

Too

Safe Programs Planning Tool

C/2.1.8.2

Purpose

There are two planning options for use by congregations and presbyteries when planning for safe programs, events and activities for the Church. A Risk Assessment Template (excel document) or this tool (word document) are available for use. Both tools accompany the <u>Planning Safe Programs process</u> and <u>Safe Church Training – Planning Safe Programs</u>. Congregations and presbyteries should use the tool that suits their needs best. A risk assessment tool **must** be used on each occasion when planning activities, programs or events, and **must be approved** by the Church Council prior to the event program or activity commencing.

Scope

This tool can be used for all activities planned within the bounds of the Synod of Queensland and conducted as part of the ministries of Uniting Church congregations and faith communities, Presbyteries and Synod.

Proposed / planned activity

IDENTIFICATION AND CONTACT DETAILS		RECORD OF APPROVAL HISTORY (Council of the Church or their delegate to complete this section)			
Congregation or Presbytery responsible for the program		Checklist	Yes/No	Checklist	Yes/No
or activity	1. Venue		4. Activities		
Name of the program or activity		2. Leaders and helpers		5. Equipment	
Location of the program or activity		3. Participants		6. Records	
Proposed date, day, time of the program or activity		Name of person delegated by Church Council to assess plans and provide approval:			to assess
CONTACT PERSON (the person completing this form) Comments and conditions:					
Position					

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IDENTIFICATION AND CONTACT DETAILS		RECORD OF APPROVAL HISTORY (Council of the Church or their delegate to complete this section)			
Mobile phone number			Name of form	Council memb	er or delegate who reviewed this
Email address			Date of ap	proval:	Date of church council meeting minute:
1. THE VENUE					is for the feedback and of the Council of the Church (or e)
Checklist		Comments		Council / delo	egate comments
Does the venue appear to be clean, free of hazards and in g	good repair?				
Have I reported any known or identified hazards to the chuvenue owner for remedy?	rch council or				
Is the venue's physical environment suitable for the activitie	es and group?				
If the venue is not church property, does the owner hold ins	surance?				
Do I have a copy of the Emergency Response Plan (ERP) for council or for the location of the activity?	the church				
Do leaders and helpers know about the ERP?					

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2. THE ACTIVITY Refer to Planning Safe Programs Procedure, complete the risks and mitigations and the questions that follow. (Do not change the risk level or mitigations for items already listed and shaded).	Council / delegate comments
Provide a description of the proposed activities below. (Add rows as needed)	

Risks and mitigations						
Likelihood Check the 'descriptors'	Consequence Check the 'descriptors'	Risk level Check the 'risk matrix'	How to reduce risk Check the 'actions to take' 'mitigations'	Revised Risk Level (mitigations in Place)		
Occasional	Major	High Risk	All volunteers are screened and approved	Medium		
Occasional	Major	High Risk	All volunteers are trained, work in pairs, sign Statement of Personal Commitment and Supervised	Medium		
Occasional	Minimal	Low Risk	Volunteers are skilled for the task and well briefed on the purpose	Low		
Occasional	Major	High Risk	Volunteers are aware of mandatory reporting processes and have received training	Medium		
	Check the 'descriptors' Occasional Occasional	Likelihood Check the 'descriptors' Consequence Check the 'descriptors' Occasional Major Occasional Major Occasional Minimal	Likelihood Check the 'descriptors' Consequence Check the 'descriptors' Risk level Check the 'risk matrix' Occasional Major High Risk Occasional Major High Risk Occasional Minimal Low Risk	Likelihood Check the 'descriptors' Consequence Check the 'descriptors' Risk level Check the 'risk matrix' How to reduce risk Check the 'actions to take' 'mitigations' Occasional Major High Risk All volunteers are screened and approved Occasional Major High Risk All volunteers are trained, work in pairs, sign Statement of Personal Commitment and Supervised Occasional Minimal Low Risk Volunteers are skilled for the task and well briefed on the purpose Occasional Major High Risk Volunteers are aware of mandatory reporting processes and have		

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Likeli	hood descripto	rs				
1	Frequent (Almost Certain)	s expected to occur again either immediately or within a short period of time (likely to occur most weeks or months)				
2	Probable (Likely)	Il probably occur in most circumstances (several times a year)				
3	Occasional (Possible)	obably will occur at some time (May happen every 1-2 years)				
4	Uncommon (Unlikely)	Possibly to occur at some time in 2-10 years				
5	Rare (Remote)	Unlikely to occur only in exceptional circumstances (May happen every 10-30 years)				
Cons	equence descri	ptors				
1	Extreme	Results in a fatality or permanent disability to one or more people, significant or total destruction to property and have very severe reputational impact.				
2	Major	Hospital admission and/or severe injury, major property damage is sustained, and it may have major reputational impact.				
3	Moderate	Paramedics or comparable medical treatment is required, moderate property damage occurs, and it may have some reputational impact.				
4	Minor	First aid is required, minor property damage is sustained and there is only a low reputational impact.				
5	Minimal	Near miss with no injury or minor injury occurs, property damage is very limited and very limited chance of reputational impact.				

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Risk Matrix

		Consequence				
		Extreme	Major	Moderate	Minor	Minimal
	Frequent (Almost Certain)	Extreme	Extreme	High	Moderate	Moderate
	Probable (Likely)	Extreme	Extreme	High	Moderate	Moderate
Likelihood	Occassional (Possible)	Extreme	High	High	Moderate	Low
	Uncommon (Unlikely)	Extreme	High	Moderate	Low	Low
	Remote (Rare)	High	Moderate	Moderate	Low	Low

Actions to Take

Extreme	The proposed task or activity must not proceed. It can only proceed if steps can be taken to lower the risk levels as low as possible. Final approval must be provided by the Congregation Council and Synod Office Manager Risk and Compliance.
High	The proposed task or activity can only proceed if steps have been taken to lower the risk levels as low as possible. All steps taken need to be documented and a review of the effectiveness of the controls should occur after the activity. Congregation Council approval should be obtained for the activity.
Moderate	The proposed task or activity can proceed with risk controls measures implemented to lower the risk levels as low as possible. All steps taken need to be documented and a review of the effectiveness of the controls should occur after the activity.
Low	The proposed task or activity can proceed. Routine management procedures should still be in place to minimise the risk of even a minor incident occurring.



3. THE EQUIPMENT		
List the equipment being used for the activity (Add rows if you need to)	Is the equipment in good repair and appropriate for the purpose and the participants abilities?	Council / delegate comments
4. THE PARTICIPANTS		
Consider the needs, abilities and preferences of the participants for whom the activities are being planned. Below are some checklist questions to assist you.	Yes / No / Notes	Council / delegate comments
Have participants been involved in decisions that affect them? See <u>Tools for Listening</u> for assistance.		
What is the age range and capabilities of the participants?		
If the activity involves children or vulnerable people, has an attendee information form been completed for each participant?		
Have these forms been reviewed and the children and participant's specific and additional needs noted?		
Have the additional needs and abilities of children and participants been considered in this planning?		



If not, how will the additional needs and abilities of specific and individual children and participants be catered for?		
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5. THE LEADERS AND HELPERS

Who will be helping and for what will they be responsible? (Add rows if required)

Name	Role	Appointment by Church Council? Yes/no	Name	Role	Appointment by Church Council? Yes/no



Detailed checklist of proposed leaders and helpers	Yes / No	Comments/ actions	Council / delegate comments
Does each person hold a current and valid blue card or exemption card if the activity is for children?			
Has the church council approved and appointed each person?			
Has each person signed the Statement of personal commitment ?			
Has each person received training?			
Does each person have appropriate skills, qualifications for their role?			
Is there an allocated first aid officer for the activity?			
Have designated drivers agreed to and signed the Driver information form? Are the drivers approved to transport children? (if the program activity or event is for children)			
Is there a minimum of two adult leaders/helpers? (The ratio requirements are also outlined in the Statement of Personal Commitment). A ratio of one worker for every six children in an activity for participants aged five years and over and one worker for every four children aged below five years is required. Note that this ratio may need to be increased , if the children or participants have additional needs which require a high level of care or supervision in order to participate safely in the planned activity or program.			

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Are there enough leaders for the expected number of children or participants, noting any special care or supervision requirements?	
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RECORDS					
Checklist	Comments	Council / delegate comments			
Has someone been allocated to maintain the records of attendees (personal information, permission, attendance)?					
Has it been agreed where (or with whom) records will be securely stored?					

Post-activity review

After the activity is completed, and in the event of identified risks manifesting, complete the review questions and plan post-activity tasks.						
What went well?						
What did not go well?						
What, if any, reports need to be completed?						
What changes do we need to make for next time?						
Tasks to be done	By whom?	By when?	Date completed			
1						
2						
3						

4	
5	

Revisions

Document number C/2.1.8.2					
Version	Approval date	Approved by	Effective date	Policy owner	Policy contact
5.0	16.01.2024	Strategic Risk Manager	16.01.2024	Strategic Risk Manager	Safe Church Assurance and Support Officer
Next scheduled review 15.10.2027					