

Q245A	RISK MANAGEMENT PLAN
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Procedures

Risk management plan

The Risk Management Sub-Committee will oversee the risk management plan for the organisation. The risk management plan will cover all aspects of the organisation's activities and:

Document all potential risks and their risk rating according to the following:

Impact

Likelihood of happening

	Very high	High	Medium	Low
Very high (almost certain)	1: Extreme	2: Very high	3: High	5: Medium
High	2: Very high	3: High	4: Significant	6: Low
(probable)				
Medium	3: High	4: Significant	5: Medium	Negligible
(may happen)				
Low	4: Significant	5: Medium	6: Low	Negligible
(unlikely)				

 Identify actions to manage risk, time frames for any tasks and responsibility. This will include compliance checks to be conducted.

All operational employees will provide reports as requested by the Management Team against the risk management plan to the Chief Executive Officer/Risk Management Committee.

The Risk Management Sub-Committee will review the risk management plan on an annual basis.

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Compliance checks

The Risk Management Sub-Committee will monitor the following:

- Currency and adequacy of insurance cover
- Probity and security of financial management
- Compliance with contractual arrangements, and funding agreements in particular
- Compliance of all Enhanced Lifestyles and Lifestyle Assistance and Accommodation Service procedures with relevant legislation
- Compliance with the following Enhanced Lifestyles and Lifestyle Assistance and Accommodation Service procedures:
 - WHS
 - Fire Safety Policy
 - Accidents and Injuries Policy
 - Critical Incidents

All operational employees will report to the Management Team, who will escalate relevant reports to The Boards, Chief Executive Officer and Risk Management Committee to confirm compliance checks and report any irregularities.

Employee responsibilities

All employees are responsible for maintaining an awareness of potential risks in their areas of responsibility, ensuring that procedures are followed and notifying the Management Team of any potential or actual risk.

Business Continuity and Disaster Recovery

Business continuity and disaster recovery are subsets of risk management. The purpose of developing a Business Continuity Plan (BCP) is to ensure the continuation of the business during and following any critical incident that results in disruption to normal operational capability.

The Enhanced Lifestyles and Lifestyle Assistance and Accommodation Service BCP and disaster recovery strategy is defined in the document Q246 – Business Continuity Plan.

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Risk Rating:

- 1-2 extreme or very high
- 3-4 high or significant
- 5-6 medium or low

N negligible

NDIS Practice Standards Division 1: Rights and Responsibilities

Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
1	Customer/Client denied rights, dignity, choice, decision-making, participation and inclusion	High (1)	(1) Internal auditing plan in place to ensure full compliance with the NDIS Quality and Safeguarding Framework. (2) Annual training plan developed and reviewed annually. (3) Customer/Client provided policies supporting their rights. (4)Incident	(1) Monitor and review internal auditing and plan (2) Review high level incidents (CIMSability) (3) Approval of annual training plan (4) Ensure Customer/Client annual reviews conducted	(1) Annual audit (2) Incidents reviewed on a quarterly basis with trending report developed (3) Annual training plan developed at beginning of financial year with review every 6 months (4) Employee reinductions completed by 1 July 2020



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Description of the Timing of Risk Number Risk rating Control Management risk action management action management modules in CIMSability. (5) Policies and Procedures in place: **Q269** P269 Q112 Q115 Q102 3 Customer/Client Medium (5) (1) Goals entered (1) Regular (1) Executive goal not achieved into CIMSability **Executive reports** reports run (CIMSability) and regularly monthly conducted which reviewed (2) Internal audit identify goals not plan reviews (2) Choice given reviewed to client to opt out Customer/Client of goals during (2) Management goals initiate intake and annual (3) Quarterly review investigation management



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			(3) Goals to be regularly assessed and reviewed with changes in care made to reflect goals (4) Regular wellbeing calls conducted on Customers/Clients (5) Policies and Procedures in place: P301 Q111 Q002	(3) Monitor and record details in CIMSability (4) Annual Customer/Client review	review and investigations initiated as required
4	Unsatisfactory feedback and complaint management	Low (6)	(1) Customer/Client Communications Officers manages feedback and complaints	(1) Regular Executive reports (CIMSability) conducted which identify goals not reviewed	(1) Internal audits reviewed by management



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			(2) Internal audit conducted every six months (3) Quarterly trend reports from Communications and Engagement Officer (4) Appeals process in place (5) Feedback register in place (6) Policies and procedures in place: Q269 P269 Q002	(2) Management initiate investigation (3) Monitor and record details in CIMSability (4) Feedback captured in CIMSability (4) Annual Customer/Client review (5) Risk Management Committee in place	(2) Executive reports run monthly (3) Trends tabled at Risk Management Committee
5	Child Member abuse	Low (6)	(1) Employees working with children are	(1) All child abuse allegations that arise will be	(1) Child protection policy in place



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			trained in child safe environments (2) All EL/LAAS staff have appropriate Worker Screening Clearances (3) EL is a registered child safe environments trainer (4) Ensuring all staff are trained and aware of Incident Management and Mandatory Reporting requirements (5) Training register in place (6) EL/LAAS	reported immediately to the Child Abuse Report Line (CARL) on 13 14 78 (2) All child abuse allegations will be reported within 24 hours of notification to the NDIS Commission (3) Management Cards generated within CIMSability, managers receive automated emails. (4) Training register maintained in NAV	(2) Management receive regular reports from DHS/CARL regarding any child screening related issues (3) Internal audit reports every six months on incidents (4) Annual Appraisals conducted (5) Alert system in NAV for certificates (Screening / Training) reaching expiry and expired
			registers with		



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Timing of Risk Number Description of the Risk rating Control Management risk action management action worker screening portal (7) CIMSability incident management module (8) Policies and procedures in place: Q325 P325 Q104A Q113 P113 (1) Management Customer/Client Medium (5) (1) Employees (1) All instances or 6 receive regular working with allegations of abuse or neglect reports related to children are abuse or neglect any screening trained in child will be issues safe environments investigated (2) Internal audit (2) All EL/LAAS (2) All reports will reports every six staff have be recorded in the months on appropriate Incident incidents



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Risk Number Description of the Risk rating Control Management Timing of risk action management action Worker Screening Management (3) Annual Register Clearances training plan in (3) Incident place and (3) Training register in place Management reviewed bi-Procedure will be annually (4) EL/LAAS applied and NDIS (4)Annual registers with Commission worker screening **Employee** notified as **Portal Appraisals** required for conducted Reportable (5) All staff are Incidents trained and aware (5) Alert system in of the Incident NAV for (4) Management certificates Management Cards generated System and NDIS (Screening / within CIMSability, Reportable Training) reaching managers receive Incidents expiry and expired automated emails (6) CIMSability (5) Working incident screenings and management qualifications module managed within NAV (8) Policies and procedures in place: Q325



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			 P325 Q102 Q120 (9) Zero Tolerance Training in Place		
7	Work environment hazard, fire, emergency procedure	Medium (5)	(1) Policies and procedures in place: • M400 • Q402 • QF274 • QF404 • Q401 • P401 (2) External Consultant engaged to review	 (1) Action as per training (2) Notify relevant authorities (3) Document the event (4) Employees inducted into EL – WHS covered (5) External Consultant Engaged 	(1) Management receive regular reports related to any screening issues (2) Internal audit reports every six months on incidents (3) Annual training plan in place and reviewed biannually (4) Annual Employee Appraisals conducted

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					(5) Alert system in NAV for certificates (Screening / Training) reaching expiry and expired
8	Threat to Customers' privacy and confidentiality of information	Medium (5)	(1) Ensure all relevant training and induction is provided and assessed (2) Policies and procedures in place: • Q108 • Q110 • Q272	(1) Customer and Communication Role in Place (2) Investigate immediately (3) Annual Employee Performance Review (4) Annual Training Plan In place	(1) Management receive regular reports related to any screening issues (2) Internal audit reports every six months on incidents (3) Annual training plan in place and reviewed biannually



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	(4) Annual Employee Appraisals conducted (5) Alert system in NAV for certificates (Screening / Training) reaching expiry and expired

NDIS Practice Standards Division 2: Governance and Operational Management

Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
9	Inability to keep organisation	High (3)	(1) Feedback and Complaint	(1) Competitive remuneration packages available	(1) ELMO implementation to be completed by



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
	staffed with key personnel		management system in place (2) employee performance appraisals to identify areas of dissatisfaction (3)Sufficient laptops available for staff (4) Policies and procedures in place: Q214 Q227 Q246 P252	(2) Attractive work environment with maximum possible flexibility, including challenging and rewarding work, provided when possible. (3) Networks with potential recruits maintained (4) Implementation of ELMO will automate succession plan for key personnel (5) Laptops fitted with a VPN connection to allow staff to work offsite and independently during emergency circumstances	end of financial year
10	Inability to maintain services	Significant (4)	(1) Service Delivery managing demand	(1) Networks with potential employment and training agencies	(1) Effectiveness of recruitment and



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
	with appropriately qualified Lifestyle Attendants		driven recruiting and induction (2) Employee satisfaction survey to identify areas of concern for employee retention (3) Training sessions aimed at confidence and skills building to secure employment tenure (4) Policies and procedures in place: Q214 Q227 Q246 P252	maintained (2) Maintain focus on training and employment conditions (3) Maintain relationships with other services providers	employee retention practices regularly reviewed (2) Alternative recruitment and retention strategies trialled and evaluated (3) Approve brokerage arrangements if required
11	Damage from fire or flood	High (3)	(1) BusinessContinuity Plan in place(2) WHS and other relevant	(1) Oversee arrangements for disaster recovery / office continuity(2) Lifestyle Attendants	(1) Management tests alarms regularly and evacuation drills scheduled bi annually



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			training (3) Internal and external WHS assessment of organisation office (4) Ongoing assessment and evaluation by external auditors (5) Register of business insurance policies in place (6) Policies and procedures in place: Q400 Q401 Q401 Q402 Q402 Q246 Q247	participation in Evacuation drills run by Office Management (3) Appropriate building and property insurance cover maintained (4) WH&S agreement in place with employees	(2) Management committee reviews insurance each year (3) External audit of compliance with WH&S (4) WH&S a standing item at staff meetings where staff can identify potential issues. At least quarterly meeting of the WH&S Committee.



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12	Incorrect advice or information to the Treasurer, Boards or other stakeholders	High (3)	(1) Senior management maintain awareness of current trends and data through reports, meetings and external sources and consultation (2) Monthly Operations Team Meetings to monitor communication plans and trends regarding practice standards (3) Policies and procedures in place: • Q272 • Q207B • Q272B	(1) Manage schedule for staff meetings (2) Provide opportunities for staff to attend seminars on significant work issues (3) Recognised economic and legal experts contracted to provide advice on significant matters where the organisation does not have expertise	(1) Staff meetings scheduled each quarter (2) Opportunities for training reviewed and scheduled as needs identified (3) Experts contracted to assist as needs identified



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
13	Political and funding changes that affect the	High (3)	(1) Maintain good communications with NDIS Commission	(1) Reports provided to Management Committee as requested	(1) Reports provided when requested
	Organisation		(2) Attend regular briefings by relevant authorities	(2) Contact with relevant Government Department and Ministers	(2) This risk is largely outside organisation's
			(3) Subscribe to all relevant bodies to maintain currency of knowledge and	(3) The organisation's communications strategy promotes their role	control
			awareness of potential and policy changes and direction	(4) Contact with Funder and other agencies to monitor potential changes in policy	
			(4) Policies and procedures in place:	(5) Senior level participation, where possible, in external	
			• Q233 • Q231	processes covering areas of work that are relevant to the organisation	



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
14	Successful litigation arising from incorrect service delivery or process	High (3)	(1) Internal auditing plan in place (2) Management contracts external auditors examine policies, processes and compliance with NDIS and ACIS Practice Standards (3) Engage external experts to assist in developing better processes where needed (4) Training and induction programs for correct delivery of supports, clinical supports and compliance and understanding of Practice	(1) Recognised economic and legal experts contracted to provide advice on significant matters where the organisation does not have expertise (2) Management meetings to provide oversight and advice (3) Advice, information, etc to governments and others on sensitive and key issues always approved by the Boards, Chief Executive Officer and/or Chairperson	(1) Experts contracted as the need is identified (2) Monthly management meetings and regular cross organisation management meetings (3) Monthly board meetings where these issues will be raised



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			Standards (4) Policies and procedures in place: Q262 Q230 Q002		
15	Damage to credibility.	Medium (5)	(1) Internal auditing plan in place to monitor compliance with NDIS Practice Standards (2) Feedback and Complaints Management System to resolve issues before they damage organisation credibility (3) Policies and procedures in place:	(1) Recognised economic and legal experts contracted to provide advice on significant matters where the organisation does not have expertise (2) Boards meetings to provide oversight and advice (3) Advice, information, etc to governments and others on sensitive and key issues always approved by the Boards, Chief	(1) Experts contracted when significant issues arise as identified by the CEO (2) Special Board meeting to be called as needed with arrangements organised by CEO (4) Legal representation contracted by



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			Q002Q269P269	(4) Best affordable legal representation is obtained	CEO and/or Board request
16	Inability to fund significant litigation	High (3)	(1) Maintain awareness of current liabilities (2) Policies and procedures in place: • Q247	(1) Insurance in place and records maintained in register (2) Management to review liabilities and risks annually and assess appropriate insurance levels (3) Funds available to cover normal legal costs and measures in place to obtain additional funding if necessary	(1) Register kept up to date by Admin (2) Liabilities and risks reviewed annually (3) Appropriate funding constantly maintained, additional measures to be used as determined to be necessary
17	Essential information lost	Significant (4)	(1) User permissions used to limit data access as preventative measure	(1) Commence information audit to assess extent of loss of data(2) Investigate cause of loss of data and	(1) Information audit to be assigned to quality team and

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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			(2) IT management company backs up company data nightly to offsite location (3) Security systems in place to prevent unauthorised access to building (4) Policies and procedures in place: • Q272 • Q110 • Q246	instigate remedial action plan (3) Work with IT management company to restore information from backup (4) Any illegal intrusions to be reported to SAPOL	commence immediately (2) Management to commence investigation immediately (3) IT Management company to be alerted immediately and then advised after audit completion of extend of data restoration
18	Financial loss	Significant (4)	(1) Operations team meeting financial management agenda item (2) Regular review of financial expenditure	(1) Financial delegations and process for approval of expenditure in place (2) Chief Executive Officer must approve any procurement of	(1) Delegations reviewed and updated as required(4) Expenditures reviewed monthly for any discrepancies



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			(3) Policies and procedures in place: • Q231 • P231 • Q231A • Q231B • Q231C • Q281	consultants, contract employees or purchases above \$750 in value (3) Appropriate manager must approve any purchases below \$750 in value (4) Financial manager monitors all business expenditures (5) Fraud Control Plan developed and regularly reviewed	(5) Fraud Control Plan reviewed regularly
19	Monies and goods and fixed assets on premises lost, stolen or damaged	Medium (5)	(1) Security systems in place to prevent unauthorised access to building (2) Surveillance systems in place to deter and identify intruders	(1) Management conducts investigation into loss and reports to SAPOL if necessary (2) External security consultant contracted to devise plan to enhance security	(1) Investigation to commence immediately (2) External contractors engaged as necessary



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			(3) Asset Management register maintained to track location and assignment of valuable assets	measures (3) Insurance coverage reviewed as part of annual financial review (4)	(3) Insurance coverage reviewed annually
			(5) Asset Management audit conducted twice annually		
			(4) Appropriate levels of insurance coverage maintained		
			(5) Policies and procedures in place:		
			• Q120		
			• Q247		
			• Q281		
20	Defective building maintenance	Low (6)	(1) Regular maintenance audits and	(1) Follow procurement process for hiring contractors	(1) Management will consult with

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			surveillance	to correct any maintenance issues	the CEO on identification of any maintenance issues
21	Reduced staff morale	Low (6)	(1) Social Club in place (2) LA of year award to recognise outstanding staff and provide social outing for all who wish to attend (3) LA Christmas Party as free catered event for staff who wish to attend (4) Positive feedback from Feedback Management System (5) Policies and procedures in place:	(1) Assess opportunities for staff to increase skills (2) Offer competitive remuneration packages to retain talented employees (3) Maintain succession plan for key personnel (4) Enterprise Agreements and employment contracts reflect up to date employment conditions	(1) Ongoing assessment and subscription to notifications from respected training and consultation organisations (2) All staff agreements are reviewed annually (3) Succession plan updated annually



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			Q294Q262		
22	Board Members ceasing involvement at the same time	Medium (6)	(1) Maintain regular contact and communications with board members outside of scheduled meetings (2) Board Support Officer in place to provide admin supports (3) Policies and procedures in place: Q207 Q207B	(1) Constitution to include a procedure on electing new Board Members (2) Extraordinary Meeting to be called if multiple Board Members resign	(1) Procedure to be enacted by the CEO as needed (2) Meeting to be held within a week
23	Financial status of organisation (the organisation is solvent, can pay its debts and staff and	High (3)	(1) Operations team meeting financial management agenda item (2) Regular review	(1) Ensure EL has an emergency cash fund(2) Appointments of an external auditor and external accountant to	(1) Regular reporting to The Boards in response to a deterioration



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	have cash on hand if the organisation folds)		of financial expenditure by management and executive (3) Organisational yearly budget (3) Policies and procedures in place: Q231 P231 Q231A Q231B Q231C Q281	monitor financials (3) EO to assist with the financial management of the organisation (4) Ensure there is regular financial reporting including monthly reporting to The Boards (5) Financial Sub-Committee established to monitor income and expenditure (6) Completion of a yearly budget (8) Undertake an annual assessment of competitors (pricing structure) and monitor the competition to ensure EL is positioned well within the sector (9) Increase	of the organisations finances (2) Annual review by the External Auditor. External accountant is engaged and Finance Sub-Committee in place.



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24	Board Members	Medium (5)	(1) Board Members given	membership base (1) Governance training given to	(1) Regular training provided
	not having a high enough skill set to function on The Boards		full support and training (2) Individualised training available for Board Members (3) Board Support Officer assigned to assist and manage training and skill updates Policies and procedures in place: • Q207	Board Members to understand the responsibilities under the Act. (2) Tightening up the membership application process to foster the development of a professional Board (3) Co-opt assistance from external organisations including Pinnacle HR, Let's Manage and an external accountant (for reporting) (4) Board Member performance appraisals conducted by CEO	(2) Regular review of Board Members (3) External consultant engaged to provide training and assistance as required (4) Annual appraisals of performance conducted



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25	New building not adequately covered by insurance if there is an incident especially during renovation process	Low (6)	(1) Insurance coverage to be reviewed annually (2) Insurance policies tracked in register (3) Insurance coverage to be reviewed prior to any renovation works (4) Policies and procedures in place: • Q247	(1) Ensure EL has the appropriate insurances in place and have met council regulations when making alternations to the building (2) Annual insurances to be provided to the bank as part of mortgage contract (3) Ensure all builders/tradespeople sign contractual agreements which state they have the appropriate insurances and qualifications to carry out the work. (4) Pre-building inspection completed (including termite inspection) (5) Ensure	(1) To be reviewed prior to instigating any alterations (3) Form to be submitted as part of agreement with contractors prior to commencement of work (4) Inspection conducted prior to soliciting quotes from contractors



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
				organisation renews insurance annually (re-quote to get the most competitive price) and policies to be submitted at RMSC.	
26	Building plans aren't approved by council correctly and are not covered by the building code	Low (6)	(1) Project manager to maintain communications with senior staff (2) EL must only hire qualified builders and tradespeople (3) Tradesmen must sign contractual agreement and time restraints are to be built into any contract so works are completed on time and budget. (4) Policies and	 (1) Plans to be submitted to council for approval (extension) (2) Approval is to be presented to the RMSC and The Boards. (3) Management to receive a copy of all insurances and licenses from the contractors. 	(1) Extension request submitted immediately (3) Certificates of Insurance and Licenses to be submitted prior to work commencing



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			procedures in place: • QF233 • QF211		
27	CEO is severely injured or incapacitated due to illness	Low (6)	(1) Succession plan in place for senior staff positions (2) Policies and procedures in place: • Q227 • P227 • Q214	(1) Ensure Chief Operations Officer and People and Culture Manager have the appropriate knowledge to run the organisation is the CEO is away for an extended period	(1) CEO to oversee readiness and training of senior staff (2) Succession plan to be updated annually or after any major organisational change
28	Conflict with referral organisation	Medium (5)	(1) Agreement negotiated by both parties prior to services commencing (2) Brokerage manager (3) Establish	(1) Escalate to Services Manager for consultation and resolution(2) Regular meetings and contact between provider and referral organisation	(1) Monthly meeting between brokerage manager and referral organisation



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			working relationship with referral organisation (4) Policies and procedures in place: • Q303		
29	Employee non-compliance with organisational values	Medium (5)	(1) Ensure induction and training program kept up to date with any policies updates (2) Feedback and Complaints Management system to capture and escalate any feedback from customers about employees (3) Regular audit of feedback and complaints register (4) Policies and	(1) Management to investigate any serious matters of employee misconduct (2) Consult with Learning and Development Officer to identify any gaps in employee training (3) Conduct Employee performance reviews to pre-emptively locate areas of concern for staff	(1) Investigations conducted in response to Feedback and Complaints or incidents (2) Consultation to take place as issues arise (3) Performance reviews to be conducted twice annually

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30	Dealing with Customer acquaintances that pose a risk	Medium (5)	procedures in place: Q269 P269 Q260 P260 P260 Q262 Q325 P325 P325 (1) Risk assessment conducted as part of customer (2) Staff training and induction programs cover WHS and hazard awareness and response (3) My Safety Plan to manage and control risks in the customer/clients home	(1) Feedback, complaints and incidents reported to management for investigation and evaluation of risks (2) Staff given expert advice managing identified risks and plan put in place with customer/client (3) Removal of staff from environments that pose an unacceptable risk	(1) Reported to management as significant issues identified



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			(4) Policies and procedures in place: • Q292		
31	Brokerage – Agreement expired	Low (6)	(1) Management to Maintain awareness of all agreements and expiry dates. (2) Policies and procedures in place: • Q310	(1) Management ensures compliance register up to date and maintained (2) CEO to review agreements annually and sign off	(1) Compliance register reviewed by management quarterly
32	Brokerage – Agreement entered into outside scope of service	Low (6)	(1) Awareness of scope of practice maintained across the organisation (2) Policies and procedures in place: • Q236 • QF273 • Q310	(1) CEO to review and sign off on all service agreements	(1) CEO to be involved in any consultation about brokerage
33	Brokerage – funded provider	Medium (5)	(1) Maintain open and direct	(1) Ensure current agreement in	(1) Agreements should be in place prior to



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	doesn't provide EL with adequate information		dialogue with provider (2) Policies and procedures in place: • Q310	place with funded provider (2) SDO to request required information and if not received escalate to COO (3) CEO to review agreements annually taking into consideration incidents	commencement of service and renewed annually
34	Brokerage – EL doesn't have adequate staffing to supply	Medium (5)	(1) Recruitment drive to be raised with People and Culture Manager and specific requirements communicated (2) Maintain and develop staff dedicated to providing supports for brokerage contracts (3) Policies and procedures in place: • Q310	(1) Recruitment form developed and implemented allowing SDT to instigate recruitment of staff (2) Monthly inductions booked in advance (3) Recruitment as needed – need vs demand	(1) SDT to submit recruitment form as they identify a need for additional staff to fill rosters (2) Monthly Operation Team Meetings to raise awareness of issues in staffing and recruitment



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35	35 Governance – Boards not aware of who has delegated authority	Low (6)	 P252 Q253 (1) Delegation of authority documented (2) Policies and procedures in place: 	(1) Policies regularly reviewed and updated to reflect any changes	(1) Conduct review of delegation of authority when due or circumstances
36	Governance -	Low (6)	Q219Q215(1) Internal auditing plan in	(1) Ensure Delegation of authority policy	(1) Delegation of authority policy
	External reporting obligations not met		place and updated annually (2) External audits conducted by partner organisation (3) COO designated reporting officer (4) Policies and procedures in	and chart is kept up to date (2) External accountant appointed to maintain financial compliance (3) External Auditor appointed to conduct financial audit and prepare	and chart reviewed annually (2) External account conducts regular reviews of organisation finances (4) (5) Subcommittees to meet regularly
			place: • Q104A	report	



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			Q325P325Q215Q219Q209	(4) Finance subcommittee in place(5) Risk Management subcommittee in place	
37	Governance - Organisation not meeting objectives of strategic plan	Low (6)	(1) EO and management team to monitor current plan and compliance. (2) Regular senior staff and board meeting to evaluate obligations (3) Policies and procedures in place: • Q202	 (1) Strategic plan in place (2) KPI's in place for CEO (3) CEO has regular meetings with Chairperson of The Boards (4) External auditor appointed to undertake financial audit and prepare financial reports for compliance ACNC, Boards and Association Incorporations compliance. (5) Annual Plan (Operational Plan) 	(2) KPI's assessed quarterly (3) CEO reports to the Boards through supervisions and monthly reporting at board meetings (4) External accountant engaged to produce monthly financial reports



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
				in place regularly reviewed and monitored by CEO (6) Annual Member and Staff satisfaction survey in place (7) Annual audits conducted by NDIS (8) ACIA Membership and certifying for the ACIS 2018 standard (9) DSPP & NDIS compliance and approval (10) Annual appraisal conducted for CEO (11) Risk Management & Financial Sub-Committees in place (12) Regular email communication by	



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
				CEO to The Boards with organisation changes	
38	Governance – Risk of The Boards not asking for evidence of achieved goals	Medium (5)	(1) On going evaluations of KPI's (2) Maintain communication between board and EO (3) Maintaining currency of accreditation NDIS and ACIS (4) Policies and procedures in place: Q207 Q261 P261	(1) External consultants engaged for The Boards support (2) KPI's set for EO annually (3) CEO has regular meetings with Chairperson of The Boards (4) Eternal Accountant engaged to produce monthly financial reports (5) External auditor appointed to undertake financial audit and prepare financial reports for compliance ACNC, Boards and Association	(1) Strategic plan in place and developed every 3 years (2) CEO reports to The Boards through supervisions and monthly reporting at board meetings (3) Annual Member and Staff satisfaction survey in place



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
				Incorporations compliance. (6) Annual Plan (Operational Plan) in place regularly reviewed and monitored by CEO (7) Annual audits conducted by NDIS (8) Accreditation by ACIS 2018 (9) DSPP & NDIS compliance and approval (10) Annual appraisal conducted for EO (11) Risk Management & Financial Sub-Committees in place (12) Regular email communication by EO to The Boards with organisation changes	



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
39	Governance – The Boards not up to date with legislative changes	Low (6)	(1) Organisation monitors legislative changes updates the Board at next available Board Meeting (2) External consultants available to provide support (3) Policies and procedures in place: Q208 Q230 Q209	 (1) Implementation of annual governance training board in place February each year (2) Relevant correspondence tabled at The Boards meeting (3) EO provides information and resources for The Boards training (4) External consultant engaged when needed for support (5) The Boards members engaged in conferences and training where appropriate 	(1) Annual training program for the Board (2) Monthly meetings of the Board (3) Board Members attend conferences and training when appropriate events become available



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
40	Governance – The Boards approves expenditure without scrutinising the budget placing the association at risk of insolvency	Low (6)	(1) Internal and external auditing of finances to manage organisation position (2) Policies and procedures in place: • P231 • Q231	 (1) Finance subcommittee in place with representation from external accountant (2) Annual budget developed in consultation with CEO, Treasurer, External Accountant (3) Draft budget tabled at Finance Subcommittee (4) CEO appointed by The Boards to operate within budget and provide advice on expenditure (5) External Accountant appointed by Association to assist in preparation of 	(1) Organisation budget prepared annually with internal and external consultation (2) Monthly financial reports prepared by external Accountant tabled at Finance Subcommittee meetings & The Boards



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
				budget & advice on expenditure (6) Financial training implemented for The Boards (7) Contact increased between Treasurer and External Accountant (8) Regular communication implemented between CEO and Treasurer (9) Organisation currently operating within budget (10) Organisation currently has investments in place (11) Delegation of authority policy and chart in place (12) Chairperson regularly	



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
44			(1) Maintaining	reinforces The Boards responsibilities to read reports and ask questions (1) Standing Board	(1) Monthly Board
41	Governance – Board members fail to declare or acknowledge a conflict of interest endorsing an action which is an advantage to them as a member but a disadvantage to the Association	Medium (5)	board training and awareness of all policy requirements (2) Conflict of interest declaration process in place (3) Policies and procedures in place: • Q207 • Q222	agenda item – declare a conflict of interest (2) Chairperson encourages Boards members to discuss possible conflicts (3) External support engaged when necessary (4) The Boards policies reviewed and updated (5) The Boards disclosure / confidentiality agreement signed by all board members (6) The Boards members	meetings provide opportunity for declaring new conflict of interest (2) Annual Board governance training in place February (3) External support i.e.: Psychologist or Councillor engaged at request of Board member — Association expense



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
42	Data Breach – Customer/Client or employee information	Medium (5)	(1) External company engaged to managed security and IT support (2) Annual security audit conducted by IT Management company (3) IT Passwords updated monthly – this is automated by software (4) Password on	reminded of responsibilities as a board member in comparison to being a member (7) CEO available to discuss with The Boards member's possible conflicts operations vs governance (1) Employees educated and inducted in confidentiality as part of induction process (2) Risk assessment to be conducted after each data breach to determine level of risk and whether reportable incident	



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			technology systems – client portal, CiMs, NAV & windows (5) Confidentiality agreement signed by employees and Customer/Clients		
			(6) Policies and procedures in place: • Q109		

NDIS Practice Standards Division 3: Provision of Support

Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
43	Failure of employees to fully comply with their employment obligations	Significant (4)	(1) All staff are made aware of obligations and expectations.(2) Obligations are clearly identified during induction and	(1) Performance of employees against their obligations monitored(2) Arrangements for reporting to employees on their performance	Initial induction, re induction and internal training to address all topics that employees



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			annual re induction. (3) Regular training and updates are provided particularly around reporting requirements. (4) Newsletter to inform both staff and customers of any changes to obligations (5) Policies and procedures in place: QF273 Q260 P260 P269 P269 P269 P325	relative to their obligations (3) Employment contracts to include, where feasible, performance indicators and penalties for noncompliance (4) encourage customers to report any issue with LA's during wellbeing calls	require to meet their obligations.
44	Staff or Member experiencing a traumatic event which has an	Medium (5)	(1) Maintaining full communication and support to all staff with all potential or	(1) Provide grief counselling/counselling in general(2) Refer affected	Internal training plan implemented and full-time



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
	adverse effect psychologically		actual issues (2) Providing clinical and or psychosocial assistance and training to assist any pre-empting issues (3) Maintaining training and awareness for HSR officers (4) Policies and procedures in place: • Q400 • M400	person to seek medical assistance if required (3) Offer a debrief to any Member or staff member affected by the situation – either the Service Delivery Team or external if needed (4) Completion of a Reporting/Hazard Incident form and a follow up investigation to take place (5) Minimum of 2 HSR Officers in the organisation	People and Culture Manager to review and maintain. Management to immediately provide psychological assistance when required. HSR Officers may require further training and knowledge of the appropriate assistance providers
45	Delay in service access	High (1)	(1) Maintain awareness of current limitations to provide service and ensure steps are taken limit any possible delay (2) Policies and procedures in place:	(1) Formal response by the appropriate Manager(2) Remove any potential barriers to access	CRO and SD to communicate prior to confirming ability to undertake provision of service.



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			Q252P252Q300	(3) Continually inform customer of progress(4) Targeted employment of suitable staff.	Determine current scope of practice before accepting customer
46	Unsatisfactory service management	Very High (1)	(1) Internal auditing to monitor and increase satisfaction levels. (2) Frequent wellbeing/satisfaction calls (3) Maintain awareness of current limitations to provide service and ensure steps are taken limit any possible delay (4) Policies and procedures in place: • Q002 • P092	(1) Formal response by Services Manager (2) Remove barriers to satisfactory services (3) Apply preventive action as required	CRO and SD to communicate prior to confirming ability to undertake provision of service. Determine current scope of practice before accepting customer



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			Q269P269Q300		
47	Assignment of unsuitable LA	Very High (1)	(1) Ensure accurate assessment of training of LA suitability before being assigned. (2) Policies and procedures in place: • Q269 • P269 • Q309	(1) Investigation (2) New LA assignment (3) Employee performance review (4) Customer follow-up Consideration of new recruitment process involving RTO organisations	Screening and assessment of prospective LA's prior to commencing shifts. All staff to have had meet and greet and accepted by customer before any shift.
48	Incorrect roster	Significant (4)	(1) Maintaining rostering process. Internal audit to ensure accuracy.(2) Ongoing training and assessment of all staff involved in rostering.	(1) Contact office for correction and investigation of issue.(2) Manager or team leader to identify the issues and ensure appropriate actions to rectify issues.	All SD staff are to be fully trained, monitored and assessed prior to being assigned rostering.



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			 (3) Manager or Team leader to check before roster sent out. (4) Policies and procedures in place: QF222A Q269 P269 		
49	Exit ineffective	Significant (4)	(1) Ensure all processes and procedures occur. (2) Internal auditing of CIMS and all drives (3) RA to be undertaken for all exited customers and staff (4) Policies and procedures in place:	 (1) Customer relations officer performs RA and contacts relevant areas to assist customer successful exiting. (2) All staff are to complete appropriate check list on exiting and list checked by manager. 	Ensure staff are trained correctly and assessed in exiting process.

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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			P301Q307QF117		
50	Non-identification of an employee	Medium (5)	(1) Maintain policy awareness and responsibility (2) Policies and procedures in place: • Q204	(1) Employee/member to contact office for verification of identification where id tag not worn on first visit	All new staff issued with ID badges on induction/training and assessment. Staff reminded by SD to wear ID to meet and greats when providing customer contacts.

NDIS Practice Standards Division 4: Support Provision Environment

Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
51	Employee abuse by a Customer	Significant (4)	(1) Provide relevant training and	(1) Serious reports of abuse of an	(1) Management investigation of



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			awareness in induction process (2) Feedback and complaints management system in place (3) Incident management system in place (4) Risk assessment conducted to identify and mitigate any risks to customers and employees (4) Policies and procedures in place: Q269 P269 P269 Q325 P325 Q225	employee will be escalated to management for investigation and actioning	incidents will take place as incidents occur (2) Any serious risks identified will be reported to management during customer intake
52	Transport accident	High (3)	(1) Maintain awareness of training	(1) Assess all persons' medical status post	(1) Management to follow Incident



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			requirements and WHS assessment (2) Where employees have a valid drivers license the organisation retails a copy (3) Only qualified staff to operate vehicles (4) Appropriate insurance coverage maintained (5) Employees hold First Aid Certificate (6) Policies and procedures in place: Q286B Q286C Q247 Q286 Q325 P325	incident and ensure emergency services on route if required (3) Report incident to NDIS Commission if assessed to be a reportable incident (4) Oversee Incident Management process, investigation, reporting and resolution	Management procedures post accident to investigate and prevent or mitigate future accidents (2) Reportable incidents will be reported to the NDIS Commission within 24 hours of being made aware of the incident



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
53	Staff injury or illness due to workplace causes including official travel	Low (6)	(1) Maintain WHS awareness and education (2) Contract external WHS consultant for investigation and training (3) Incident management system in place (4) Maintain appropriate levels of insurance coverage (5) Policies and procedures in place: Q325 P325 M400 Q400 Q400 Q247	(1) Management to investigate causes of injury and create plan to mitigate future occurrence (2) Process any Return to Work claims promptly and impartially (3) Review insurance coverage annually to ensure adequate levels of insurance maintained	(1) Conduct internal and external audits of WHS (2) investigate incidents promptly (3) process Return to Work or insurance claims promptly



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
54	Electrocution of staff and members of the organisation	Low (6)	(1) Regular external evaluation and assessment of all electrical items both old and new. (2) Maintain awareness of all possible areas that may be of concern (3) Maintain staff education and awareness of current or potential issues. (4) Encourage staff to report any concerns or issues and ensue appropriate follow-up occurs (5) WHS risk assessment conducted during customer intake	(1) Ensure there are safety switches installed for surge protection. (2) Ensure electrical items are serviced and maintained (3) Keep an itemised list of electrical items and maintenance records (4) Include the risk of electrical shock if pulling a cord out without switching off the power point in employee induction (5) Ensure staff have their current first aid and are trained	(1) Annual WHS assessment of office premise (2) Employees are trained in WH&S and maintain their First Aid Certification.



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			(6) Polices and procedures in place: • Q400 • M400	appropriately. (6) Operational team to put into place a plan if staff receive an electric shock (7) Hazard Form to report electrical issues (8) Include an article in the newsletter every 12 months about the risk in homes in relation to electrical items	
55	Member funding loss or reduction	Significant (4)	(1) Internal auditing and awareness of customer current plan(2) Management of customer's weekly support	(1) Finance Manager escalation of budgetary concerns (2) Investigate and resolve, mediation plan agreed to with customer	(1) Finance Manager to maintain preventative vigilance (2) Resolution to be sought immediately with consultation of



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			hours (3) Policies and procedures in place: • P311		customer
56	Employee affected by alcohol or drugs in the workplace	High (3)	(1) Employee induction and training to incorporate alcohol and drug policy	(1) Investigation may result in immediate termination, final warning; or warning.	(1) Employees read and sign agreements to policy during their onboarding process
			(2) Feedback and complaints process in place		(2) Disciplinary procedures will be followed by
			(3) Incident management process in place		management on report of an incident involving drugs or alcohol
			(4) Policies and procedures in place:		use by an employee
			Q269P269Q325		



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
57	Property damage, loss of monies,	Medium (5)	 P325 Q210 Q260 P260 (1) Feedback and complaints management system 	(1) Obtain documented proof	(1) Appropriate worker clearance
	fraud		in place (2) Incident management system in place (3) NDIS Worker clearance procedures in place (4) Maintain adequate insurance coverage (4)Policies and procedures in place: P252B Q252A	of the incident and value of damage or loss (2) Investigate immediately according to incident management system process (3) Performance review employee (4) Follow disciplinary procedures	and background check must be passed before employee can begin shifts (2)Investigation be begin immediately to resolve rapidly



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			• Q269		
			• P269		
			• Q325		
			• P325		
			• Q118		

NDIS Practice Standards Module 1: High Intensity Daily Personal Activities

Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
58	Clinical incident	Very High (1)	(1) Mandatory clinical training and assessment by qualified RN (2) Feedback and complaints process in place to capture customer concerns (3) Incident management system in place	(1) COO manages investigation into reported clinical incidents (2) COO reports incidents to NDIS Commission if required to as a Reportable Incident (3) Consultation sought to identify	(1) Investigation to commence immediately after report of clinical incident (2) If appropriate the incident reported to NDIS Commission within 24 hours of organisation being aware of incident



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			(4) Clinical governance committee (4) Policies and procedures in place: • Q269 • P269 • Q325 • P325 • Q309 • P309 • Medical procedures	underlying cause of incident, training, negligence, malpractice, etc and implement actions to prevent or mitigate future occurrences (4) Clinical issues referred to the Clinical Governance Committee	(3) Investigation of incident and report to be completed within 5 business days of incident

NDIS Practice Standards Module 2A: Implementing Behaviour Support Plans

Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
59	Limited resources for preparation of	High (3)	(1) Establishing network with Behavioural	(1) Build good working relationships with	(1) Relationship building should be



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
	Behaviour Support Plan		Support Practitioners (2) Assisting practitioners with assessments	Behavioural Support Practitioners (2) Consult with Behavioural Support Practitioners about assistance that can be provided	an ongoing process (2) Consultations to take place while engaging a Behavioural Support Practitioner
60	Use of unauthorised restrictive practice	High (3)	(1) Development of policies and procedures (2) Feedback and complaints management process in place (3) Incident management system in place (4) Policies and procedures in place:	(1) Annual training for all staff (2) Training on restrictive practices in onboard process for new staff (3) Reporting unauthorised use of restrictive practice to NDIS Commission if assessed to be a Reportable Incident	(1) Reportable Incidents involving use of unauthorised restrictive practice must be reported withing 24 hours of organisation becoming aware



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Risk Number Description of the Risk rating Control Management Timing of risk action management action Q269 P269 Q325 P325 Q116 Q308 P308 Isolation of rural High (3) (1) Identify (1) Establishing (1) Maintaining 61 relationships with customers from regional network with practitioners Behavioural support and resources to Support implement where possible communication behaviour support **Practitioners** with customers (2) Support and providers plans practitioners and (2) Contract (2) Consultation to customers to external utilise IT solutions consultants for be conducted after implementing IT need is identified to provide service for rural solutions for customer customers (3) Policies and procedures in place: Q308



Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			• P308		

NDIS Practice Standards Module 4: Specialist Support Coordination

Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
62	Conflict of interest in Support Coordinators recommending customers to use organisations own services above others	Medium (5)	(1) Policy and agreement with customers who willingly select our services (2) Training of Support coordinators educates about conflict of interest and impartiality (3) Feedback and complaints management process in place (4) Policies and procedures in place:	(1) Conduct review of support coordination customer satisfaction to identify any issues (2) Respond to and investigate any feedback or complaints involving satisfaction and conflict of interest for support coordination customers	(1) Customer satisfaction surveys to be conducted each month for a portion of the customer base, with a full report on entire customer base compiled twice annually (2)Investigation of feedback to take place immediately and completed within 7 business days, may be

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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			Q326P326Q117	(3) Conduct performance appraisals of support coordinators	escalated to management as needed (3) Performance appraisals to be conducted annually or twice annually depending on position (4) Performance appraisal may be conducted as part of an investigation process
63	Safety of Support Coordinator	High (3)	(1) Risk assessment for initial visit in place (2) Community/Isolated worker policy in place to safeguard employees (2) Policies and procedures in place:	(1) Ensure previsit risk assessment conducted by Customer Relationship Officer and check for any areas of concern	(1) Services manager to review risk assessment before approving the home visit



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Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			Q328QF317QF316	(2) Procedures to be followed by employees working in isolated circumstances	
64	Unable to adequately meet the support needs of the customer	Medium (5)	(1) Access to services policy sets out the limitations of the services provided by the organisation (2) Support and advice provided to have a plan review conducted for customer/client to access adequate resources for their needs (3) Recruiting of staff for supporting specific customer as needed (4) Policies and procedures in place:	(1) Ensure induction and training covers the limitations of organisations scope of services (2) Support customer to access adequate resources for their needs	(1) Review training on an ongoing basis as changes are made to the organisations policies and procedures (2) When a customer has been identified as lacking the resources for us to provide the supports they need they will be consulted and advised



Q245A RISK MANAGEMENT PLAN

Working together to build a better future

Risk Number	Description of the risk	Risk rating	Control	Management action	Timing of management action
			Q300QF273Q115		

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