

Yarram Early Learning Risk Management Policy

Quality Area 2: Children's Health and Safety

PURPOSE

This policy provides a framework for the management of organisational risk for Yarram Early Learning Centre.

POLICY STATEMENT

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.

SCOPE

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

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 2.2 Each child is protected*
 - *Element 2.2.1 Supervision*
 - *Element 2.2.2 Incident and emergency management*
 - *Element 2.2.3 Child protection management*
- *Risk Management AS/NZS ISO 31000:2009*
- *Occupational Health and Safety Act 2004*

- *Occupational Health and Safety Regulations 2017*

DEFINITIONS

The terms defined in this section relate specifically to this policy. For commonly used terms e.g. Approved Provider, Nominated Supervisor, Responsible Person, 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 DET 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

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 (DET) 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.

SOURCES AND RELATED POLICIES

Sources

- VMIA Victorian Government Risk Management Framework
<https://www.vmia.vic.gov.au/risk/victorian-government-risk-management-framework>
- Risk Management AS/NZS ISO 31000:2009:
<https://www.iso.org/standard/43170.html>
- Work Safe Victoria: <https://www.worksafe.vic.gov.au/occupational-health-and-safety-act-and-regulations>
- National Quality Standards: <https://www.acecqa.gov.au/sites/default/files/2018-07/RevisedNQSHandoutA4.pdf>

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 DET in writing within 24 hours of a serious incident (refer to *Definitions*).
- completing the Incident Record where required.
- Notifying DET 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 Nominated Supervisor, Responsible Person and educators are 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.
- Reducing and eliminating risks to the organisation.
- Ensuring out of hours work is performed with a reasonable and safe approach, and staff are aware of their individual responsibilities and accountability when working before or after service hours including weekends (refer to OHS Policy).
- 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.

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

N/A

AUTHORISATION

This policy was adopted by the Yarram Early Learning Incorporated in November 2020

REVIEWED BY MANAGEMENT - November 2023

TO BE REVIEWED - 2024