<Name of Community or Local Recovery Coordination Group> Operational Recovery Plan

**Emergency:** <include the type and location>

**Date of Emergency:**

Template note: The following template should be used as a guide only to assist local governments to prepare their own specific Local Operational Recovery Plan. Headings and suggested inclusions may or may not be relevant to your community or area.

Please add or amend content to reflect your local arrangements. Content requiring amendment (labeled in angle brackets <>) will highlight as a form field when selected allowing you to enter in new content. Please delete text styled as a Template Note. This information is provided to help draft your plan.

A simple way to retain the accessibility of this document is to use the Microsoft Word document styles provided. Using document styles will allow you to include a table of contents and ensure the text can be read by assistive technology. If required, you can modify the fonts through the Microsoft Word style panel to reflect your own style guidelines. Once this document is amended, it may require further remediation to meet all accessibility and inclusion standards. [Learn more about Microsoft Word accessibility.](https://support.microsoft.com/en-us/office/make-your-word-documents-accessible-to-people-with-disabilities-d9bf3683-87ac-47ea-b91a-78dcacb3c66d#PickTab=Windows)

# Section 1 Introduction

<insert introduction content>

Template note/Suggested content:

* Background on the nature of the emergency or incident.
* Aim or purpose of the plan.
* Authority for plan.

# Section 2 Assessment of Recovery Requirements

<insert section content>

Template note/Suggested content:

* Details of loss and damage to residential, commercial and industrial buildings, transport, essential services (including State and Local Government infrastructure) which may be sourced from the Impact Statement.
* Estimates of costs of damage.
* Temporary accommodation requirements (includes details of evacuation centres).
* Additional personnel requirements (general and specialist).
* Human services (personal and psychological support) requirements.
* Other health issues (such as fatigue management).

# Section 3 Organisational Aspects

<insert section content>

Template note/Suggested content:

* Details the composition, structure and reporting lines of the groups/committees and subcommittees set up to manage the recovery process.
* Details the inter-agency relationships and responsibilities.
* Details the roles, key tasks and responsibilities of the various groups/committees and those appointed to various positions including the Local Recovery Coordinator.

# Section 4 Operational Aspects

<insert section content>

Template note/Suggested content:

* Details resources available and required.
* Redevelopment Plans (includes mitigation proposals).
* Reconstruction restoration programme and priorities, (including estimated timeframes).
* Include programs and strategies of government agencies to restore essential services and policies for mitigation against future emergencies.
* Includes the local government program for community services restoration.
* Financial arrangements (assistance programs such as the Disaster Recovery Funding Arrangements Western Australia, insurance, Lord Mayor’s Distress Relief Fund, public appeals and donations).
* Public information dissemination.

# Section 5 Administrative Arrangements

<insert section content>

Template note/Suggested content:

* Administration of recovery funding and other general financial issues.
* Public appeals policy and administration (including policies and strategies for office and living accommodation, furniture and equipment details for additional temporary personnel).

# Section 6 Conclusion

<insert section content>

Template note/Suggested content:

* Summarises goals, priorities and timetable of plan.
* It is recommended to show endorsement or approval from the Local Recovery Coordination Group. This could be shown with a signature from the Chair of the Local Recovery Coordination Group.

**Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chair, Local Recovery Coordination Group

**Date**: