

# Yarram Early Learning Risk Management Policy

## Mandatory – Quality Area 2

### PURPOSE

This policy provides a framework for:

- The management of organisational risk for Yarram Early Learning Centre.

### POLICY STATEMENT

#### 1. VALUES

Yarram Early Learning is committed to:

- providing a safe environment for all children, staff and persons participating in programs at Yarram Early Learning
- Preventing any incident that would cause damage to the centres' reputation, sustainability, financial viability.
- Identify, evaluate and control risks to ensure as far as is reasonably practical, risks are reduced to an acceptable level or eliminated.

#### 2. SCOPE

This policy applies to the Approved Provider, Certified Supervisor, Nominated Supervisor, staff, students on placement, volunteers, parents/guardians, children and others attending the programs and activities of Yarram Early Learning.

#### 3. BACKGROUND AND LEGISLATION

The aim of risk management is to minimise losses and maximise opportunities.

The centre's risk management objectives are to:

- Integrate risk management practices into the culture of the centre.
- Promote and support best risk management practices throughout the centre.
- Equip staff and management with the knowledge and ability to identify, analyse and prioritise areas of risk to Council.
- Implement effective processes to reduce and or eliminate high level risk.
- Continuously improve risk assessment, monitoring and reporting standards.
- Allow for the effective allocation and use of resources.
- Manage appropriate cover and minimise costs associated with insurance and litigation.

#### Legislation and standards

Relevant legislation and standards include but are not limited to:

- *Education and Care Services National Law Act 2010*
- *Education and Care Services National Regulations 2011: Regulations 97, 98, 168(2)(e)*
- *National Quality Standard, Quality Area 2: Children's Health and Safety*
- Standard 2.3: Each child is protected
- Risk Management AS/NZS ISO 31000:2009
- *Occupational Health and Safety Act 2004*

#### 4. DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Certified Supervisor, Nominated Supervisor, Regulatory Authority etc. refer to the *General Definitions* section of this manual.

**Duty of care:** A common law concept that refers to the responsibilities of organisations to provide people with an adequate level of protection against harm and all reasonable foreseeable risk of injury.

**Emergency:** Includes any situation or event that poses an imminent or severe risk to the persons at the education and care service premises e.g. flood, fire or a situation that requires the service premises to be locked down (National Regulations, page 5).

**Emergency Management Plan (EMP):** A written set of instructions to assist the Approved Provider, Nominated Supervisor and staff to deal with incidents or situations that could pose a threat to life, health or property. *Emergency Management Plan Guidelines* and an *Emergency Management Plan* template are available on the DEECD website (refer to *Sources* below).

**Hazard:** A source or situation with a potential for harm in terms of human injury or ill health, damage to property, damage to the environment or a combination of these.

**Notifiable incident:** An incident involving workplace health and safety that is required by law to be reported to WorkSafe Victoria. Notification is required for incidents that result in death or serious injury/illness, or dangerous occurrences. For a complete list of incidents that must be reported to WorkSafe Victoria, refer to the *Guide to Incident Notification* on the WorkSafe Victoria website: [www.worksafe.vic.gov.au](http://www.worksafe.vic.gov.au)

**Risk management:** A structured approach to managing uncertainty related to a threat; a sequence of activities including the identification, assessment and prioritisation of risks followed by co-ordinated and economical application of resources to minimise, monitor and control the probability and/or impact of those risks.

**Risk Register:** A register of the potential risks to the organisation and an assessment of the level of each risk and what has been put in place to mitigate risks.

**Serious incident:** An incident resulting in the death of a child, or an injury, trauma or illness for which the attention of a registered medical practitioner, emergency services or hospital is sought or should have been sought. This also includes an incident in which a child appears to be missing, cannot be accounted for, is removed from the service in contravention of the regulations or is mistakenly locked in/out of the service premises (Regulation 12). A serious incident should be documented in an *Incident, Injury, Trauma and Illness Record* (sample form available on the ACECQA website) as soon as possible and within 24 hours of the incident. The Regulatory Authority (DEECD) must be notified within 24 hours of a serious incident occurring at the service (Regulation 176(2)(a)). Records are required to be retained for the periods specified in Regulation 183.

## 5. SOURCES AND RELATED POLICIES

### Sources

- VMIA Victorian Government Risk Management Framework  
<https://www.vmia.vic.gov.au/risk/victorian-government-risk-management-framework>

**All service policies address risk management.**

## PROCEDURES

### The Approved Provider is responsible for:

- Ensuring that the centre has a risk management framework in place that complies with the AS/NZS ISO 31000:2009.
- conducting a review of the risk register on an annual basis to identify risks that the service may encounter.
- ensuring that the emergency and evacuation procedures are rehearsed at least once every 3 months by all at the service (Regulation 97(3)(a)).
- conducting spot checks of documentation and practices to ensure all requirements of this policy are being complied with.
- notifying DEECD in writing within 24 hours of a serious incident (refer to *Definitions*).
- completing the Incident Record where required.
- notifying DEECD within 7 days of an incident that required the service to be closed, or a circumstance that posed a significant risk to the health, safety or wellbeing of a child attending the service (National Law: Section 174(2)(c); Regulations: 175(2)(b)&(c), 176) reporting notifiable incidents (refer to *Definitions*) in the workplace to WorkSafe Victoria.
- ensuring there are induction procedures in place to inform new staff, including casual or relief staff, of the risk register and the process for managing risk.
- Ensuring that processes are in place to ensure staff are following all policy directions and procedures to mitigate risk to the organisation.
- Ensure that Centre Policy is a standing agenda item for monthly Staff and monthly Committee meetings.

### The Certified Supervisor, Nominated Supervisor is responsible for:

- Integrating risk management practices into the culture of the organisation through discussion at team meetings, during supervision sessions with staff and in day to day activity.
- Ensuring staff are adequately briefed and trained for all their responsibilities.
- Updating the Risk Register.
- Receiving feedback on all centre Policies from new staff during induction / orientation.
- Advising parents / families of centre policies that are being reviewed in the centre newsletter.

### The Certified Supervisor, Nominated Supervisor and staff are responsible for:

- Reducing and eliminating risks to the organisation.
- Contributing items to the risk register.

### Parents/guardians are responsible for:

- being aware of the service's Risk Management policy and procedures and the service's *Risk Register*.
- Contributing items to the risk register.

### Volunteers and students, while at the service, are responsible for following this policy and its procedures.

## EVALUATION

In order to assess whether the values and purposes of the policy have been achieved, the Approved Provider will:

- review the policy to determine whether it adequately addresses a range of potential risks.
- regularly seek feedback from everyone affected by the policy regarding its effectiveness.
- assess the ability of the Certified Supervisor, Nominated Supervisor, staff, children and others to follow the policy and procedures.
- use information gained from spot checks and the Incident Record to inform proposed changes to this policy.
- revise the policy and procedures as part of the service's policy review cycle, or as required by legislation, research, policy and best practice.
- notify parents/guardians at least 14 days before making any change to this policy or its procedures.

## **ATTACHMENTS**

- Risk Register

## **AUTHORISATION**

This policy was adopted by the Yarram Early Learning Incorporated in October 2016.

**REVIEW DATE:** October 2017



