



Community Support Hub Guide



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Disclaimer

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Glossary (key terms)

Bushfire Safer Place (BSP) – A pre-designated geographic area of relative safety from a bushfire (not a specific building). BSPs are part of formal arrangements and are not the same as a CSH.

Bushfire Last Resort Refuge (BLRR) – A space or building intended to provide a minimum level of protection from radiant heat and direct flame contact as a last resort during a bushfire. It does not guarantee survival and is not the same as a CSH.

Community-led – Planned, governed and operated by local people and community organisations, with decisions made locally. Councils and agencies may support (e.g., information, connections, guidance) without directing day-to-day operations.

Community organisation (Volunteers Protection Act) – For the purposes of the *Volunteers Protection Act 2001 (SA)*, an incorporated organisation that directs or coordinates community work by volunteers.

Community Support Hub (CSH) / hub – A local place and mechanism that helps people prepare for, and recover from, local emergencies and disruptions in their area. CSHs are community-led and do not replace formal emergency centres.

Community Support Hub management team – The local volunteer committee or group responsible for governance and year-round planning of the CSH, and for enabling the hub to operate when it opens.

Emergency Relief Centre (ERC) – A state-led centre established (when activated through formal arrangements) to provide short-term essential support services to affected people after an emergency (e.g., information, basic support, referrals, and in some circumstances grants and temporary shelter).

Emergency Relief Functional Support Group (ERFSG) – A functional group that coordinates participating agencies to deliver emergency relief services when requested/activated under South Australian arrangements.

Local Government Functional Support Group (LGFSG) – The mechanism through which councils coordinate and provide support to emergency management arrangements (e.g., local government capabilities, mutual aid, and coordination with other functional groups).

Recovery Centre – A centre established during recovery (as part of formal arrangements) to provide access to coordinated information, services and support from government and non-government organisations. Recovery Centres are not CSHs.

Hub team – Persons who has completed the CSH's (or partner organisation's) registration process and is authorised to undertake defined roles within the CSH.

Spontaneous volunteer – A person who offers help in response to a disruption or emergency without prior affiliation, registration, induction or training with the CSH or partner organisation.

Spontaneous volunteers should be registered, briefed and supervised before undertaking tasks.

Supported independence – A model where communities lead and make decisions locally, and councils/agencies support through information, advice, training, connections and resources—without taking operational control of the hub.

1.This Guide

Executive Summary: This Guide supports community-led Community Support Hubs (CSHs) to prepare for, and recover from, local emergencies by setting clear expectations, safety boundaries and practical planning steps for communities, councils and partner organisations.

This Guide explains what a Community Support Hub (CSH) is, how communities can establish and operate one, and how councils or other organisations may support community-led arrangements without taking operational control.

The Guide has been informed by extensive collaboration within the emergency management and local government sectors, practical insights from councils and communities, and prior research on community resilience methodologies which informed the 2021 edition of the Guide.

Model examples, case studies and practical resources are included to help communities translate the guidance into local planning, governance and operating arrangements.

What this Guide does and does not do: It provides guidance, examples and templates for locally led planning; it does not mandate CSHs, replace formal emergency arrangements, or make councils responsible for operating hubs.

Using this Guide

Community

Community members and groups can use this Guide, alongside the **CSH Plan template**, to discuss local risks, define the hub's purpose and prepare practical arrangements before an emergency occurs.

Councils

Councils can use this Guide to enable safe, effective and community-led CSHs by:

- support conversations with community groups interested in establishing a CSH
- provide consistent advice on good practice, safety and risk management
- clarify how CSHs align with formal emergency management arrangements
- articulate the support that councils can and cannot provide

The Guide can be applied flexibly: councils may share it directly with community groups, adapt it into local templates or use it internally to provide consistent advice.

Supporting CSHs does not require councils to direct, manage or staff hubs; councils are best placed as enablers that provide information, connections and guidance within clear boundaries.

2.Introduction and context

A CSH is a community-led place and mechanism that helps people prepare for, and recover from, local emergencies and disruptions, with councils and other organisations supporting local action where appropriate.

A CSH should only open when the site is safe, accessible, outside current threat areas and able to be monitored as conditions change.

Community-led hubs in practice

Community-led hubs have emerged across Australia, the United Kingdom, New Zealand, Canada and the United States as trusted local places where people organise practical support, share information and maintain connection during emergencies and disruptions.

Experience shows these hubs work best when communities lead local action and councils or agencies support through information, communication pathways, safety advice, training, equipment or modest resources without directing day-to-day operations.

Focus on community-led arrangements

The Community Support Hub Guide 2026 replaces the 2021 edition. The previous guide covered CSH arrangements that could be initiated by councils or communities. Over the past five years, it has become clear that community-led hubs generate more community interest and achieve greater success. As a result, the new guide focuses specifically on models where the community takes the lead, with support from councils and other stakeholders.

Role of councils in enabling Community Support Hubs

Councils can have an important role in enabling safe, effective and sustainable CSHs, but this role will differ from council to council depending on local capability and competing responsibilities. To support community-led action without creating confusion or unrealistic expectations, councils should proactively consider—and clearly articulate—what support they can and cannot provide to CSHs.

This agreed level of support should be documented in the council's emergency management planning, response and recovery arrangements and shared with community as part of emergency preparedness discussions.

3. What is a Community Support Hub?

At a glance: This section defines CSHs, explains when they may operate, and clarifies what they can and cannot provide.

A CSH is a local place and mechanism that helps people prepare for, and recover from, local emergencies.

CSHs strengthen connections between individuals, community groups and services, councils, and emergency services. They help communities understand local risks, prepare for emergencies, and support each other when disruptions or emergencies occur.

They build on the natural way people come together and self-organise to support one another, recognising that some people may need support, but others will be ready and willing to help.

When communities plan together and build connections ahead of time, they recover faster and more effectively. They also maintain a sense of control, which is important for wellbeing and recovery after an emergency.

While governance and operational arrangements may differ, the best outcomes occur when CSHs are viewed as part of a broader resilience network that includes communities, councils, state agencies and non-government organisations, each contributing strengths, knowledge and resources.

The benefits of CSHs are well documented nationally and internationally, but they are not mandated in South Australia. The decision to establish a CSH is made locally by communities and varies depending on likely community impacts, CSH purpose, local strengths, capacity and resources.

When a Community Support Hub may operate

A CSH may operate where there is clear community need, the site is safe and accessible, and local risks can be monitored.

A CSH may open to support the community after a local emergency, such as storms, bushfire, flood, a major accident or collective trauma affecting the community.

CSHs are designed for short-term support while immediate needs are addressed, community action is organised and broader relief or recovery arrangements may be established.

What Community Support Hubs do

CSH activities that support **community preparedness** may include:

- increasing social connections within the community, local groups and services
- developing and maintaining links with the council and emergency services
- understanding community strengths that can be used to assist the community

- raising awareness about disaster risks, particularly through collaboration with emergency services and disaster preparedness agencies
- raising awareness about steps individuals and communities can take to reduce impacts
- planning for opening a CSH, including defining the CSH purpose, activities, volunteer roles and other practical requirements
- ongoing learning, knowledge sharing, and continuous improvement of CSH processes

CSH activities that support **impacted communities** may include:

- sharing emergency services' official warnings and advice
- providing practical assistance and support (e.g. social connection, refreshments, power, water and wi-fi)
- linking individuals' requests for basic support with available community resources
- working with local government and state agencies to convey community needs and capacity to cope with the impact
- providing impacted community members with information about available government services and supports
- contributing to recovery processes
- supporting other impacted communities

What a Community Support Hub is not

A CSH should not become, operate as, or be perceived as a formal emergency management facility or service delivery centre such as an Emergency Relief Centre, Recovery Centre, Bushfire Safer Place or Bushfire Last Resort Refuge.

A CSH does not provide:

- government grants or case management
- overnight accommodation
- medical facilities
- professional advice (although it may refer people to community services).

Pre-planning matters

CSH planning should occur before an emergency so communities, councils and partners understand the hub's purpose, limits, roles and safety arrangements.

For community

- identifies and mobilises community strengths and networks
- facilitates understanding of diversity, vulnerability, and inclusive planning
- builds volunteer confidence by clarifying and mitigating CSH management risks

For councils

- builds trust with the community before an emergency happens
- makes council's role clear during different phases of an emergency
- supports council's own planning process by understanding local community capability
- identifies existing social networks, skills and strengths in the community and enables these networks to deliver collective action

For the emergency management sector

- supports the implementation of state and national shared-responsibility principles and community-coordinated recovery responses
- improves community awareness of local hazards and practical preparedness
- establishes communication channels to share emergency messaging within communities, broadening the reach of accurate and trusted information
- facilitates early coordination with councils and community partners.

Given time pressures, disaster impacts and the chaotic nature of post-disaster environments, it may not be possible to observe all checks and balances applied in non-emergency situations. However, standard volunteer management processes must remain in place and are not negated by operating in a relief or recovery environment, including workplace health and safety, insurance, effective induction, briefing and debriefing, fatigue management and psychosocial supports (AIDR, 2018). Similarly, if road closures occur, Hub volunteers must comply and should not expect alternative provisions.

Benefits of Community Support Hubs

When planned well, CSHs can:

- address immediate needs through community-level support while formal services are mobilising
- match people's basic support needs with local skills, capabilities and resources
- strengthen council's understanding of priority needs and emerging issues by maintaining strong, two-way communication with the community
- enable information to be shared about available services and supports
- amplify emergency services messaging to support consistent communication
- provide a structured approach to community-led volunteering, including spontaneous volunteers
- support a coordinated, community-led approach that may assist a smoother transition into state relief and recovery, where relevant.

4. Community Support Hub structures

At a glance: This section explains why CSH structures should be flexible, locally designed and supported without transferring operational control to councils or agencies.

There is no single CSH model; each hub should be shaped by local risks, community strengths, available venues, volunteer capacity and the support councils or partners can realistically provide.

Some hubs may provide basic information, connection and refreshments, while others may have more developed arrangements for coordination, resources and community preparedness.

This Guide takes a flexible approach and includes case studies to illustrate a variety of practical applications.

CSHs are strongest when they operate under a supported-independence approach: communities lead decisions and action, while councils and other organisations enable capability, coordination and sustainability.

Supported independence as the preferred approach

Under a supported-independence approach:

- community groups decide how the hub operates
- support is grounded in trusted local relationships
- councils and other organisations create conditions for safe and confident community action, including information, advice, connections and practical support, without controlling day-to-day activities.

This approach works well because it:

- enables faster and more flexible responses to local needs
- encourages strong community participation and ownership, and
- supports responses that are locally relevant and trusted.

Supported independence does not mean operating alone or without boundaries; CSHs work best when they:

- clearly define and communicate what the hub can and cannot provide
- remain aware of formal emergency arrangements, and
- collaborate and coordinate appropriately with councils and emergency services.

5. Formal emergency arrangements and role boundaries

At a glance: This section explains how CSHs complement formal emergency arrangements and why clear boundaries with emergency relief and recovery services are essential.

CSHs complement formal emergency arrangements by providing local, community-based support, while emergency services are responsible for emergency management as described in the State Emergency Management Plan.

State government agencies can assist communities to re-establish essential services, manage waste, rebuild properties, and provide information on financial assistance. State government also seeks to support community recovery.

CSHs do not replace or become formal emergency management centres or places. Their role should be understood alongside Emergency Relief Centres, Recovery Centres, Bushfire Safer Places and Bushfire Last Resort Refuges.

The decision whether to open a CSH should consider what relief and recovery services are already in place and ensure coordination and two-way communication is in place to avoid duplicating services or confusing community members.

Bushfire Safer Places

A Bushfire Safer Place is a pre-designated geographic area of relative safety from a bushfire, located in metropolitan Adelaide or a regional centre. It may be used as a place for people to stay, or to relocate to for those who have decided to leave high-risk locations early on a high fire risk day.

Bushfire Safer Places are suitable for use during bad fire weather or during bushfire. They are built up areas that have:

- lots of buildings that can provide protection from radiant heat
- roads that provide fuel breaks and multiple access points
- dispersed vegetation, such as short grass and maintained landscaping, that makes the spread of fire more difficult.

Bushfire Safer Places don't provide the community with specific venues (or services) to relocate to, rather they provide an area of relative safety.

Visit the [CFS website](#) for more information and to find a [Bushfire Safer Place](#).

Bushfire Last Resort Refuge

A Bushfire Last Resort Refuge is the last choice location that provides a place of relative safety from a bushfire. It is a space or building that provides a minimum level of protection from the immediate life-threatening effects of radiant heat and direct flame contact in a bushfire.

It is an area intended to provide a place of relative safety during a bushfire but does not guarantee the survival of those who assemble there.

Visit the [CFS website](#) for more information and to find a [Last Resort Refuge](#).

Emergency Relief Centres

The state government may open an Emergency Relief Centre (ERC) to provide short-term essential support services to affected communities after an emergency, including:

- a safe location
- practical advice and psychosocial support for individuals, families and communities
- food and water
- basic first aid (supported by SA Ambulance or St John)
- financial assistance through grants
- temporary accommodation and short-term shelter
- referral to relief and recovery services

Once requested by the Control Agency (e.g., CFS or SES), the decision to open an ERC depends on an event's scale and type, and the state's ability to resource relief responses. SA Housing Trust is the Lead Agency for Emergency Relief Functional Support Group (ERFSG), who is responsible for establishing and managing ERCs.

Participating agencies of ERFSG include the Australian Red Cross, Foodbank SA, Lions Club of Australia, Rotary International, Save the Children and Community Legal Centre (SA) Inc. These agencies can be requested to provide support.

Where an ERC is not open, or community members are unable or reluctant to attend, a CSH may provide much-needed local support.

The state's emergency relief function may also provide some relief services where an ERC is not open, based on community needs.

Community concerns about emergency relief needs and activities should be directed to the Control Agency's hotline or via their council.

If a CSH venue is required for activation as an ERC, the ERC will take precedence, and the CSH will either close or transition to support the ERC operations as appropriate.

Recovery Centres

State government may establish a Recovery Centre for more significant events to support community and provide a place to access a range of government services.

The decision to transition from an ERC to a Recovery Centre is a process between the Control Agency, Coordinating Agency, State Recovery and other key stakeholders including councils within impacted areas.

Particularly in the early stages of recovery, a CSH may work alongside state or locally-led recovery arrangements.

The recovery arrangements for events in South Australia are outlined in the [State Recovery Framework, South Australia](#).

Council-led community support programs

To support their communities at times of increased risk, councils may opt to extend or broaden normal programs. The provision by councils of such services broadly aligns with the 'Functions of a council' under the *Local Government Act 1999*^[2] and can support community disaster resilience and long-term community wellbeing.

Such programming may include:

- extended hours and refreshments at air-conditioned venues during extreme heat or cold event
- provision of community information regarding government recovery services
- seeking community funding in response to community impacts

These programs can work alongside CSHs. Coordination is required to minimise duplication and enable clear community communication regarding where services are offered.

Communication across arrangements

Clear, consistent two-way communication between the CSH, community, council and relevant agencies helps people understand what support is available, where it is offered and when needs should be referred elsewhere.

Detailed communication guidance is provided in the Operational guidance section, including managing expectations, sharing trusted information and maintaining clear referral pathways.

6. Opening, monitoring and closing a Community Support Hub

At a glance: This section provides a practical decision framework for opening, monitoring and closing a CSH based on community need, safety and local capacity.

Community Support Hubs may open when there is a clear local need, it is safe to do so, and there is capacity to provide meaningful support.

Individuals are encouraged to follow their personal emergency plan before providing or gaining community-based support.

The decision to open, monitor or close a CSH should be based on community need, safety, role clarity and available capacity.

A CSH may open when local support is needed and:

- formal arrangements have not yet activated or do not meet the specific local need
- the community is temporarily isolated from external support or essential services
- safe, practical support can be provided without duplicating or confusing formal relief and recovery arrangements.

Note: where an ERC is not opened, supporting agencies such as Australian Red Cross, Volunteering SA & NT, and St Vincent de Paul Society may be activated to support community needs.

Opening criteria

Opening and closing criteria should be agreed before an emergency and applied consistently during an event.

When a disruption or emergency occurs, the decision-making process in Figure 1 and the supporting text can help the Hub team apply these criteria consistently.

1. Does the community require assistance which the CSH can provide?

A CSH should open when there is a community need that the CSH can support. For example, to open during an extended power outage a CSH would need a secondary power source.

Key considerations include:

- who is likely to attend
- what their likely needs are
- whether the CSH can assist

2. Is additional support required beyond state-led arrangements?

Where state arrangements are in place, consider whether the community needs additional support that a CSH can provide. The council can assist a CSH management team in understanding what state arrangements are in place and how to complement efforts.

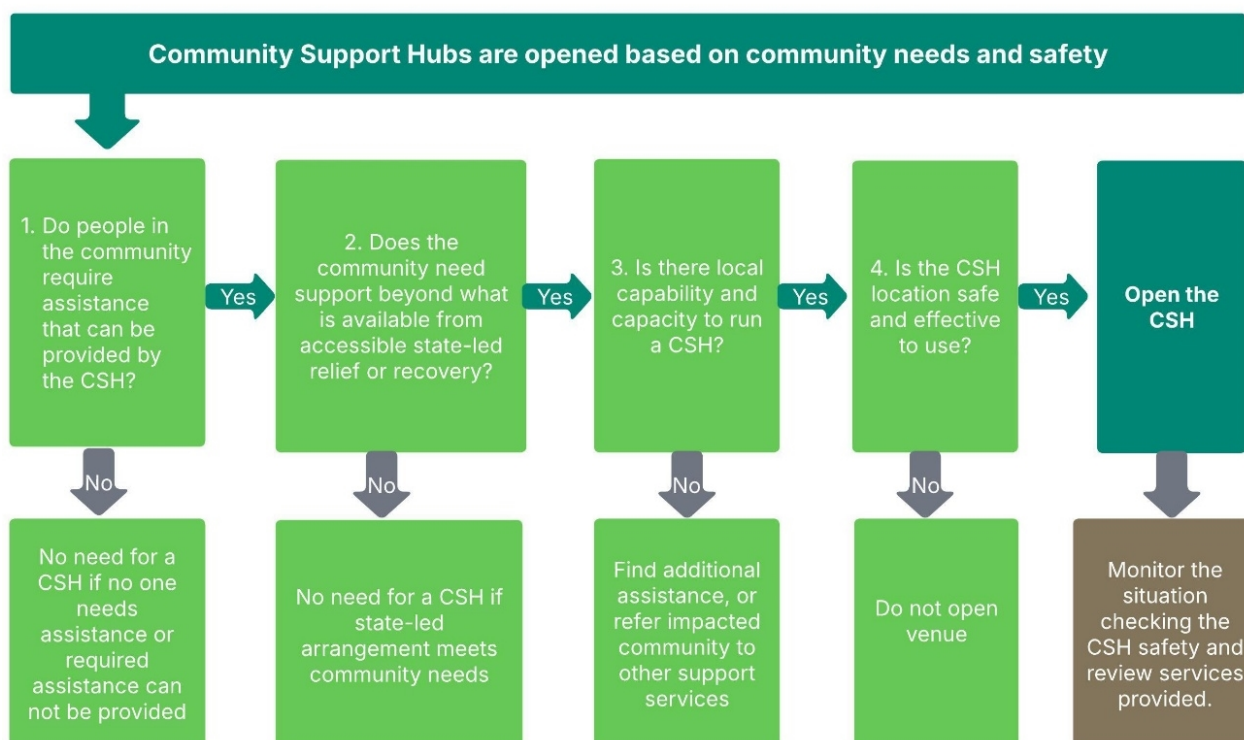


Figure 1: When to open a Community Support Hub (adapted from Wellington Region Emergency Management Office, <https://www.wremo.nz/about-us/initiatives/hubs/>).

3. Is there local capacity and capability to open and operate a CSH?

The Hub team's capacity and capability to open the CSH should be assessed before opening. For example, if members of the Hub team have been directly affected by an emergency, there may be a decision not to open.

Members of the Hub team should have the opportunity to consider how their knowledge and skills can best assist, while working within defined roles.

If there are gaps in volunteer capacity or capability, a CSH can reduce the range of services provided.

4. Is it safe to open?

A CSH should only open when it is safe to do so. When making this decision, the CSH management team should consider:

- **formal emergency warnings and directions**, and
- **local site-specific hazards** identified during planning.

For bushfires, storms or floods (at a minimum), **do not open**:

- if the CSH building cannot be accessed safely, e.g. road closures or site safety hazards
- if the CSH building location is within a 'Watch and Act' or 'Emergency Warning' area
- on days of forecast Catastrophic Fire Danger Rating for the CSH location

These are **minimum safety thresholds** and do not replace local risk assessments.

For events such as extreme weather, extended power outages or water shortages, the CSH may open based on its purpose and consideration of local risks.

The CSH management team should consider emergency service response activities, such as staging areas or base camps, ensure CSH activation does not disrupt those activities, and follow directions from emergency service personnel.

5. Monitor the situation

Information can be sourced from the Control Agency and Bureau of Meteorology for warnings, updates and general situational awareness.

Once open, members of the Hub team must closely monitor any hazards and where possible maintain communication with council.

Closing a Community Support Hub

Determining when and how a CSH will close is influenced by community support needs, the internal capacity to continue operating, and the availability of other resources coming into the community (including the potential to transition to an ERC or Recovery Centre).

When the CSH closes, the Hub team can assist by sharing information and knowledge with council or state agencies when an ERC or Recovery Centre is opened.

Community expectations should be managed by communicating how long a CSH may operate and the conditions under which it is likely to close.

7. Governance, roles and support

At a glance: This section sets out the governance, role clarity and enabling support needed for a CSH to operate safely and sustainably.

A local volunteer group or committee is typically formed to establish and manage a CSH, with additional volunteers supporting its activities.

Governance

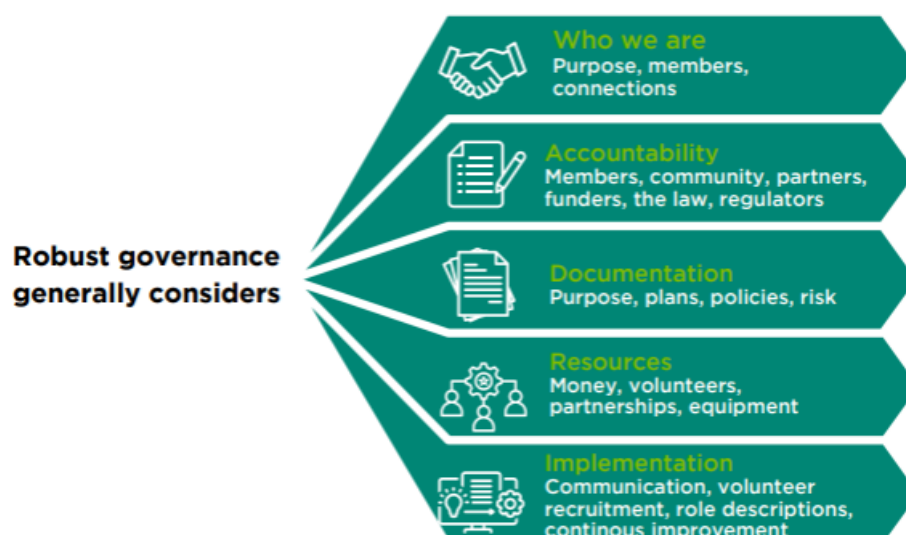
Robust governance protects volunteers, strengthens accountability and gives stakeholders confidence that the CSH has a clear purpose, decision-making process, role structure and risk controls.

Governance will differ by community, but it should match the CSH's purpose, involve the right parties and align with relevant laws, policies, leases, insurance and partner expectations.

Robust governance requires clear decision-making, accurate records, financial transparency, risk management and appropriate insurance or auspice arrangements.

Where funding or donations are involved, the CSH should operate through an appropriate legal entity, such as an incorporated community organisation or auspice arrangement.

Those managing CSHs should preferably work with established community organisations, such as hall committees, community centres or progress associations, that can support the CSH by using their governance mechanisms or assisting the CSH to develop its own governance arrangements.



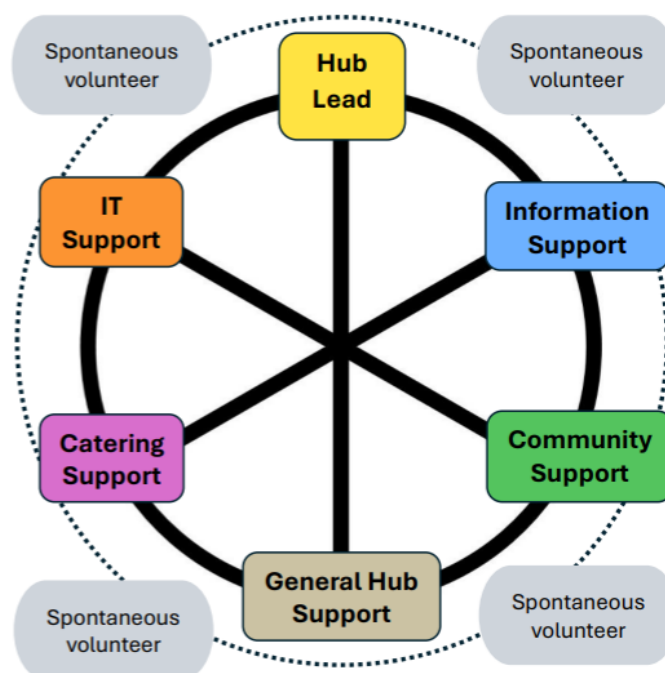
CSH structure and roles

Table 1 distinguishes governance, operational and spontaneous volunteer roles so Hub teams can adapt responsibilities to their local scope and capacity.

Volunteer roles should match the CSH's purpose and scale; not all roles will be required, and some volunteers may perform more than one role.

Table 1: CSH roles

Types of CSH roles		
Group	Role	High-level responsibilities
CSH management team	Establishes and governs the CSH	- Sets governance, purpose and operating boundaries (CSH Plan and procedures) - Builds partnerships (venue owner, council and key local services) - Facilitates disaster preparedness activities Role requirements: volunteer for a community organisation; basic governance/risk awareness; completes agreed training/induction
Hub team	Operates the CSH to support the local community	- Determines when to open and runs the hub - Communicates clear, consistent messages and role boundaries to the community - Registers, briefs and supervises spontaneous volunteers (where used) Role requirements: registered volunteer; understands hub purpose/limits; completes induction/basic training
Spontaneous volunteers	Provides surge support under Hub team direction	- Supports agreed low-medium risk tasks under supervision - Follows safety, privacy and code-of-conduct expectations - Assists with set-up, logistics and basic support as directed Role requirements: registers on arrival; receives briefing/induction; works with a registered volunteer



The Hub Lead role should be filled first, with other roles allocated according to the services being offered, available skills and local risk controls.

Table 2: Roles within the Hub team.

Role	Service	Comment on resources, capability and capacity
Hub Lead	Oversees CSH site management and coordination to ensure its purpose is being met and that it runs safely and efficiently.	Leadership skills Connections with community, local organisations and all levels of government.
Information Support	Responsible for gathering and verifying information before sharing it with Hub volunteers, the community, and key stakeholders.	Awareness of misinformation and the need to amplify official emergency services messages.
Community Support	Aims to ensure community members receive appropriate support, helping things run smoothly and effectively until additional support arrives. It serves as the main contact for spontaneous volunteers.	Community development skills and/or those with experience in providing care and comfort.
General Hub Support	Assists the Hub team. This role is suitable for those volunteers with a general awareness of Hub activities.	Skills in teamwork and supporting community.
Catering Support	Organises light refreshments at the CSH and makes sure food is handled safely.	Skills in food safety and handling.
IT Support	Responsible for information technology and telecommunications at the Hub. They can provide basic support to community members.	Skills in IT and familiarity with venue systems.

Role	Service	Comment on resources, capability and capacity
First Aid Officer	Provide basic first aid.	Must have first aid training.
Child Safe Person	Provide child-safe environments within the CSH and act as a specific point of contact for children at risk who attend the hub.	Must have child-safe environment training.

For more information, refer to the **Role Cards** in the CSH template.

How councils and agencies can support CSHs

Councils and agencies can support CSHs by enabling community-led action, including through:

- practical advice on good practice, safety and risk, including factsheets and templates
- sharing information to support CSH planning and community preparedness
- facilitating two-way communication with emergency response, relief and recovery personnel
- facilitating networking and collaboration opportunities with other CSHs or community resilience organisations
- in some cases, supplying resources such as equipment, training or small amounts of funding.

Supporting CSHs may align with existing council functions such as community development, grants programs, asset and facility management, emergency management planning, and wellbeing or heat response initiatives. Embedding CSH support into existing council processes helps normalise community-led preparedness and improves sustainability beyond individual emergencies.

CSHs do not require councils or agencies to support day-to-day operations. The most effective arrangements are those where institutions act as enablers, creating conditions for safe community action.

8.Planning and operating a CSH

At a glance: This section translates the CSH concept into practical planning, operating procedures and risk controls that can be adapted to local conditions.

Although each CSH will look different, most progress through five practical stages that can be revisited as local relationships, risks and capacity change:

- **Explore the idea** – Community discussions identify local risks, strengths and interest in a CSH
- **Define purpose and boundaries** – The community clarifies what the CSH will and will not do
- **Plan for safety and governance** – Roles, decision-making, risk and insurance are considered and documented
- **Build capability** – Connections are formed, volunteers identified, and basic resources or training accessed
- **Be ready to open** – The CSH is prepared to open when it is safe and there is a clear community need

CSHs develop these elements over time as relationships, confidence and capability grow.

Planning before an emergency

CSHs are most successful when they are planned and established ahead of any disruption or emergency, rather than created for the first time during an event.

Planning is an investment that requires time and effort in advance. The value of this planning is realised when a local disruption or emergency occurs.

Communities that have planned their CSH are better placed to:

- provide support appropriate to local needs and capacity
- open safely and confidently
- coordinate with other supporting services
- respond in a timely and coordinated way.

Running a CSH can involve challenges and risks, particularly during stressful or rapidly changing situations. Many of these risks can be anticipated and managed during the planning process, reducing pressure on volunteers, improving safety, and supporting more sustainable community action.

CSHs generally need to work within existing constraints (for example, venue limitations, volunteer capability, or the capacity of councils and agencies to provide support). CSHs should initially focus on services that meet likely local needs and match their capability and connections, supported by strong planning and governance.

Considering these factors helps ensure the CSH responds to genuine community need, operates within its capacity and manages expectations. Effective planning can enable the CSH to complement other supports and focus on enabling communities to support one another when it matters most.

Key planning areas and actions for a CSH

Key planning areas and example actions that the CSH management team should consider when developing a plan are outlined in Table 2. These actions can be completed with partnering community organisations and support from council or other government organisations.

These requirements are reflected in the model example and supported by the **CSH Plan template**.

Table 3: Key planning areas

Planning area	Key planning actions
Governance and risk management	Establish clear governance arrangements, decision-making processes, and risk management measures. Consider local site-specific safety risks that may affect whether it is safe to open, remain open, or close the hub. Clarify roles, responsibilities, insurance considerations, and how safety will be considered when the CSH is open. Align with council or partner expectations while maintaining community autonomy and flexibility.
Purpose and scope of the CSH	Define the purpose of the CSH, including when the hub will open. Ensure the purpose aligns with community needs, strengths and capacity, is clearly communicated to manage expectations, and aligns with emergency management arrangements. Broadly share the CSH purpose and scope.
Hub location	Identify familiar, trusted local spaces that could be used for a CSH. Determine who owns the venue, such as council or community, and document facility and use arrangements. Consider venue capacity, car parking, kitchen facilities, access, and other specifics such as secondary power sources and satellite telecommunications (which may be added to the venue to enable the CSH). Consider the broader community context of the site and any other uses, including emergency response, relief or recovery. Where a location is used for multiple purposes, document the arrangements.
Community and government connections	Build and maintain connections with local community groups, services, councils and relevant agencies. Identify how information and support will flow between the stakeholders.

Planning area	Key planning actions
Inclusion, comfort and safety	Plan how the CSH will be inclusive, welcoming and safe. Consider accessibility, cultural safety, quiet spaces, child-friendly areas, and support for people with additional needs.
Services offered	Decide which services the CSH may offer (e.g. information sharing, social connection, basic comfort, facilitating needs and wants amongst neighbours) and what services will not be provided. Ensure services are realistic and sustainable. Service offering should be communicated to the community to help manage community expectations.
Volunteering	Identify clear, simple volunteer roles, support arrangements and supervision. Consider how spontaneous volunteers can be included.
Information and communication	Plan for two-way communication with the community, relevant state agencies and council. Establish how trusted information will be gathered and shared. Use clear, plain language messaging about the CSH purpose, location, timing and boundaries. There may be a need to provide multilingual and literacy-level formats and to acknowledge specific user needs. Have clear pathways for referral or escalation when needs exceed the CSH's role.
Operational procedures	Define the decision-making process for opening and closing the CSH and align these with site safety considerations, community need, and capacity to operate. Establish provisions for volunteer briefing and induction during CSH operation.
Exercise	CSHs can exercise their arrangements during the planning phase and run regular exercises thereafter. Learnings from exercises can be used to update plans.

Careful planning helps balance support with sustainability, ensuring the CSH complements existing services, strengthens community capability, and remains realistic and fit for purpose.

A CSH should not over-service the community, or a segment of the community, particularly if it could result in:

- a higher resource requirement of service delivery (e.g., volunteer hours)
- a reduction in individual self-reliance or resilience
- increased expectations that cannot be sustained
- reduced offerings from formal emergency support services

Key elements

Community communication

Communication should explain when the CSH may open, what it can and cannot provide, how to access official warnings and where to seek support beyond the hub.

- This is a community-led support hub, not an ERC or Recovery Centre.
- We provide [list local services] and do not provide grants, case management, medical care or accommodation.
- For official warnings and directions, follow emergency services advice; if it is not safe, the hub will close
- If you need help beyond what we can provide, we can help you connect to the right service
- Please be patient: services and opening hours may change as the situation evolves and as volunteers and resources are available

Risk management and volunteer safeguards

Risk management should be built into planning, governance and daily operations, including site safety, volunteer protection, donations, financial controls and escalation pathways.

Volunteer management risks

Spontaneous volunteers can add surge capacity, but only where registration, induction, supervision, insurance and role boundaries are in place.

Table 4: *Spontaneous volunteer organisational and individual risks*

Risk Area	Risk to Organisation	Risk to Volunteer
Safety & Injury	Increased likelihood of accidents due to volunteers lacking training; organisation may be held responsible for unsafe deployment.	Higher risk of injury because environments may be hazardous and unfamiliar.
Liability & Insurance	Legal exposure if volunteers are not covered under insurance or act outside defined roles; administrative burden to manage coverage.	May not be insured for injuries or accidents during volunteering activities if not formally registered or properly inducted.
Operational Efficiency	Uncoordinated arrivals overwhelm registered volunteers, slow operations, and distract from critical tasks; increased demand for supervision.	Frustration or confusion due to unclear tasking or long waiting periods, potentially leading to disengagement or a lack of satisfaction.
Role Suitability	Mismatch between tasks and volunteer capabilities; risk of inappropriate or unsafe allocation of duties.	Volunteers may be given tasks beyond their skills or physical capacity, leading to stress, fatigue, or mistakes.

Risk Area	Risk to Organisation	Risk to Volunteer
Psychological Impact	Potential for vicarious trauma incidents among volunteers can create additional duty-of-care responsibilities.	Exposure to traumatic scenes can cause distress, shock, or longer-term mental health impacts.
Information Security & Privacy	Increased risk of breaches if volunteers handle sensitive information without training.	Volunteers may unintentionally share private information due to lack of awareness of protocols.
Reputational Risk	Volunteer misconduct or errors may reflect poorly on the organisation.	Being associated with a poorly coordinated operation may affect volunteer confidence or willingness to help in future.
Legal Compliance	Difficulty meeting legal obligations for WHS, screening, and safeguarding under emergency pressure.	Volunteers may unknowingly breach legal requirements (e.g., working with vulnerable groups) due to limited oversight.

These risks can be managed through agreed planning controls and operating practices.

Protecting volunteers

The [*Volunteers Protection Act, 2001 \(SA\)*](#) (the Act) provides some protection for volunteers doing community work, from being sued for damage, loss or injury they may have caused to others during their volunteer work.

This protection is from personal liability but doesn't cover personal injury to volunteers or compulsory third-party motor vehicle accident claims. CSH management teams are encouraged to read the Act, with the following summary provided.

Under the Act, a volunteer doing 'community work' for a 'community organisation' is not liable for any damage, loss or injury they cause due to an act or omission done or made in good faith and without recklessness (with some exceptions).

Community work includes protecting or promoting the common interests of the community generally or a particular section of the community.

To be a 'community organisation' under the Act, the organisation must:

- direct or co-ordinate the carrying out of community work by volunteers
- be incorporated – this could be as a community organisation under the *Associations Incorporation Act 1985 (SA)*, or as a co-operative, or as a company

Importantly, there are exceptions to the protection from liability, including:

- where the volunteer acted outside the scope of the activities authorised by the community organisation
- where the volunteer acted contrary to instructions given by the organisation
- defamation

If a third party suffers loss or injury arising from volunteer work, any liability that would otherwise rest with the volunteer generally rests with the community organisation instead. Appropriate insurance and clear authorised activities and instructions are therefore important.

CSHs rely on volunteers who may also be personally impacted by the same emergency or disruption. CSHs should not assume volunteer capacity is unlimited or indefinitely sustainable, and should plan for CSHs to operate for short, defined periods alongside—not instead of—formal relief and recovery arrangements.

Insurance

Relevant types of insurance are provided in Table 5.

Table 5: *Types of insurance and liability*

Type of insurance and liability	Purpose	Relevance to volunteers
Public Liability Insurance	Covers the organisation's legal liability to pay compensation for third-party personal injury and/or property damage arising out of the organisation's activities.	- May relate to claims arising from a volunteer's acts or omissions while performing authorised activities for the organisation. - Relevant where volunteers interact with members of the public, manage facilities, or distribute goods/services that could lead to third-party injury or property damage. - Generally applies where the volunteer is acting within the scope of their approved role and the organisation's activities; it does not usually cover injury to the volunteer.
Volunteer Personal Accident Insurance	Provides specified benefits to volunteers for accidental injury (and, in some policies, death) arising out of volunteer duties, subject to the policy terms, conditions and exclusions.	- May cover injury sustained while volunteering and, where specified in the policy, while travelling directly to and from approved duties. - Volunteers are not usually covered by workers compensation; benefits under personal accident cover are typically fixed/limited and payable in accordance with the policy schedule, definitions, conditions and exclusions.

If the CSH intends to accommodate spontaneous volunteers, insurance should be checked and potentially amended to ensure they are covered within the definition of a 'volunteer'.

CSH activities and volunteers may be covered under an organisation's insurance policies, subject to the policy wording, schedule, definitions, conditions and exclusions.

Insurance policies should be reviewed to confirm CSH activities are within the scope of the insured's operations and that volunteers (including spontaneous volunteers, if used) fall within

the policy definition of “volunteer/voluntary worker” (or similar) while performing authorised duties for the organisation. Where cover is unclear or excluded, changes may be required (e.g. an endorsement, policy variation/extension, or separate cover). A suitably qualified insurance broker or insurer can advise on the appropriate approach.

Where used, an endorsement (or similar policy amendment) is intended to document the insurer’s agreement to extend and/or clarify cover. For example, by confirming whether spontaneous volunteers are included, and any conditions that apply (such as registration, induction/briefing, supervision, and working within defined roles), and any applicable limits, exclusions or excesses.

The CSH management team (or the entity responsible for the CSH) should consider whether other covers are required and appropriate for its operations and assets (for example, management liability/association liability for office bearers and governance risks, and property and contents cover for buildings and equipment).

Spontaneous volunteers

A spontaneous volunteer offers help during or after an event without prior affiliation, registration, induction or training with the CSH or partner organisation.

When the CSH opens, spontaneous volunteers should be registered, briefed, supervised, allocated suitable low-to-medium risk tasks and given a way to provide feedback.

Tasks requiring specialist training, checks or unsupervised judgement should not be allocated to spontaneous volunteers.

Table 6 provides a traffic-light guide outlining the relative risks associated with various roles.

Table 6: Traffic-light guidance for spontaneous volunteer roles (source: aligned with the Australian Institute for Disaster Resilience, 2018, Planning for Spontaneous Volunteers Handbook).

Category	What this means	Examples of tasks
Low Risk	Tasks are low risk, occur inside the CSH, and can be easily supervised. These tasks allow community participation while keeping safety, insurance, and coordination risks low.	- welcome people at the CSH - assist with sign-in or registration - make tea/coffee and set up refreshment areas - set up tables, chairs, and signage - basic administrative tasks - unpack supplies
Medium Risk	Tasks involve higher interaction, physical effort, or judgement. These tasks may be appropriate only if extra controls and closer supervision are in place.	- assist with catering (food handling awareness) - help manage queues or crowd flow - share information (not advice-giving) - light manual handling of equipment or supplies - assist with wayfinding in the CSH

Category	What this means	Examples of tasks
Not suitable	Tasks are high risk. Most of the tasks are outside the scope of Hub team members unless they have been specifically trained, with appropriate clearances and operating within their defined role. These tasks should not be allocated to spontaneous volunteers.	Registered volunteers may: • provide psychological first aid • off-site or unsupervised tasks • work directly with children or people more at risk Hub team members (either registered or spontaneous) should not: • provide medical or health advice • handle medications or personal health information • undertake high-risk manual tasks or clean-up work • transport community members

Facility management

The operation of a CSH building needs to be planned and managed.

Checklist A below could be tailored for a specific CSH3.

Checklist A – Management of facilities
☐ Electricity, water and communications connected, including contingencies for outages ☐ Site security, with keys and security measures understood ☐ Accessibility for everyone and adequate vehicle parking ☐ Adequate heating, cooling and airflow ☐ Adequate toilet and washing facilities ☐ Safe and appropriate spaces for children and people with special needs ☐ Appropriate accommodation for animals (e.g. shelter, shade, water, food, fodder and safe spaces), where relevant

The CSH plan template documents available facilities, with required operational arrangements needing to be discussed and documented as needed.

Hub resource kit

CSHs are advised to have a resource kit containing a printed CSH plan, contact information, signage, maps, basic supplies and a UHF radio that can be accessed during power or communications outages.

Food and water

Light refreshments may be provided at a CSH with hygienic food handling measures required to maintain public safety and sanitation.

Where the disruption or emergency results in food or water risks, council's Environmental Health Officer may be able to provide advice.

Although well intended, perishable food donated from the community may not meet public health standards. If necessary, clear communication to the community should be made to minimise food wastage and manage community expectations.

Donated goods and services

CSHs should generally avoid directly accepting or encouraging donations of material goods because they can quickly become overwhelming and lead to large quantities of items that cannot be used and need to be disposed of. If CSHs choose to do this, clear guidance should be provided to the community about what items are needed and acceptable.

A CSH may choose to coordinate needs and offers for assistance, including donated goods. This requires matching local-level assistance between community members. This service may be particularly relevant for a community that has been isolated from government services or other essential services and would aim to ensure that immediate needs are met.

Those wishing to donate could be guided to contribute financially through relevant donation points. This assists an affected community with decision-making and provides ownership of their relief and recovery.

The [St Vincent de Paul Society](#) is responsible for the management of donated goods in emergencies where a community need has been defined by the ERFSG and may be able to support a CSH.

Self-care

Members of the Hub team and those responsible for them should actively participate in self-care. When a community experiences trauma and is overwhelmed or stressed, volunteers also experience stress and need mechanisms to personally process and manage the situation. Hub volunteers need sufficient breaks and should support each other and seek outside assistance as necessary.

Australian Red Cross (2020) provides psychological first aid training, with the approach guided by three basic sets of actions – LOOK, LISTEN and LINK (Figure 2).

These action principles provide guidance for how to view and safely determine who requires assistance (LOOK) in order to understand the needs of affected people (LISTEN) and link them with the information and practical support they need (LINK).

LOOK  ... refers to the safety of responders and identifying and prioritising who is most in need of support. Responders gather information on what has happened and is happening, and assess: • who needs help • safety and security risks • physical injuries • immediate basic and practical needs • emotional reactions.	LISTEN  ... refers to how responders communicate with people in distress from the moment they approach and start to interact with them Responders must consider how they: • approach someone • introduce themselves • pay attention and listen actively • accept others' feelings • calm the person in distress • ask about needs and concerns • help find solutions to their immediate needs and problems	LINK  ... has practical outcomes in terms of the responder giving information and helping people attend to basic needs and access the resources they need to cope with their situation. Responders support people to: • access information • connect with loved ones and social support • tackle practical problems • access services and other help
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Figure 2: Basic steps of psychological first aid (adapted from *Psychological First Aid: Supporting people affected by disaster in Australia* (Australian Red Cross 2020)).

Fatigue management

Fatigue is a key safety and wellbeing risk for Hub volunteers, particularly where emergencies are prolonged or volunteers are also personally affected. Planning for fatigue early supports safer decision-making, reduces the risk of mistakes and helps sustain the CSH for as long as it is needed. For example:

- plan early for the possibility of a protracted emergency and roster people accordingly
- minimise shift lengths and ensure regular breaks, hydration and access to food
- rotate Hub volunteers out of high-demand roles and provide time away from the CSH (either at home or in lower-intensity tasks)
- look out for each other, use a buddy approach and encourage volunteers to speak up early if they are tired, distressed or unwell

Confidentiality and personal information

Effective records management is essential to safe, ethical and transparent CSH operation. Careful handling of personal and confidential information maintains trust, protects community members and volunteers, and supports effective coordination with councils and other organisations.

When a CSH is operating, limited personal information may be collected such as volunteer sign-in, coordination of assistance, or recording community needs. Only necessary and

relevant information should be collected and should only be used for the purpose for which it was gathered.

Personal and confidential information must be:

- treated with respect and sensitivity
- stored securely (whether in paper or electronic form)
- accessed only by those who need it to perform their role
- shared only where appropriate and lawful to do so

CSHs should avoid recording unnecessary detail about individuals' circumstances and should take particular care when information relates to health, vulnerability, or personal distress. Where information is shared with councils or other organisations to support response or recovery, this should occur through agreed channels and with appropriate discretion.

Clear records of key decisions and activities (such as a simple logbook) support accountability and learning, but records should always be proportionate to the scale and purpose of the CSH.

When records are no longer required, they should be disposed of securely.

Good records management helps ensure that CSHs protect privacy, support volunteers, and maintain community confidence while enabling practical, community-led support during emergencies and disruptions.

9. Adelaide Hills Council CSH Project

Adelaide Hills Council has developed practical guidance and templates to help communities plan, govern and operate community-led CSHs while council remains a supporter rather than operator.

The [guidance](#) includes:

- The **Purpose of CSHs**, to establish a shared understanding of what a CSH is and is not, and to manage expectations
- **Governance and Insurance**, supporting fit-for-purpose governance and risk management arrangements that protect volunteers and organisations
- **When to Open and Close**, providing needs-based guidance to support safe, informed decision-making
- **Building Community through Connections**, emphasising the importance of strong relationships and communication before emergencies occur
- a **CSH Plan Template**, enabling communities to document planning decisions in a clear, adaptable format
- **Roles and Responsibilities**, clarifying expectations, boundaries and support for people contributing within a CSH, including spontaneous volunteers.

Adelaide Hills Council takes an active role in building community capability to establish and operate CSHs. Working in partnership with Australian Red Cross, the council has supported communities through training opportunities, facilitated networking between CSH groups, and provided ongoing advice and practical support.

This approach builds confidence, reduces pressure on volunteers during emergencies and supports communities to lead local action safely.

10. South Australian case studies

Bridgewater Aldgate Community Support Hub

The Bridgewater Aldgate Community Support Hub (BACSH) serves as a local gathering place established to assist residents in preparing for, and managing, the impacts associated with bushfires and extended power outages.

Operating from the Village Well Aldgate, BACSH partners with The Hut Community Centre, a registered charity with more than 300 volunteers, to align purpose, governance and local support.

The Hub provides a suite of services, including amplifying official emergency warnings, practical assistance such as refreshments, power, water, satellite Wi-Fi, and refrigeration for medicines, and connecting requests for support with available resources. It enables information flow between affected residents, local government, and state agencies.

Managed by experienced local volunteers, the Hub builds resilience through preparedness workshops, clear documentation and links with other emerging hubs.

Charleston Emergency Response and Recovery Group

Charleston Emergency Response and Recovery Group (CERRG) was formed in 2020 by the Charleston Community Centre Inc. after the Cudlee Creek Bushfire exposed local preparedness gaps, including prolonged disruption to power, water and telecommunications.

The group established the Charleston Emergency Response and Recovery Centre as a trusted local site for community support following significant emergencies and disruptions.

CERRG members undertook Red Cross Community-Led Emergency Resilience workshops, which supported identifying people more at risk, likely emergency scenarios, and practical mitigation and response strategies. This planning process defined the purpose and scope of the CERR Centre as a locally led coordination point in the early days after an emergency.

CERRG secured grant funding to strengthen the Hall's capability as a CSH. Upgrades included air conditioning, a large backup generator, high-speed satellite internet and Wi-Fi, audiovisual systems, and fire protection infrastructure supported by rainwater tanks and pumping systems. This was delivered with strong local involvement, community working bees and collaboration with local CFS brigades, ensuring the site was fit-for-purpose and locally supported.

The CERR Centre may operate immediately after significant local events such as bushfire, flood, heatwave, or prolonged power outages (generally more than three continuous days).

Activation is communicated through social media, email networks, and the raising of a red flag at the Centre. When open, the Centre focuses on coordinating community needs and offers of

assistance, including skilled volunteers, equipment and financial donations. This coordination role is typically sustained by local volunteers for the first four to five days following an event, before broader government support is established.

The Charleston example shows how early planning, local leadership and targeted investment can help communities organise support and respond confidently when emergencies occur.

Nairne Community Support Hub

The Nairne CSH is a community-led initiative based at the Mount Barker Council-owned Nairne Soldiers Memorial Hall. Developed by the Nairne Resilience Group, it provides a safe, welcoming place for people to gather after a local emergency.

The group built its approach through community workshops and reflections on the Cudlee Creek fires, where extended disruption to power, water and telecommunications highlighted the value of a trusted local coordination point. The CSH's purpose and boundaries are that it only opens when safe and does not operate during an emergency. The group would stand down if state-led emergency relief arrangements were activated.

When the Hub opens, it focuses on practical, community-level support such as a place to sit, connect and debrief, light refreshments, phone charging and referrals to local services. A key function is amplifying official warnings and advice while maintaining a strong local liaison with council and local stakeholders.

The group has developed plans, role folders, a resource kit, site checks, volunteer briefings, rosters and simple records to support safe and proportionate operation.

The Nairne example shows how a CSH can strengthen community connection and provide early support after disruption, while staying aligned with formal emergency arrangements.

11. International examples

Case vignette 1: New Zealand — Community Emergency Hubs as a national network

New Zealand has a mature network of Community Emergency Hubs that are community-run and supported by regional emergency management guidance, role cards and public education materials.

The model emphasises local autonomy within a consistent network, allowing communities to open hubs when needed while supporting mobility, mutual aid and shared learning.

Case vignette 2: Canada — Climate and resilience hubs as distributed neighbourhood infrastructure

In Canada, community-led hubs are used as neighbourhood climate-resilience infrastructure for events such as extreme heat, flooding and wildfire smoke.

Municipal governments support hubs through information sharing, planning support and, in some cases, small grants, while avoiding operational control.

Key lessons include the value of neighbourhood networks, sustained investment in social infrastructure and ongoing shared learning between hubs.

Case vignette 3: United States — networks of resilience hubs outside formal shelters

In the United States, community-led resilience hubs often operate through neighbourhood organisations as familiar local spaces that complement, rather than replace, formal shelters or emergency centres.

Local governments typically support these networks by sharing public information, recognising hub roles and using community feedback to strengthen situational awareness.

12. Supporting Resources

Adelaide Hills Council website: [Community Support Hub Resource](#).

Animals

Australian Disaster Resilience Handbook Collection (2024). Handbook, Planning for Animals, https://www.aidr.org.au/media/11400/handbook_planning-for-animals_2025-1-28_v13_web.pdf

Primary Industries and Regions South Australia (2018) Guidelines for Planning for People with Assistance Animals in Emergencies.

https://www.dpc.sa.gov.au/_data/assets/pdf_file/0019/33319/Guidelines-for-Planning-for-People-with-Assistance-Animals-in-Emerg_FINA....pdf

Psychological First Aid

Red Cross (2020) Psychological First Aid: Supporting people affected by disaster in Australia.

A video explaining the principles of psychological first aid can be found at:

https://www.youtube.com/watch?v=kly45u9ml_A

Volunteers

Australian Disaster Resilience Handbook Collection. Handbook 12 – Communities Responding to Disasters: Planning for Spontaneous Volunteers.

<https://knowledge.aidr.org.au/resources/handbook-spontaneous-volunteers/>

Justice Connect, Managing spontaneous volunteers, <https://www.nfplaw.org.au/free-resources/disasters/people/spontaneous-volunteers>

Volunteering Australia, Risk Management Tool For Volunteer Involving Organisations

<https://www.ahc.sa.gov.au/assets/downloads/community/resilience-and-recovery/1377053059VAManagersrunningtherisk.pdf?v=1751518543>

People at Increased Risk in Emergencies

South Australian Council of Social Service and Australian Red Cross (2026) People at Increased Risk in Emergencies Framework for South Australia 2025-29,

https://www.dpc.sa.gov.au/_data/assets/pdf_file/0020/1218107/People-at-increased-risk-in-emergencies-framework-for-South-Australia-2025-2029.pdf

Australian Disaster Resilience Handbook Collection. Handbook 5 – Communicating With People with a Disability: National Guidelines for Emergency Managers.

<https://knowledge.aidr.org.au/media/1762/handbook-5-communicating-with-people-with-a-disability-kh-final.pdf>

Engaging with Indigenous Australia - exploring the conditions for effective relationships with Aboriginal and Torres Strait Islander communities.

<https://www.aihw.gov.au/reports/indigenous-australians/engaging-with-indigenous-australia-exploring-the-summary>