVID-19 transmission or infection.	COVID-19 could be transmitted from a member of the public to a QFES operational staff member resulting in serious illness (including long term serious adverse health consequences even for those who recover) and death in extreme circumstances.  COVID-19 could be transmitted from a QFES operational staff member to a member of the public, including those at risk populations during the course of their duties, resulting in serious adverse health consequences even for those who recover) and death in extreme circumstances.	Increase in costs associated with workers compensation claims/premiums, injury management, absenteeism, reduced ability to deliver critical service, and depleted operational workforce.	Major	Possible	High	12	State Pandemic Plan and Associated Annexes. Standing Order (SO-Q-OM-5.13 QFES COVID-19 Activities - COVID-19 Vaccinations). QFES 2020-21 Deployment Plan: COVID-19 Specific. Handwashing facilities are kept clean, in good working order and appropriately stocked. Alcohol based hand sanitizer and anti-bacterial wipes made available throughout all QFES stations, brigades, groups, appliances. Posters and signage installed in QFES operational facilities to comply with physical distancing requirements. QFES operational procedures which document operational staff present in operational settings. PPE including P2, P3 masks, gloves and other PPC requirements QFES Events Covid Safe Plans Regular cleaning regimes have been implemented for appliances and operational workplaces. Emergency response procedures in place should a suspected or confirmed case of COVID-19 enter the workplace. QFES operational doctrine and infection control procedures QFES Events Covid Safe Plans Access to QH COVID-19 testing facilities COVID-19 specific information available on the QFES Gateway and circulated via other channels and email Operational personnel have access to PPE (workplaces, appliances, regional and state cache) Personnel are required to comply with QH CHO Directions and QG guidance and consider COVID-19 vaccination Video (Microsoft teams) and teleconferencing facilities made available to operational personnel to minimise interaction with others to attend meetings away from operational workplaces. Minimise visitors to operational workplaces SHE hazard and incident reporting system. Workplace cleaning guides for suspected or confirmed case of COVID-19. Staff are provided time during work hours to receive COVID-19 vaccination where reasonably practicable.	Moderate	Possible	Medium	9	3	Continue to monitor Queensland Health, Public Service Commission and Workplace Health and Safety Queensland guidance and adjust control measures as required.  Mandatory COVID-19 vaccination policy for all QFES staff (except those with certified medical contraindications) who may be required to interact with other operational workers or members of the public will be required to receive their double dose of COVID-19 vaccine by a specified date and booster within one month of eligibility  Standing Order Rapid Antigen Testing - COVID-10 for specified activities (Deployments and Indigenous Communities)  Minimise the time in which unvaccinated visitors, contractors or third party providers attend QFES occupied facilities. Provide alternate arrangements for visits where practicable	Assistant Commissioner QFES People	Commissioner	Open	Moderate	Unlikely	Medium

Risk					Inherent risk rating				Controls	Residual risk rating					Future controls		Accountability		Target risk rating		
Risk No.	Risk (what can go wrong?)	Description (how can it happen? / causes)	Consequences (Qualitative)	Consequences (Quantitative)	Consequence	Likelihood	Rating Value	Rating Score	Current Controls	Consequence	Likelihood	Rating Value	Rating Score	Rating Variance - effectiveness of controls	Future controls	Action owner (& due date)	Risk Owner	Status	Consequence	Likelihood	Rating Value
5	Staff with unknown COVID-19 vaccination status.	QFES staff may be unwilling to declare their COVID-19 vaccination status or make a false vaccination status declaration.	An unvaccinated staff could be exposed to COVID-19 resulting in serious illness and/or death to QFES staff or the public resulting from transmission of COVID-19.  Conflict and/or aggression resulting from differing views amongst staff and /or staff choosing not to openly discuss vaccination status.	Increase in costs associated with workers compensation claims/premiums, injury management, absenteeism, reduced productivity, reduced organisational output, and depleted workforce.	Major	Almost Certain	Very High	20	QFES to follow QH CHO Directions and COVID-19 safety measures published on the QFES Gateway.  All QFES staff can access surgical mask, hand sanitiser, surface spray / surface wipes.  QFES operational staff to access range of PPE.	Major	Likely	High	16	4	Mandatory COVID-19 vaccination policy for all QFES paid staff (except those with certified medical contraindications or exemption) who may be required to interact with other operational workers or members of the public will be required to receive their double dose of COVID-19 vaccine by a specified date and booster within one month of eligibility	Assistant Commissioner QFES People	Commissioner	Open	Major	Unlikely	Medium
6	Failure to effectively quarantine single or multiple positive cases of COVID-19 infection in QFES workplaces.	Unaware of infected personnel i.e. asymptomatic or delayed notification could attend a QFES workplace or QFES managed incident or other agency managed disaster incident site  Staff come into QFES workplaces unwell.	COVID-19 infection could be transmitted to other QFES staff. All potentially affected staff would be required to isolate and the station / site taken offline (partial or full) for cleaning.  This could increase the number of infected staff (including long term serious adverse health consequences even for those who recover) and death in extreme circumstances.	Impact to service delivery	Major	Likely	High	16	QFES to follow QH CHO Directions and COVID-19 safety measures published on the QFES Gateway.  Continue to encourage staff to receive their COVID-19 vaccination.  Staff required to remain away from QFES workplaces when displaying symptoms of COVID-19 and to have a PCR test and isolate and await results.	Moderate	Almost Certain	High	15	1	Continue to monitor Queensland Health, Public Service Commission and Workplace Health and Safety Queensland guidance and adjust control measures as required.  Mandatory COVID-19 vaccination policy for all QFES paid staff (except those with certified medical contraindications or exemption) who may be required to interact with other operational workers or members of the public will be required to receive their double dose of COVID-19 vaccine by a specified date and booster within one month of eligibility	All Deputy Commissioners	Commissioner	Open	Moderate	Likely	High
7	Transmission of COVID-19 to or from an unvaccinated member of the public to an unvaccinated QFES staff.	Transmission in the workplace or operational setting where there may be unknown cases of COVID-19.	Serious illness and/or death to QFES staff or the public resulting from the transmission of COVID-19.	Increase in costs associated with workers compensation claims/premiums, injury management, absenteeism, reduced productivity, reduced organisational output, and depleted workforce.  Adverse publicity for QFES and potential litigation.  Reputational damage as a result of media reports.	Major	Possible	High	12	State Pandemic Plan and Associated Annexes. Standing Order (SO-Q-OM-5.13 QFES COVID-19 Activities - COVID-19 Vaccinations). QFES 2020-21 Deployment Plan: COVID-19 Specific. Handwashing facilities are kept clean, in good working order and appropriately stocked. Alcohol based hand sanitizer and anti-bacterial wipes made available throughout all QFES stations, brigades, groups, appliances. Posters and signage installed in QFES operational facilities to comply with physical distancing requirements. QFES operational procedures which document operational staff requirements in operational settings. Promotion of good hygiene practices. Regular cleaning regimes have been implemented for appliances and operational workplaces. Emergency response procedures in place should a suspected or confirmed case of COVID-19 enter the workplace. QFES operational doctrine and infection control procedures Access to QH COVID-19 testing facilities COVID-19 specific information available on the QFES Gateway and circulated via various communication channels and email Operational personnel have access to PPE (workplaces, appliances, regional and state cache) Personnel are required to comply with QH CHO Directions and QG guidance and consider COVID-19 vaccination Video (Microsoft teams) and teleconferencing facilities made available to operational personnel to minimise interaction with others to attend meetings away from operational workplaces. Minimise visitors to operational workplaces SHE hazard and incident reporting system. Workplace cleaning guides for suspected or confirmed case of COVID-19. Staff are provided time during work hours to receive COVID-19 vaccination where reasonably practicable.	Moderate	Possible	Medium	9	3	All QFES staff may be required to interact with operational personnel who will be required to attend various work locations and operations at short notice.  Mandatory COVID-19 vaccination policy for all QFES paid staff (except those with certified medical contraindications or exemption) who may be required to interact with other operational workers or members of the public will be required to receive their double dose of COVID-19 vaccine by a specified date and booster within one month of eligibility	Deputy Commissioner Strategy and Corporate Services	Commissioner	Open	Moderate	Possible	Medium
8	COVID-19 infection during secondary or other employment / volunteering activities.	QFES staff could come into contact with COVID-19 during the course of their secondary or other employment / volunteering duties.	Serious illness and/or death to QFES staff or the public resulting from the transmission of COVID-19.	Increase in costs associated with workers compensation claims/premiums, injury management, absenteeism, reduced productivity, reduced organisational output, and depleted workforce.	Major	Possible	High	12	When undertaking QFES work, it is undertaken in accordance with QH CHO Directions and COVID-19 safety measures published on the QFES Gateway. State Pandemic Plan and Associated Annexes. Standing Order (SO-Q-OM-5.13 QFES COVID-19 Activities - COVID-19 Vaccinations). QFES 2020-21 Deployment Plan: COVID-19 Specific. Handwashing facilities are kept clean, in good working order and appropriately stocked. Alcohol based hand sanitizer and anti-bacterial wipes made available throughout all QFES stations, facilities and appliances. Posters and signage installed in QFES operational facilities to comply with physical distancing requirements. QFES operational procedures which document operational staff requirements in operational settings. Regular cleaning regimes have been implemented for appliances and operational workplaces. Emergency response procedures in place should a suspected or confirmed case of COVID-19 enter the workplace. QFES operational doctrine and infection control procedures. Access to QH COVID-19 testing facilities.	Moderate	Possible	Medium	9	3	Continue to monitor Queensland Health, Public Service Commission and Workplace Health and Safety Queensland guidance and adjust control measures as required.  Mandatory COVID-19 vaccination policy for all QFES paid staff (except those with certified medical contraindications or exemption) who may be required to interact with other operational workers or members of the public will be required to receive their double dose of COVID-19 vaccine by a specified date and booster within one month of eligibility	All Deputy Commissioners	Commissioner	Open	Moderate	Possible	Medium
9	COVID-19 infection during meetings / interactions with partner agencies.	Transmission of COVID-19 to / from QFES staff and members of partner agencies.	Serious illness (including long term serious adverse health consequences even those who recover) and death in extreme circumstances for both / either QFES and / or partner agency personnel.	Increase in costs associated with workers compensation claims/premiums, injury management, absenteeism, reduced productivity, reduced organisational output, and depleted workforce.  Loss of confidence in QFES ability to maintain adequate infection control measures.	Major	Possible	High	12	Current COVID-19 physical distancing measures to be maintained.  Alternate meeting platforms utilised where appropriate such as MS Teams, Zoom.  Interagency operational plans have been developed, agreed and circulated.  State Pandemic Plan and Associated Annexes.  QFES Events Covid Safe plans.	Moderate	Possible	Medium	9	3	All QFES staff who come into contact with workers from other organisations will be required to comply with the mandatory COVID-19 vaccination policy to reduce the risk of transmission between QFES staff and others and possible subsequent transmission to members of other agencies or members of the public.	All Deputy Commissioners	Commissioner	Open	Moderate	Possible	Medium
10	COVID-19 infection from contractors, consultants, attending a QFES workplace.	Transmission of COVID-19 to / from QFES staff and contractors, consultants, vendors and third party providers during attendance at a QFES workplace.	Serious illness (including long term serious adverse health consequences even those who recover) and death in extreme circumstances for both / either QFES and / or contractors, consultants, vendors and third party providers.	Increase in costs associated with workers compensation claims/premiums, injury management, absenteeism, reduced productivity, reduced organisational output, and depleted workforce.  Loss of confidence in QFES ability to maintain adequate infection control measures.	Major	Possible	High	12	Entry into all QFES premises requires the use of the Qld Government Check In App.  Entry to QFES premises should be planned in advance to enable sanitisation before and after in accordance with COVID-19 precautions.  State Pandemic Plan and Associated Annexes.	Moderate	Possible	Medium	9	3	QFES requires all contractors, consultants who work for long periods in QFES facilities to comply with the mandatory COVID-19 vaccination policy, use of risk mitigation strategies such as minimise the time in QFES facilities, PPE, hand hygiene, physical distancing or alternate arrangements will need to be enacted to enable the provision of service.	All ELT members	Commissioner	Watch	Moderate	Unlikely	Medium

Risk					Inherent risk rating				Controls	Residual risk rating					Future controls		Accountability		Target risk rating		
Risk No.	Risk (what can go wrong?)	Description (how can it happen? / causes)	Consequences (Qualitative)	Consequences (Quantitative)	Consequence	Likelihood	Rating Value	Rating Score	Current Controls	Consequence	Likelihood	Rating Value	Rating Score	Rating Variance - effectiveness of controls	Future controls	Action owner (& due date)	Risk Owner	Status	Consequence	Likelihood	Rating Value
11	COVID-19 infection from visitors, union officials, regulators, family members or other members of the public attending a QFES workplace.	Transmission of COVID-19 to QFES staff resulting from visitors, family members or other members of the public attending the workplace. This may include people who cannot be vaccinated against COVID-19 at the present time such as children.	Serious illness (including long term serious adverse health consequences even those who recover) and death in extreme circumstances for QFES staff, family members or members of the public.	Increase in costs associated with workers compensation claims/premiums, injury management, absenteeism, reduced productivity, reduced organisational output, and depleted workforce.  Loss of confidence in QFES ability to maintain adequate infection control measures.	Major	Possible	High	12	Limit entry to all QFES occupied facilities and meet with members of the public outside of QFES occupied facilities in accordance with the QFES PPL.  Entry into all QFES premises requires the use of the Qld Government Check In App.  Where possible, physical distancing requirements are maintained, use of hand sanitiser.  Entry to QFES premises should be planned in advance to enable sanitisation before and after in accordance with COVID-19 precautions.  State Pandemic Plan and Associated Annexes.  QFES Events Covid Safe Plans.  Actively engage with union officials and regulators to explore ways in which visit on site is possible such as duration is minimised, use of PPE	Moderate	Possible	Medium	9	3	Undertake consultation and engagement with unions and officials and regulators and where possible consider alternate meeting arrangements should be explored where possible.  Union officials and regulators are not to be refused entry to QFES premises. QFES should actively work to implement measures where visit is possible such as visit duration is minimised, meeting via MS Teams (if the meeting is expected to be of a long duration)  QFES will continue to review the PPL content as it relates to the evolving nature of COVID-19 and visitors and members of the public access to QFES facilities	All ELT members	Commissioner	Open	Moderate	Unlikely	Medium
12	Staff members health worsen as a result of the COVID-19 vaccination.	QFES staff could have a contraindication to receiving the COVID-19 vaccination.	Serious injury or death in extreme circumstances.	Increase in costs associated with workers compensation claims/premiums, injury management, absenteeism, reduced productivity, reduced organisational output, and depleted workforce.	Moderate	Possible	Medium	9	QFES to follow QH CHO Directions and COVID-19 safety measures published on the QFES Gateway.  Continue to encourage staff to receive their COVID-19 vaccination.  Staff required to remain away from QFES workplaces when displaying symptoms of COVID-19 and to have a PCR test and isolate and await results.	Moderate	Possible	Medium	9		Staff with a QFES approved exemption and a medically registered contraindication will not be required to comply with the mandatory COVID-19 vaccination, but will need to comply with the exemption requirements to minimise the risk to the staff and others.	Assistant Commissioner QFES People	Commissioner	Open	Moderate	Unlikely	Medium
13	Staff with underlying medical conditions or vulnerabilities are exposed to COVID-19.	Transmission of COVID-19 to / from QFES staff.	Serious illness and/or death to QFES staff or the public resulting from transmission of COVID-19.	Increase in costs associated with workers compensation claims/premiums, injury management, absenteeism, reduced productivity, reduced organisational output, and depleted workforce.  Potential	Major	Possible	High	12	QFES to follow QH CHO Directions and COVID-19 safety measures published on the QFES Gateway.  All QFES staff can access surgical mask, hand sanitiser, surface spray / surface wipes.  QFES operational staff to access range of PPE as required by the operational context.  State Pandemic Plan and Associated Annexes.	Major	Possible	High	12		QFES will be required to identify on a case by case risk assessment basis via an approved exemption process and in consultation with QFES WHS / QFES medical advisor how the non-vaccinated worker can remain isolated from potential exposure to COVID-19 infection or transmission sources while in QFES premises. This may be impracticable with the intermingling of QFES service stream personnel, especially during operations.  Where the risk assessment deems the risk to be too high alternative duties must be considered.  In the event that suitable alternative duties cannot be identified or supported, personal leave or LWOP may be considered on a case by case basis.  If no alternative work arrangements are available, QFES will refer the matter to QFES People Directorate for further management.	Assistant Commissioner QFES People	Commissioner	Open	Major	Unlikely	Medium
14	Staff members psychological health could be impacted by the requirement to vaccinate.	QFES staff could have a strong religious objection to having the COVID-19 vaccination.	Short or long term mental health condition including anxiety, adjustment disorder or depression.	Increase in costs associated with workers compensation claims/premiums, injury management, absenteeism, reduced productivity, reduced organisational output, and depleted workforce.	Major	Possible	High	12	QFES to follow QH CHO Directions and COVID-19 safety measures published on the QFES Gateway.  QFES supports the Australian Government's rollout of COVID-19 vaccination.  Provision of QFES FESSN and other wellbeing resources.	Moderate	Likely	High	12		If a QFES staff refuses to be COVID-19 vaccinated in accordance with the Mandatory COVID-19 vaccination policy, the supervisor or manager should as a first step, ask the staff to explain their reasons for refusing the COVID-19 vaccination. QFES can ask the staff to provide evidence of the reason for their refusal.  If the staff gives a legitimate reason for not being COVID-19 vaccinated via an approved exemption, QFES will consider whether there are any other options available instead of the COVID-19 vaccination. This could be alternative work arrangements. This would require identifying duties that could be reasonably undertaken by "working from home", with no QFES duties that require attendance at QFES facilities or interaction with QFES staff or members of the public.  If no alternative work arrangements are available, and the staff member is unable or unwilling to utilise leave / LWOP, QFES will refer the matter to QFES People Directorate for advice to be provided back to local management.	Assistant Commissioner QFES People	Commissioner	Open	Moderate	Possible	Medium
15	Staff could refuse or be refused admittance to QFES facilities or other nominated places where COVID-19 vaccination is required.	QFES staff may not agree with COVID-19 vaccination requirements put in place.	QFES staff involved in verbal or physical altercations or sustain a psychological health condition as a result of stress, bullying or violence.	Increase in costs associated with workers compensation claims/premiums, injury management, absenteeism, reduced productivity, reduced organisational output, and depleted workforce.  Potential Common Law costs.	Major	Possible	High	12	If a QFES staff refuses to attend work because a co-worker isn't COVID-19 vaccinated QFES can direct them to attend work if the direction is lawful and reasonable. Whether a direction is lawful and reasonable depends on all the circumstance and advice from QFES People Directorate will be required before taking disciplinary action. This must be assessed on a case by case basis.  Code of Conduct for the Queensland Public Service and QFES Workforce Conduct Policy are in place and must be followed by all QFES staff at all times.  All instances of workplace bullying, harassment, discrimination, violence, or intimidation must be immediately reported to the supervisor and manager and must be addressed in a timely manner.  Any instance of physical assault of QFES staff must be reported to QPS.  Additional QFES resources are available such as Think, Say, Do.	Moderate	Possible	Medium	9	3	Implement the Prevention and response to workplace bullying procedure.  Implement the Prevention and response to aggression and violence in the workplace guide.	Assistant Commissioner QFES People	Commissioner	Open	Moderate	Possible	Medium

## CMT OPTIONS ANALYSIS – MANDATORY VACCINATION – V – NON-MANDATORY VACCINATION

Mandatory Vaccination		Non - Mandatory	
Advantages	Disadvantages	Advantages	Disadvantages
<ul style="list-style-type: none"><li>• Probable 100% coverage – reduced impact of illness in workforce</li><li>• Fully meets WH&amp;S obligations</li><li>• Provides the option to remove unvaccinated members from the workforce either on a permanent or temporary basis</li><li>• Enables QFES to protect members of the community</li><li>• Ensures service continuity, particularly in vulnerable communities</li><li>• Operational restrictions based on vaccination status will be removed</li><li>• QFES personnel do not further contribute to the public health emergency by infecting community members or becoming sick themselves</li><li>• Ability to fully use the Critical Essential Worker exemption</li></ul>	<ul style="list-style-type: none"><li>• Requires monitoring &amp; enforcement to be effective</li><li>• Extra resources will be required to operationalise direction (eg. exemptions processing)</li><li>• Some of our volunteers may leave reducing operational capacity</li><li>• Potential reputational harm and political pressure (dismissal of emergency service workers)</li><li>• Potential industrial or legal challenges</li></ul>	<ul style="list-style-type: none"><li>• No CQFES direction required</li><li>• No QFES members will be dismissed or suspended</li><li>• This approach can be managed within current resources</li><li>• A nuanced vaccination stance is fair and supports our risk based approach</li><li>• Limited prospect of litigation</li><li>• Aligns to current political posture regarding mandatory vaccination</li><li>• Utilises current control measures</li></ul>	<ul style="list-style-type: none"><li>• Reduces ability to meet WH&amp; S obligations</li><li>• QFES operations will be affected as those members who are unvaccinated will not be able to undertake their full range of duties, putting more strain on those QFES members who are vaccinated</li><li>• Unvaccinated members may infect other QFES members impacting operational capacity (they may also infect members of the Queensland community)</li><li>• Members who are infected may be able to claim it as workplace injury thereby affecting QFES workcover premium</li><li>• Increasing reliance on exemptions within CHO Directions to maintain service continuity.</li></ul>
<b>Viability:</b> – There is sufficient case law which supports this approach for paid workforce, untested for volunteers in Qld. Numerous public & private employers have imposed a mandate. QFES can be confident that it has done everything possible to protect its members and the Queensland community.		<b>Viability:</b> – This approach will generate little if any resistance from QFES members. There is exposure to WH & S liability. QFES will be reliant on current control measures, which were sufficient when no vaccine existed. This approach can be managed within current resource limitations.	
General Considerations			
<ul style="list-style-type: none"><li>➤ The current double vaccination rate in Queensland is 88.7% (as at 18 January 2022). It is likely 90% or higher double dose vaccination (for 16 years and older) will be achieved in the next couple of weeks, potentially reducing the need for mandatory vaccination. The organisational gain from this approach is outweighed by the resources required to execute this strategy. Our limited resources may achieve greater effect focussing on other strategies to enable the health, safety and well-being of our people.</li><li>➤ Significant reductions in exposure are achieved at 90% vaccination rate. This is particularly important given greatest risk for QFES exists within RFS (Central &amp; South Western Region in the 35-54 years age bracket). Likely to have ‘pockets’ of lower or higher than 90% coverage.</li><li>➤ Vaccination is a key element of the Queensland Government approach (We are advertising this on our vehicles, so community expectation maybe that our members are vaccinated). It lessens the impact of the virus on people, generally most will experience mild systems.</li><li>➤ QFES can continue to step out the mandate program such as applying it to paid employees and exempting volunteers.</li><li>➤ To inform our position further a survey across the department could be conducted in an attempt to ‘baseline’ our vaccination level.</li></ul>			

**Commented [TJ2]:** We will not be able to use directive if we are not vaccinated

**Commented [TJ1]:** The statement should talk about use and comply with CHO Directive.

**Please note:** This document should be read in conjunction with the Departmental COVID-19 Pandemic Plan and relevant Regional/Directorate business continuity plans.

**Risk Event:** QFES could be unable to respond appropriately to emergency situations if COVID-19 case numbers increase when the Queensland borders open on 17<sup>th</sup> December 2021.

**Causes:**

- Opening of borders (National and International travel)
- Vaccines unable to prevent the contraction or spread of the virus
- Vaccination rates for QFES employees/volunteers is unknown
- Delta strain of virus is highly contagious
- Large numbers of people from hotspots seeking to enter Queensland

QFES supply and demand influences - 8 November 2021

Supply		
Resource supply factors November 2021 – March 2022	Outlook	Confidence
Staff and volunteer unavailability due to Covid-19	Moderate concern	High confidence
Fleet unable to be maintained sufficiently leading to disrupted service delivery	Moderate concern	Moderate confidence
ICT system interruption due to insufficient staff to maintain, fix etc	Moderate concern	Low confidence
Telecommunication interruption causing delay to service dispatch or disruption to C4I	Low concern	Moderate confidence
Specialist & functional roles in short supply due to small teams/areas of expertise	High concern	Moderate confidence



Demand		
Resource supply factors November 2021 – March 2022	Outlook	Confidence
Specialist & functional roles in high demand ( <i>disaster season dependent</i> )	Moderate concern	Moderate confidence
Disaster management (severe weather) operations require greater personnel than are available	Moderate concern	Low confidence
Disaster management (pandemic) operations continue to require activation for an extended period	High concern	High confidence
Unwanted alarm activations reduce as occupancy moves from many alarmed premises to domestic dwellings	Low concern	Low confidence



Pause to staff and volunteer training will prevent additional capacity and capability being developed	Moderate concern	High confidence
Moderate vaccination rates impacting on deployable numbers of QFES workforce	Moderate concern	High Confidence
Critical facility disruption due to COVID exposure site	Moderate concern	Moderate Confidence

Non-traditional calls for service (Border Control, Airport Marshalling, Vaccination testing clinics etc	Moderate concern	High confidence
State policy on vaccination restrictions for travel	Moderate Concern	High Confidence

### Relationship with Enterprise Risks

This risk links to the following Enterprise Risks:

Relevant ER	Inherent Risk Rating
ER03 - SERVICE DELIVERY	Very High
ER13 - WORKFORCE CAPABILITY & CAPACITY	High
ER14 - SUSTAINABILITY OF SERVICE DELIVERY	Very high

No.	Task <i>What needs to be delivered?</i>	Responsible Officer <i>Who will deliver it?</i>	Completion Date <i>When does it need to be delivered by?</i>	Completed or Variance
1.1	Operational impacts from loss of staff (operational and corporate staff) infections	SOC to request from Regions and Corporate areas)	Tuesday 9 November 2021	
1.2	Operational impacts demand above BAU (Border security, QAS assist, Severe weather season demand)	SOC to analyse what these tasks may be and demand on services)	Tuesday 9 November 2021	
1.3	Operational impacts for deployment of staff from one location to another considering LGA lockdowns, double vaccinated requirements for travel.	SOC to analyse what these tasks may be and demand on services)		
1.4	Comms to keep the workforce engaged and informed and encourage vaccinations	Troy Davies – Media)	Tuesday 9 November 2021	
1.5	Review existing risk assessments	Adam Green	Tuesday 9 November 2021	

1.6	Policy analysis			
1.7	Strategic Planning and direction analysis	CMT		
1.8	SOC to ROC interplay (operational support in times of worst-case scenario) – Conduct an exercise	SOC		
1.9	Air flow in priority locations (SOC / SDCC / Regional HQ's / ROC's)	WHS / Assets		
1.10	Review PPE (Mask stock and supply, cleaning products etc)	Uniforms and Logistics / Scientific		

### **Additional Considerations:**

Emerging issues for our consideration are:

1. We need to consider our posture at PPL levels and triggers based on the Government plan for borders at 70/80/90% of vaccination coverage and in consideration of the attached modelling of what transmission will look like at these levels of vaccination coverage  
[dpc7950-border-plan.pdf \(covid19.qld.gov.au\)](#)
2. Given that the Pandemic plan is now generic in posture, how do we deal with COVID specific issues?
  - a. This would be guided by our existing strategies
  - b. Each region had also previously modelled loss probability and the impacts this would have to service delivery
3. Have we got our supporting doctrine right? Gaps? Clarity?
  - a. There may be a need to archive existing information on the system (particularly if we are refining the plan and using the mechanism of BCP to guide operational response)
  - b. Are we implementing mandatory vaccination? If not, can we model/do we know how much of our workforce is unvaccinated?
4. rapid antigen testing have not been included it at this time due to its emerging nature – but this is fast evolving and we need to consider use of RATs.
  - a. Yes. This will assist in speeding up return to work strategies for those who may be exposed.
5. What tasks might QFES be asked to support going forward – borders, increased support for QAS, etc etc and implications for our service delivery ?