

Risk Management Policy Template

Purpose:

To ensure that organisational, clinical, and operational risks are systematically identified, assessed, controlled, monitored, and reviewed to protect residents, staff, and organisational sustainability in alignment with the Aged Care Quality Standards and legislative requirements.

Scope:

Applies to all employees, contractors, and management staff involved in service delivery, governance, and operations across all aged care facilities managed by the organisation.

Policy Statement:

The organisation will:

- Implement a proactive, integrated approach to risk management covering clinical, operational, financial, and environmental domains.
- Embed risk awareness, reporting, and mitigation practices at every level of operation.
- Maintain compliance with relevant aged care regulations and workplace safety standards.
- Use data, incident reports, and audits to drive continuous improvement.

Legislative Context:

- Aged Care Act 1997 (Cth)
- Aged Care Quality Standards (Standard 2 – The Organisation)
- Work Health and Safety Act 2011 (Cth)
- Risk Management Standard ISO 31000:2018
- Serious Incident Response Scheme (SIRS)
- Privacy Act 1988 (Cth)

Definitions:

- **Risk:** The effect of uncertainty on objectives, leading to potential adverse outcomes for residents, staff, or the organisation.
- **Risk Assessment:** The process of identifying and evaluating the likelihood and consequences of an event.
- **Control Measure:** Actions taken to eliminate or reduce risk to an acceptable level.
- **Risk Register:** A documented record of identified risks, ratings, and control actions.

Key Principles:

1. Risk management is an organisational responsibility integrated into all planning and decision-making.
2. Risk reduction is proactive, not reactive.
3. Staff are trained and empowered to identify and report risks.
4. Risk decisions are based on objective evidence and balanced against consumer choice and dignity of risk.
5. The risk register and mitigation actions are reviewed and updated regularly.

Responsibilities:

- **Approved Provider / Board:**
Oversee risk governance, ensure resources, and review major risks quarterly.
- **Facility Manager:**
Maintain the risk register, lead reviews, and ensure corrective actions are implemented.
- **Quality & Compliance Manager:**
Audit risk management practices and report systemic trends.
- **All Staff:**
Identify and report risks or near misses and comply with mitigation procedures.

Procedures:

1. Identify risks via incident reports, hazard inspections, audits, and feedback mechanisms.

2. Record each identified risk in the risk register with likelihood, impact, and risk rating.
3. Apply the hierarchy of control to manage or eliminate risks (elimination, substitution, engineering, administrative, PPE).
4. Develop and assign corrective actions with defined due dates and responsible persons.
5. Monitor risk controls through periodic audits and staff reporting.
6. Review and update the risk register quarterly or after significant events.

Risk Categories:

- Clinical (falls, pressure injuries, medication errors)
- Environmental (fire, infection, physical hazards)
- Financial and operational (fraud, non-compliance)
- Workforce (staff shortages, injury, burnout)
- Technological (cybersecurity, data integrity)

Monitoring and Review:

- Risk register updated quarterly.
- Regular risk review meetings to ensure adequate control effectiveness.
- Annual external audit to assess compliance with ISO 31000:2018.
- Continuous improvement driven by incident trend analysis.

Associated Policies:

- Incident Management and Reporting Policy
- Emergency and Disaster Management Policy
- Occupational Health and Safety Policy
- Dignity of Risk Policy
- Clinical Governance Policy

Evidence and Records:

- Risk register
- Risk assessments and audit reports
- Meeting minutes and action plans

- Staff training logs

Policy Control:

Version	Effective Date	Review Date	Policy Owner	Approved By	Status
1.0	20 January 2026	20 January 2027	Quality & Compliance Manager	Approved Provider Board	Draft

Compliance Summary:

Entity Type	Entity Name	Completion Rate	Status
Policy	Risk Management Policy	100%	FULLY COMPLIANT (100%)