



Council Employee Supporting Emergency Control Agencies Policy

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| Policy Classification | Administration Policy |
| First Issued: | June 2014 |
| Next review date: | June 2025 |
| Version Number: | 4 |
| Applicable Legislation: | <i>Local Government Act 1999</i> <i>Work Health and Safety Act 2011 SA</i> |
| Related Policies or Documents: | Work Health & Safety WHS & RTW (Return to Work) Policy Workplace Return to work Procedure Kangaroo Island Incident Operations Manual Council Emergency Management Policy |
| Associated Forms: | Emergency Response Support Register Application Attachment 1 Emergency Release Form – Attachment 2 SAAS Volunteer Income Reimbursement form – Attachment 3 |
| Responsible Manager: | Director Corporate Services |
| Approved by Chief Executive Officer: | 12 February 2021 |

Kangaroo Island Council: Council Employee Supporting Emergency Control Agencies Policy

1. Preamble

- 1.1. The general function of a Council in an emergency situation is to manage its local area by implementing measures to support Control Agencies to secure and protect its community and assets from natural disasters and other hazards, operating within these emergencies is guided by council's risk management framework and council's incident operational arrangements for support of emergency control agencies.

2. Purpose

- 2.1. This Policy establishes Kangaroo Island Council's (KIC) position regarding employee support for local Emergency Control Agencies response operations.

This Policy sets out.

- a. Council's recognition of the contribution that the Emergency Services provide to the community through the allocation of \$5000 per annum under the 'Emergency Service Council Contribution Fund' at the commencement of each financial year.
- b. the terms by which Kangaroo Island Council Employees may be released to participate as Emergency Services respondents in emergency response situations.

3. Scope

- 3.1. The scope of this policy is in the management and requirements of employees that wish to be released to control agencies for the purpose of emergency management during normal work hours.
- 3.2. To support this policy Kangaroo Island Council will:
- Establish, maintain, and manage an "Emergency Control Agency Support Register".

4. Definitions

- 4.1. **CEO** means the Chief Executive Officer of the Kangaroo Island Council.
- 4.2. **Council** means the Elected Body.
- 4.3. **Kangaroo Island Council (KIC)** means the administration.
- 4.4. **Emergency Control Agency** means inclusive of the Country Fire Service (CFS), State Emergency Services (SES), SA Ambulance Service (SAAS) and Coastguard.
- 4.5. **Emergency Service Council Contribution Fund** means a fund created to financially support Kangaroo Island Council's employees who volunteer for an Emergency Service group.
- 4.6. **Employee** means an employee who performs work for the Council and is covered by the Enterprise Bargaining Agreement (EBA) or an Employee Agreement Contract.

4.7. **Executive Team** means Directors of Council.

4.8. **Manager** means a Council employee engaged in a supervisory and/or managerial position.

5. **Policy Statement**

5.1. **Policy Terms and Conditions**

5.1.1. Approval for the release of employees for Emergency Services leave is to be obtained from the CEO or a Director of Council.

5.2. **Release of Kangaroo Island Council Employees**

5.2.1. Support any employee who undertakes the process to be listed on the Emergency Response Support Register.

5.2.2. Not obligate any Employee to be listed on the Emergency Control Agency Support Register. Council employees will be invited to apply to undertake the process for inclusion on to the Emergency Control Agency Support Register by filling out the Emergency Control Agency Support Register form (Attachment 1).

5.2.3. Maintain the Employee's normal hours of pay during the initial day of call out and subsequent days, should they be required, to be paid from the 'Emergency Service Council Contribution Fund'.

5.2.4. When the annual fund commitment is exhausted, either;

- a. any increase in the annual fund allocation is at CEO or Council discretion;
- OR
- b. volunteers will have to use personal toil or personal leave.

5.2.5. Maintain the integrity of the Emergency Control Agency Support Register.

5.2.6. Require the Employee to sign an "Emergency Release from Employment" form (Attachment 2) indicating the individual's availability to participate, where required as an Emergency Service Volunteer, and immediately release the Employee from Council employment when an emergency event that requires their support occurs;

5.2.7. Not prejudice any employment conditions of the individual whilst acting as an Emergency Service Volunteer within and relating to the emergency circumstances; and

5.2.8. Reserve the right not to release employees registered on the Emergency Register during an emergency response operation should extenuating circumstances, (as determined by the CEO), apply, or exist.

5.3. **Employee Responsibilities**

5.3.1. Apply to be included on Council's Emergency Control Agency Support Register through filling out the Emergency Control Agency Support Register form (attachment 1) and be approved to be included on the register.

5.3.2. Employees who are Emergency Control Agency Volunteers who are willing to respond to a callout request from the Emergency Control Agency during their work hours and who have applied to be on the Emergency Control Agency

Support Register, will need to seek permission from their Supervisor to leave the workplace. They will not be financially penalised for attending emergencies that are within the Council area during normal work hours, but there will be no payment in addition to their normal wage / salary.

- 5.3.3. Employees must sign an “Emergency Release from Employment” form (attachment 2) prior to attending an incident. If this is not possible the employee must contact their direct Supervisor or, if their Supervisor is unavailable, an appropriate alternative manager by phone.
- 5.3.4. The rest period after performing overtime in Council’s Enterprise Bargaining Agreement E.7 will be enforced when an employee is called outside of normal work hours to attend to an emergency (as part of their membership to the volunteer group) to ensure they are fit to perform their regular duties the following day.
- 5.3.5. The payment of the rest period hours that the employee is not at work will be taken from the ‘Emergency Service Council Contribution Fund’. The Employee must also notify their immediate Supervisor and/or Manager of the time they would have commenced regular duties and when they will be eligible to return to work (post 10-hour break).
- 5.3.6. Similarly, if an employee has responded to a request to attend an emergency and their involvement extends, or is likely to extend, past the time they are due to commence work, the employee shall notify their immediate Supervisor and/or Manager of the situation. The payment of the hours that the employee is not at work will be taken from the ‘Emergency Service Council Contribution Fund’.

5.4. SA Ambulance Volunteers

- 5.4.1. SA Ambulance Service provides reimbursement for volunteers who are called to attend an emergency. They are required to complete a SAAS Volunteer Income Reimbursement form (Attachment 3) and submit 2 (two) copies with their time sheet to payroll. As per the Rest Period after performing overtime in Council’s Enterprise Bargaining Agreement E.7 the payment for rest hours will also be invoiced to SA Ambulance Service and a form will need to be submitted.

6. Liability Clause

- 6.1.1. For the purpose of this policy; it is acknowledged that Kangaroo Island Council is a Member of the Local Government Association Mutual Liability Scheme and entitled to the civil liability cover pursuant to Section 142 of the *Local Government Act (1999)* and risk management support as set out in the Local Government Association Mutual Liability Scheme Rules.
- 6.1.2. Further, it is acknowledged that the Emergency Services volunteer groups, via the Minister for Emergency Services of the South Australian State Government are entitled to the benefits of the South Australian Government Insurance and Risk Management arrangements administered by the South Australian Government Captive Insurance Corporation (“SAICORP”) in respect of the operations under this policy.

7. Availability & Grievances

This policy is available for inspection at the Council office at 43 Dauncey Street, Kingscote during ordinary business hours. It is also available for inspection, download or printing, free of charge, from Council's website www.kangarooisland.sa.gov.au

Any grievances in relation to this policy or its application should be forwarded in writing addressed to the Chief Executive Officer, Kangaroo Island Council, PO Box 121, Kingscote SA 5223

SIGNED:



Chief Executive Officer

Date 12 February 2021

History:

| Date Reviewed: | Version: | Reason for Amendment: |
|------------------|-----------|---|
| June 2014 | Version 1 | Adopted by Council on 11 June 2014. Minute Book Reference 10.12 |
| 18 July 2015 | Version 2 | Annual review and addition of new Council logo. |
| 13 June 2017 | Version 3 | Periodic Review Ref# C184:2017 |
| 12 February 2021 | Version 4 | Periodic Review and template update |

Attachment 1

EMERGENCY CONTROL AGENCY SUPPORT REGISTER APPLICATION FORM

| REGISTERED PERSON 20#/# | | |
|---|--------|--|
| Name (Mr/Mrs/Miss/Ms) | | |
| Council (Employer/Host) | | |
| Council Role & Title (including Volunteer Duties) | | |
| Council Address | | |
| Council Contact Details | | |
| Council email | | |
| Personal Contact Details | | |
| Residential Address | | |
| Telephone (AH) | | |
| Mobile | | |
| Current Qualifications & Skills | | |
| Plant - Qualifications/Accreditation | | |
| To support the following Control Agency (ie CFS/SES) | | |
| Relevant Induction & Training by Control Agency has taken place | Y N | Training completed: • • • • |
| <p align="center">Council Authorisation</p> <p>Approved/Denied for the following activity:</p> <p>.....</p> <p>.....</p> <p>Signed (Council Employee/Volunteer): DATE.....</p> <p>Signed (Council CEO):..... DATE.....</p> | | |

Attachment 2

EMERGENCY RELEASE FROM EMPLOYMENT FORM

Request Date: _____ Time: _____

I, have been requested to provide support for
.....(describe emergency).

I am a Emergency Services Volunteer of (Control Agency)/ employee of Kangaroo Island Council and possess the relevant qualifications and skills.

I am listed on the Council's Emergency Response Support Register in accordance with Council's policies and procedures relevant to the Council Employee Supporting Emergency Control Agencies Policy.

I am available to participate as requested and ask that I be released from Council employment to do so.

Signed: _____(Employee)

Approved

Refused (please circle)

Date: _____ Time: _____

Signed: _____ or
Supervisor

Signed: _____
CEO, Kangaroo Island Council
Or Director

| Government of South Australia | | SA Ambulance Service | | SAAS VOLUNTEER INCOME REIMBURSEMENT FORM | | | | | | | |
|--|-------------|---|----------------------|---|-----------------------------|--|--|-----------------|----------------------------------|-------------------------|--|
| For reimbursment of lost wages or payment of labour expenses for self employed volunteers | | | | | | | | | | | |
| Volunteer name: | | | | | | ID Number: | | | Employer / contractor name: | Kangaroo Island Council | |
| Volunteer residential Address: | | | | | | CERT II: Student | | | ABN: | | |
| | | | | | | CERT IV: Student | | | Bank account name: | | |
| | | | | | | | | | Bank BSB: | Account Number: | |
| Volunteer email address: | | | | | | | | | Processed Date (office use only) | | |
| | | | | | | | | | | | |
| DATE of case or conference attended | Case Number | Pre approved meeting or conference attended | Start / Finish times | Total hours away from work | Paid hourly rate (gross) | Lost wages expense incurred Tax invoice must be attached | Self employed labour expense incurred Tax invoice must be attached | Office use only | | | |
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| | | | | | | | | | | | |
| TOTAL CLAIMABLE \$ | | | | | | \$0.00 | \$0.00 | | | | |
| GL CODES | | | | | | 23509 | 23509 | | | | |
| COST CENTRE | | | | | | | | | | | |
| TOTAL REIMBURSEMENT: \$ | | | | | | | \$0.00 | | | | |
| I hereby certify that the expenses detailed in this claim were necessarily incurred by me in the conduct of Ambulance Service business and that the expenses have not been previously claimed. | | | | | | | | | | | |
| Claimants Signature | | | | Date | Authorisation Signature | | | | Date | | |
| | | | | | | | | | | | |
| VTL or ASO Signature | | | | Date | 2nd Authorisation Signature | | | | Date | | |
| | | | | | | | | | | | |