

## APPENDIX III

### PROBUS CLUB OF SYDNEY INC.

Incorporation Number 9880410



PROBUS CLUB NO. 54300

# RISK MANAGEMENT POLICY

ADOPTED BY THE CLUB at a GENERAL MEETING held on \_\_\_\_\_

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# RISK MANAGEMENT POLICY

## 1.0 INTRODUCTION

The Probus Club of Sydney Inc. recognises the need to minimise the potential risks to Members and Visitors which may occur as a result of their participation in the activities of the Club.

It is important to the overall enjoyment of the Club that potential areas of risk be identified, and action be taken to reduce the possibility of injury and risk exposure.

This Policy is designed to provide confidence and guidance for Officers, Committee and Sub-Committee members and leaders of activities, outings and tours to carry out their roles within the Club.

Nothing in this policy is designed to restrict the enjoyment of Members' or Visitors' participation in the activities of the Club.

## 2.0 PURPOSE

The purpose of this Policy is threefold:

1. To promote a safe environment for the operation of the Club
2. To draw attention to procedures that could minimise the risk of injury
3. To suggest a number of important areas that should receive attention in order that a safe environment may be provided for Members, Visitors and Guests

## 3.0 SAFETY AND PROTOCOL

### 3.1 *The Meeting Venue*

The Committee shall ensure its members exercise, and emphasise to others, a reasonable duty of care is a personal responsibility, and that:

1. All persons present are aware of the location of exits, evacuation assembly point and the procedures to be followed in the case of an emergency.
2. Access to a First Aid Kit is available for use at all meetings.
3. The location of any defibrillator is advised.
4. All power leads, microphone cables and other fittings are properly secured, covered and checked by the Club Services Committee Member
5. A record of all members, guests or visitors attending the meeting is maintained by the Membership Member

### 3.2 *Food Service*

Where the Probus Club of Sydney Inc. delivers food and beverage services to the Club Members and Visitors

(noting that this does not apply to such services provided by third parties) the Committee shall be responsible for:

1. Setting up and the cleanliness of facilities.
2. Good hygiene practices being undertaken and observed.

### **3.3 Events, Tours, Activities and Outings**

1. The appointed officers shall manage all approved club activities with the assistance of delegated sub-committee members.
2. A First Aid Kit is to be available for use at all activities, where practicable.
3. A record of members, visitors and guests, and their contact phone numbers, attending is to be maintained by the person responsible for conducting the event.
4. Any incidents/accidents/injuries are to be recorded and, for insurance purposes, are reported to PSPL by the person responsible for conducting the event. The person responsible attending the event should take with them a copy of the **ACCIDENT / INJURY / INCIDENT REPORT** form included as Annexure 'A' to this Risk Management Policy.

### **3.4 Members' Responsibilities**

Members shall be requested by the Chairman of a meeting or an Event Leader to minimise the risk of injury to themselves, other members, guests and visitors by:

1. Adopting a pro-active approach to safety by looking out for potentially dangerous situations and acting accordingly with regard to the safety of themselves and that of others.
2. Participating only in those Club activities where their state of health and mobility are such that they will not pose a risk to themselves or others.

### **3.5 Review**

The Committee shall review this policy after any reported incident/accident/injury and from time to time at a frequency of not less than every second year to ensure it meets the Club's ongoing requirements.

**PROBUS CLUB OF SYDNEY INC.**

**ACCIDENT / INJURY / INCIDENT REPORT**

Date \_\_\_/\_\_\_/\_\_\_\_\_

Tick where applicable:

Accident       Injury       Incident

Name of injured person(s) (1) \_\_\_\_\_ (2) \_\_\_\_\_

\*Injury details to be completed on separate sheet.

Location of Accident / Injury / Incident.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of Persons present at Meeting / Activity / Outing / Tour \_\_\_\_\_

Describe the activities of all parties involved at the time of the Accident / Injury / Incident.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cause of Accident / Injury / Incident.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of Persons Injured (if applicable). \_\_\_\_\_

Was the Ambulance Service called? Yes \_\_\_ No \_\_\_      Were the Police notified? Yes \_\_\_ No \_\_\_

If yes by whom? \_\_\_\_\_ At what time and date? \_\_\_\_\_

Name of Ambulance Officer in charge of treatment \_\_\_\_\_

Name of Police Officer in attendance \_\_\_\_\_ Police Station \_\_\_\_\_

Accident / Injury / Incident first reported to.  
 Name \_\_\_\_\_ Position within the Club \_\_\_\_\_  
 Home Address \_\_\_\_\_ Post Code \_\_\_\_\_  
 Home Phone ( ) \_\_\_\_\_ Mobile Phone \_\_\_\_\_  
 Date Reported \_\_\_\_\_ Time report made \_\_\_\_\_  
 If any significant delay in reporting event, please state reasons \_\_\_\_\_  
 \_\_\_\_\_

Witnesses to Accident / Injury / Incident. (at least two required)  
 Name \_\_\_\_\_ Name \_\_\_\_\_  
 Address \_\_\_\_\_ Address \_\_\_\_\_  
 \_\_\_\_\_ Post Code \_\_\_\_\_ \_\_\_\_\_ Post Code \_\_\_\_\_  
 Telephone \_\_\_\_\_ Telephone \_\_\_\_\_  
 Mobile \_\_\_\_\_ Mobile \_\_\_\_\_

Accident / Injury / Incident referred to \_\_\_\_\_ (name of official)  
 Confirm recorded in Minutes Yes/No Date \_\_\_/\_\_\_/\_\_\_\_\_  
 Confirm notification to Probus South Pacific Limited. Yes/No Date \_\_\_/\_\_\_/\_\_\_\_\_  
 \_\_\_\_\_

Name of injured person(s) (1) \_\_\_\_\_

Details of injury:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Name of injured person(s) (2) \_\_\_\_\_

Details of injury:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_