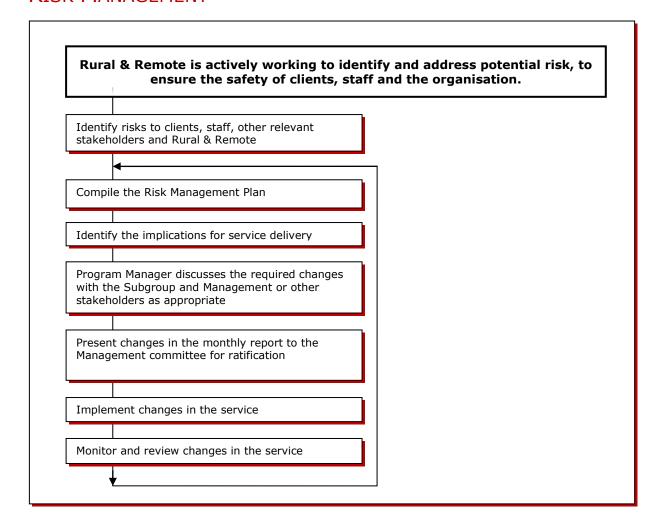
## **RISK MANAGEMENT**



#### **FORMS AND RECORDS**

Minutes of Meetings	Shared Drive
Risk Management Plan	Program Manager, Improvement Committee/Disability and Aged Services Subgroup/Cluster Team Leader Meetings
Central Risk Register	Program Manager and Shared Drive
Improvement Plan	Program Manager and Shared Drive

### 6.1 Risk Management Overview

R&R identifies and manages risks appropriate to our organisation based on a simplified application of the 'as nzs iso 31000 2018 risk management principles and guidelines'. Our risk management process is an ongoing process based on:

- Regular six monthly (or more often if required) reviews of previously identified risks to improve the strategies to minimise the risk and plans for responding to the risk if it occurs and
- The continuous identification of new risks and strategies to control the risks.

## 6.2 Risk Management and Continuous Improvement

R&R has integrated the risk management process into the continuous improvement process by:

 Including the identification and discussion of risks on the improvement agenda at all staff and subgroup meetings as well as developing, maintaining and reviewing risk management plans, and risk mitigation strategies.

# 6.3 Risk Management Plan

A Risk Management Plan is maintained and has three sections:

- Risks to the organisation such as loss of funding, inability to deliver funded outcomes within budget, Board of Management dysfunction, embezzlement of funds, lack of suitably qualified staff, extended staff illness, loss of data due to natural disasters
- Risks to staff such as a lack of suitably qualified staff, extended staff illness, staff injury due to WH&S risks, impacts of natural disasters and infection control risks
- Risks to clients such as home environment risks, falls risks, transport risks, risks from staff in the home, interruptions to service delivery including from natural disasters.

The Risk Management Plan includes the following information:

- Date identified: date the risk was identified
- The specific risk identified: these are the risks identified by Rural & Remote
- What can go wrong: details of what can go wrong in relation to the risk
- Consequence: the consequence of the risk using the risk rating matrix in 6.6 Risk Rating Matrix and below:
- 1= Insignificant
- o 2= Minor
- 3= Moderate
- o 4= Major
- 5= Catastrophic

- *Likelihood*: the likelihood of the risk occurring using the risk rating matrix in 6.6 Risk Rating Matrix and below:
- A: Almost Certain
- B: Likely
- o C: Possible
- o D: Unlikely
- E: Rare
- Risk Rating: the rating for each identified risk using the risk rating matrix in 6.6 Risk Rating Matrix and below:
- L = Low
- M = Moderate
- H = High
- E = Extreme
- Current controls to reduce risk: the controls or strategies in place to control or reduce the risk
- Date reviewed: Date the risk and controls were reviewed to identify improvements
- New controls: Additional controls necessary to control or reduce risk or changes to existing controls.

### 6.4 Identifying Risks

In identifying risks the Improvement Committee/Disability and Aged Services subgroup gives consideration to:

- Staff and client feedback
- Input from the annual planning day (see 1.14.2 Annual Planning Day)
- Staff or Client Accident Incident Reports
- Hazards and maintenance information
- Review of policies and procedures and processes
- Management knowledge and understanding of service delivery, work processes and operating environment.

Where appropriate, different staff groups are involved directly in the risk management process either through attendance at part of the Improvement Committee/Disability and Aged Services meeting or through an Improvement Committee member consulting directly with staff.

For example, in identifying in-home service delivery risks an improvement committee member may meet directly with in-home service delivery staff to discuss and identify potential risks and ways to control the risks and report these back to the Improvement Committee/Disability and Aged Services Subgroup.

## 6.5 Identifying Controls

Controls are strategies to manage risk balanced against the cost and inconvenience of the control. Common controls include:

- Staff training
- Provision of information
- The use of safe or safer equipment
- Changes in procedures or practices

- Balancing a client right to 'dignity of risk' during service provision with the organisational requirements to safely mitigate the identified risk (see Dignity of Risk statement 6.8)
- Personal checks including referee checks, driver's licences, motor vehicle registrations, professional registrations, criminal history checks
- The development of plans for dealing with risks that occur.

#### 6.5.1 RECORDING IMPROVEMENTS

Improvements implemented as a result of risk management reviews and planning are recorded in the <u>Improvement Plan</u>, as well as in the <u>Risk Management Plan</u>, to ensure that they are implemented, monitored and evaluated (see Section 5: Continuous Improvement).

#### 6.6 Risk Rating Matrix

The following Risk Rating Matrix is used to determine the status of each risk based on the likelihood, and consequences of the risk. The Improvement Committee/Disability and Aged Services Subgroup judges the likelihood and consequences of the risk to identify the rating. The Risk Rating Matrix is also included at the bottom of the Risk Management Plan. The Risk Management Plan is provided to the RCC Inc Management Committee for evaluation and feedback.

Figure 6.1: Risk Management Rating Matrix

	CONSEQUENCES						
LIKELIHOOD		Insignificant 1	Minor 2	Moderate 3	Major 4	Catastrophic 5	
	Almost Certain A	Medium	High	High	Extreme	Extreme	
	Likely B	Medium	Medium	High	High	Extreme	
	Possible C	Low	Medium	High	High	High	
	Unlikely D	Low	Low	Medium	Medium	High	
	Rare E	Low	Low	Medium	Medium	High	

## 6.7 Monitoring the Risk Management Process

Risk management processes and systems are regularly audited as part of the R&R audit program and staff, clients and other stakeholders are encouraged to provide ongoing feedback on issues and areas where improvements can be made (see <a href="Corporate Calendar">Corporate Calendar</a> and Section 5: Continuous Improvement).

## 6.8 Dignity of Risk Statement

Dignity of Risk refers to the right of clients to make their own informed decisions in relation to the care and services they receive, as well as their right to take risks.

R&R takes a balanced approach to managing risk and respecting client's rights by supporting their independence and self-determination through a sensitively managed conversation with all parties.

Where client choice may potentially be harmful to them, R&R will as the first response, assist the client to understand the risk and how it may be managed to enable them to live the way they choose. R&R has a firm commitment to explore solutions which are the least restrictive of client choice and independence.

In determining an acceptable level of 'dignity of risk', R&R will consider:

- Client choice
- Workplace Health and Safety considerations
- Potential impacts on others in the service environment
- · Legal ramifications where applicable
- · Organisational capacity to mitigate risk appropriately for all parties

All service delivery decisions involving an identified 'risk' will be clearly documented in the relevant client file and contain reference to all mitigation strategies. Staff involved in service delivery will be notified of any changes to the client support plan and supported to manage the situation appropriately. Regular reviews of the strategy will be conducted, and where significant changes are required, the changes will be included in the R&R Improvement Plan.

Where the organisation determines that a potential risk cannot be adequately mitigated, the reasons for the decision will be communicated to the client and alternative options negotiated.

### 6.9 Emergency Situation Protocols

An emergency in our service area is most likely to be a tropical cyclone, however bushfires, severe storms and flooding in some areas are also possible. These protocols also cover unforseen or unlikely events, such as earthquake or chemical spills.

When an adverse event seems likely, or a cyclone watch has been declared, the Program Manager will supply a list of current clients identified as vulnerable to the Police and Emergency Services. Permission to share personal information with the emergency services is obtained on entry to R&R, as is the DMS (disaster management survey).

The DMS asks whether clients will remain in their own homes or relocate; if they are on oxygen; have medication that requires refrigeration and have back up electricity (generator). A list of clients on oxygen is also supplied to the Ambulance service.

The Program Manager is a member of the local Ravenshoe Disaster Management Group. When an event is expected, local QPS staff coordinate all disaster planning and will organise a briefing.

The DMS list is maintained by the Program Manager with the aid of the Administration Assistant and contains the following information:

- Name
- Address
- Phone Number
- Whether the person will stay or relocate to another place during the event
- Whether the person is on oxygen and if they have back-up arrangements for their equipment
- Level of vulnerability of the person e.g. frail, lives alone, isolated and requires a check

Cluster Team Leaders have responsibility for contacting vulnerable clients in the identified adverse event area prior (to the event) to ensure they are prepared. Vulnerable clients who live alone will be prioritised.

Services will be cancelled the day before the event (where possible) to allow staff to make their own preparations at home.

Office staff will secure and prepare the office, fill all work cars with fuel (park in a safe area) and ensure all mobile phones are fully charged.

The Program Manager will be on call across the time of the adverse event.

The Program Manager will advise the Management Committee and all funding bodies/contract managers of the imminent adverse event via email and of all precautions taken. Daily updates are to be provided (if possible).

After the event, local support staff and cluster team leaders will check on their identified vulnerable clients as far as is possible and where safe to do so.

The QPS and SES will prioritise checking on the clients listed as vulnerable as soon as is practical.

Services will resume as soon as possible.

The December letter to clients will contain information about preparing for the summer season as well as useful phone numbers and community support information.