

Risk Management Policy and Procedure

1.0 Purpose

The purpose of this policy is to ensure that SilaCa Tasmania Pty Ltd adopts a proactive, consistent, and effective approach to identifying and managing risks across all areas of its operations, including both participant-specific and organisational risks. Effective risk management is essential for creating a safe, supportive environment for participants, staff, visitors, and stakeholders, while promoting informed decision-making, quality service delivery, and organisational integrity.

This policy also aims to:

- Foster a culture where risk awareness and prevention are integrated into everyday practices
- Incorporate risk management principles into planning, governance, and service delivery
- Support continuous improvement and organisational learning
- Encourage staff to view risk management as a positive, proactive process rather than a reactive measure

2.0 Scope

The policy applies to all staff involved in identifying, managing, and mitigating risks within SilaCa Tasmania Pty Ltd.

3.0 Policy

SilaCa Tasmania Pty Ltd is committed to maintaining a structured, transparent, and consistent approach to risk management that ensures participant safety, promotes service quality, and supports responsible governance. Our risk management practices align with the NDIS Practice Standards, including:

- Provider Governance and Operational Management
- Risk Management
- Provision of Supports

Risks will be addressed proactively and systematically, with a particular focus on safeguarding participants from harm, including risks related to abuse, neglect, exploitation, and unsafe service environments. Risk management will always balance duty of care with the dignity of risk, empowering participants to be involved in decisions about their own safety and wellbeing.

SilaCa Tasmania Pty Ltd will manage risks associated with:

- Inadequate governance structures or unclear roles

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- Insufficient policies, systems, or management plans
- Unsafe equipment, facilities, or physical environments
- Gaps in child safeguarding or participant consent processes
- Failure to respond to participant input or feedback
- Financial mismanagement or lack of sustainability
- Lack of appropriate insurance coverage
- Infrequent or ineffective monitoring and evaluation

To address these and other risks, SilaCa Tasmania Pty Ltd will:

- Maintain current and appropriate risk registers and mitigation plans
- Regularly assess and review organisational risks and controls
- Promote awareness and accountability through staff training
- Investigate incidents and near misses to inform continuous improvement
- Ensure staff involved in service delivery hold a valid NDIS Worker Screening clearance as a key safeguarding measure

All staff, regardless of role, share responsibility for managing risks and upholding safe, ethical, and effective practice across the organisation.

4.0 Definition

Term	Definition
Risk	The possibility of something occurring that will impact the service's objectives. Often risks involve constraints, failures, obstacles and losses that may arise in the future. Risk is measured in terms of consequences and if the risk will have a positive or negative impact.

5.0 Procedure

5.1 Identification

Figure 1. Risk identification process



Our organisation implements processes to manage risk, such as:

- analysing hazard data
- conducting risk assessments, including participant, environmental and equipment assessments
- review of health orders and current practice requirements
- reviewing incident/accident information
- seeking staff, participant, family and visitor feedback/complaints
- maintenance of log items
- ongoing review of all policies and procedures
- seeking input from staff during staff meetings
- seeking input from participants
- incorporating appropriate strategies identified during planning days, e.g. strategic and operational planning sessions
- incorporating new information obtained via education and training into the business
- conducting risk reviews against standards – NDIS, Child Safe
- conducting financial audits
- conducting internal and external audits

Risk assessments will be conducted in partnership with participants, families, and advocates, respecting their right to choice, dignity of risk, and self-determination. Identified risks will be documented in the support plan and reviewed regularly, especially when circumstances or service needs change.

Participants, families, and advocates will actively contribute to identifying service-related risks. Feedback from advocacy groups, complaints agencies, and the NDIS Commission will also inform risk management.

5.2 Planning

SilaCa Tasmania Pty Ltd has established and maintained a Risk Management Plan Register. The plan identifies and addresses the following:

- **Risks to SilaCa Tasmania Pty Ltd** - Including loss of funding, inability to deliver funded outcomes within budget, embezzlement of funds, lack of suitably qualified staff, extended staff illness, damage to reputation and relationships, changes in compliance requirements and eligibility, decisions by the Manager and loss of data due to natural disasters
- **Risks to staff** - Including lack of suitably qualified staff, extended staff illness, staff member injury due to WHS risks, changes in training and education compliance requirements, and impacts of natural disasters and infection
- **Risks to participants** - Including environmental, natural disasters, falls, transport, burns, choking, complex health needs, staff working in a participant's home, changes in the performance of activities, interruptions to service delivery and exit plans (transitioning services to another service provider)

The Risk Management Plan Register includes the following:

- details of the risk
- the date the risk was identified
- risk rating and the possible consequence/s of the risk
- actions required to eliminate, mitigate or control the risk
- review dates, new controls and changes to existing controls

The Manager reviews the Risk Management Plan Register every two (2) months, or more frequently as required, in response to information received via work health and safety reviews, audits and continuous improvement systems.

Figure 2: Risk management process



5.3 Managing risks

Risks related to participant safety, abuse, neglect, or other incidents will be addressed following the NDIS (Incident Management and Reportable Incidents) Rules 2018, ensuring incidents are reported and managed in line with NDIS regulatory timeframes and requirements.

5.3.1 Controls

Controls are strategies used to manage risk. Identified risks are balanced against the cost and inconvenience of the control to the organisation before implementation. Controls used by SilaCa Tasmania Pty Ltd to manage risks include:

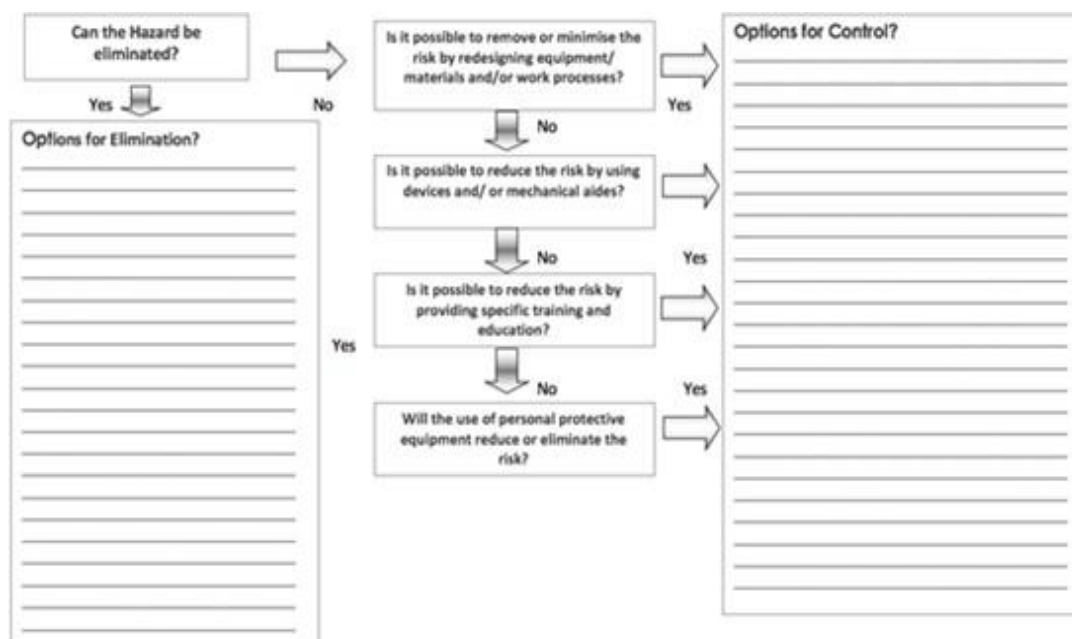
- implementation of a Strategic Plan
- implementation of a Risk Management Plan
- implementation of Contingency Emergency and Disaster Plans for participants
- implementation and review of participant risk assessment within support plans
- thorough staff orientation, education and training
- implementation of new processes identified during a risk assessment

- effective internal and external information systems, including meetings and memos
- strict adherence to policies, procedures and work instructions by all staff
- the utilisation of position descriptions
- staff supervision and reviews
- establishing participant support plans that identify risks and record strategies
- participant reviews of support and environment
- ongoing capital maintenance and setting appropriate equipment budgets and plans
- maintaining all current registrations and insurance

Risk matrix

CONSEQUENCE					
LIKELIHOOD	Insignificant (1) Participant – potential injury Staff – lost time or illness of < 5 days Visitors – no treatment or refused treatment Services – minimal disruption Financial – loss of <\$K Environmental – fire alarm from faulty equipment	Minor (2) Participant – first aid attention by RN Staff – lost time or illness of 5-10 days Visitors – first aid attention by RN Services – disruption to some users Financial – loss of < \$10K &> \$K Environmental – small fire from faulty equipment	Moderate(3) Participant – medical attention by GP required Staff – lost time for > 11 days or restricted duties Visitors – medical intervention by GP Services – disruption to all users Financial – loss of > \$10K but < \$50K Environmental – fire contained in a room	Major (4) Participant – permanent loss of function or disfigurement; absconding resident; sexual assault Staff – permanent loss of function or disfigurement; sexual assault Visitor – as for staff Service – major loss of service Financial – financial loss of > \$50K &< \$100K Environmental – fire that grows larger than one room	Extreme (5) Participant – death or hospitalisation Staff – death or hospitalisation Visitors – death or hospitalisation Services – complete loss of service Financial – financial loss > \$100K Environmental – fire requiring evacuation (5)
Rare (1) – Unlikely to reoccur – may occur in exceptional circumstances	Low (1)	Low (1)	Low (1)	Low (1)	Low (1)
Unlikely (2) – possibly could reoccur at some time in 2 – 5 years	Low (1)	Low (1)	Low (1)	Medium (2)	Medium (2)
Possible (3) – possibly will reoccur, might occur at some time (may happen every 1 – 2 years)	Low (1)	Low (1)	Medium (2)	Medium (2)	Medium (2)
Likely (4) – will probably occur in most circumstances (several times a year)	Low (1)	Medium (2)	Medium (2)	High (3)	High (3)
Highly Likely (5) – is expected to occur again either immediately or within a short period of time (Likely to occur most weeks or months)	Low (1)	Medium (2)	Medium (2)	High (3)	Extreme (4)

Risk Control Process is used to remove or minimise associated risks.



5.3.2 Improvement Committee

Members of the improvement committee are representatives of our workforce. The committee functions to identify risks by reviewing information (see '5.0 Procedure' and '5.1 Identification'). The committee meets every quarter.

Separate from the committee review, all risks will be reviewed independently by SilaCa Tasmania Pty Ltd's Manager.

Where risks are ongoing, they will be included in the Risk Management Plan Register and Continuous Improvement Plan Register. It is the Manager's role to ensure all actions required to manage identified risks are undertaken within the nominated time frames.

5.3.3 Hazard identification

Where a hazard or potential hazard is identified,

1. staff must complete in detail a Hazard Report Form
2. provide the Hazard Report Form on the same working day to the Manager
3. Manager reviews, analyses, identifies the risk level and creates a plan of action to deal with the hazard

When consequences of hazards are assessed as high or extreme:

1. a staff member must contact SilaCa Tasmania Pty Ltd

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2. inform the Manager immediately or as soon as it is safe to do so
3. the Manager takes steps to address extreme or high hazards **immediately**

The documentation of the hazard includes:

1. The staff member completing Step 1 Report the Hazard and Step 2 Assess the Risk Note: the staff member does not have to complete Step 2 if they do not feel they can
2. Manager review and analyse Hazard Report Form
3. Complete the Control the Hazard section in detail
4. Add information to the Continuous Improvement Plan Register, as required

Participants and their representatives will be included in hazard identification and management where the risks relate to their services or wellbeing. All Hazard Report Forms are provided to the SilaCa Tasmania Pty Ltd Improvement Committee for review.

5.3.4 Monitoring

Risk management processes and systems are audited regularly as part of the audit program. Management must review registers and plans – risk, incident, complaints and feedback, and continuous improvement. Data gained from monitoring registers and plans will lead to knowledge of risks in the organisation and formulation of plans to reduce or eliminate risks for all parties – staff, participants and the organisation.

5.3.5 Reporting

SilaCa Tasmania Pty Ltd will use the data from the risk management process to inform decisions and plans to improve practices continuously. The analysis will assist in changes in services, policies and procedures. The analysis will include, but is not limited to:

- complaints and feedback
- financial risk
- staffing issues
- participant satisfaction
- risks to participants and staff
- amendments to legal or compliance requirements
- training and education

SilaCa Tasmania Pty Ltd will review our risks management systems through:

- seeking feedback from participants, families, networks and staff
- risk assessment of participants at intake and at least annually
- annual practice and strategy review of each participant

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- Management meetings where the following topics are discussed, analysed and acted upon:
 - incident management register
 - complaint register – review feedback, resolutions and outcomes
 - operational and governance management
 - human resource management
 - information systems – participant, staff, networks, technology and distribution of information
 - work health and safety – safe practices
 - emergency and disaster management – using input from participant's plans, and situational changes (including prevention and control of infections and outbreaks)
 - financial management such as cash flow, compliance, contracts, insurance
 - safe environments – children and young people, adults

All identified risks, incidents, and hazards will be linked to the Continuous Improvement Plan Register to ensure a systemic organisational response, with lessons learned informing future service delivery and governance practices. All risks resulting in a reportable incident will be reported to the NDIS Commission as required, including incidents involving safeguarding failures.

The management will review risk management outcomes, trends, and systemic risks quarterly, including risks impacting participants, staff, and service operations. This review will ensure the organisation's risk management processes align with NDIS Practice Standards, and that all identified risks are addressed with appropriate corrective actions. Governance oversight will ensure accountability and continuous service improvement.

All risks that result in incidents, including reportable incidents, will be linked to the Incident Register, Risk Management Plan Register, and Continuous Improvement Plan Register, ensuring a coordinated response, action tracking, and regulatory compliance.

External Reporting and Safeguarding Mechanisms

In addition to internal risk management and incident processes, if participants, staff, or other stakeholders believe risks or incidents have not been adequately resolved, or if there are urgent safeguarding concerns, the following external bodies may be contacted:

- **NDIS Quality and Safeguards Commission** — for participant safeguarding, complaints, and provider concerns (Ph: 1800 035 544, www.ndiscommission.gov.au).
- **Ombudsman (Commonwealth and State)** — for unresolved service complaints or broader concerns about service quality.
- **State Work Health and Safety Authority** — for serious workplace health and safety risks.
- SilaCa Tasmania Pty Ltd will support participants and others to access external reporting pathways as needed.

5.4 Consequence Rating Table

Insignificant	Minor	Moderate	Major	Extreme
The participant				
Less than first aid injury or a brief emotional disturbance	First aid injury or emotional disturbance impacting more than two days but does not require treatment.	Substantial injury resulting in medical treatment. Temporary impairment or development/exacerbation of mental illness requiring treatment Some cases of abuse/ neglect of the person	Significant injury causing permanent impairment. Severe, long-lasting or significant exacerbation of mental illness requiring long-term treatment. Significant faults were allowing significant abuse/neglect of people receiving support.	Avoidable death of a person. Systemic faults allowing widespread abuse or neglect of a participant.

Support Workers and others				
Nil or minor first aid injury or a brief emotional disturbance	First aid injury or psychological injury impacting more than two days but does not require treatment.	Substantial injury resulting in medical treatment. Temporary impairment or development or exacerbation of psychological injury requiring treatment.	Significant injury causing permanent impairment. Severe, long-lasting, or significant exacerbation of mental illness requiring long-term treatment.	Preventable fatality

6.0 Related documents

- Governing Body Meeting Agenda and Minutes
- Emergency Plan
- Emergency Plan – Waste Disposal
- Contingency Emergency and Disaster Plan
- Complaints and Feedback Policy and Procedure
- Complaint and Feedback Form
- Anonymous Complaint and Feedback Form
- Continuous Improvement Policy and Procedure
- Quality Audit Schedule
- Internal Audit Schedule - Core Module (module specific)
- Internal Audit - NDIS Policy Review Form
- Hazard Report Form
- Risk Assessment Form
- Risk Indemnity Form
- Risk Management Plan Register
- Continuous Improvement Plan Register
- Documentation, including meeting minutes, agendas and memos
- Personal Emergency Preparation Plan
- Position Descriptions
- Staff Training Record
- Staff Training Plan
- Training Attendance Register – In-house
- Annual Organisational Training Register and Review
- Capital maintenance and equipment budgets and plans
- Maintenance of current registrations and insurances

7.0 References

- NDIS Code of Conduct (2018)
- NDIS Practice Standards and Quality Indicators 2021
- Privacy Act 1988 (Commonwealth)
- Work Health and Safety Act 2011 (Commonwealth)
- Disability Services Act 1986 (Commonwealth)
- NDIS (Incident Management and Reportable Incidents) Rules 2018
- NDIS Worker Screening Rules 2018