RISK MANAGEMENT FORM - This form needs to be completed prior to starting, reviewed annually or when changes occur



Educator’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date completed: \_\_/\_\_/\_\_

ANALYSE THE RISKS

Activity: **Alterations to the Residence**

Elimination / Control measures:

* Office notified prior to alteration
* Parents are informed beforehand about alterations, signed “Alterations to the home form” both of these forms have been emailed to the office prior to commencing
* All existing control to “Inside the Residence” and “Outdoor Play Areas”
* All visitors who come into FDC area; sign the “Visitor book”
* Educators have taken into consideration noise levels of work been undertaken and the comfort of the children
* Children are under educator’s constant supervision and direction
* Discuss with trades person about leaving tools lying around
* Ensure safe access to fire exit
* Workers are aware this is a FDC premises
* If workers smoke they have a designated smoking area away of area used for FDC if not possible NO smoking on property
* The area, alteration is being made to is sectioned off with appropriate barrier that a child under school age cannot climb over, under or through it.

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| --- | --- | --- | --- |
| **Hazards Identified** | **Likelihood of risk occurring** | **Consequences** | **Level of Risk (use Matrix)** |
| Child Abuse | Unlikely | Significant | Moderate |
| Abduction | Rare | Major | Moderate |
| Injury to child or visitor | Rare | Moderate | Low |
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