

# [Name of Service] Risk Assessment

## Service Level Risk Assessment

### Risk assessment methodology

The purpose of this document is to assess and mitigate known risks at the service level.

**Table 1 – Risk Likelihood Scorecard**

Risk Likelihood Ratings	Risk Certainty	Risk Frequency
<b>Almost Certain and Highly Probable</b>	Expected to occur frequently and in most circumstances.	An event or activity that happens frequently during the year that could cause a risk to occur.
<b>Likely and Probable</b>	Expected to occur in many circumstances.	An event or activity that occurs once in every year that could cause a risk to occur.
<b>Possible</b>	Expected to occur in some circumstances.	An event or activity that occurs once in every 3 years that could cause a risk to occur.
<b>Unlikely</b>	Expected to occur in few circumstances.	An event or activity that occurs once in every 5 years that could cause a risk to occur.
<b>Rare and remote</b>	May only occur in exceptional circumstances. This event is known to have occurred elsewhere.	An event or activity that occur once in more than every 5 years that could cause a risk to occur.

*The likelihood is used together with the risk consequences rating (i.e.*

*low, medium, high or critical) to calculate the preliminary overall risk rating (low, medium or high) using the Risk Calculation Scorecard (see Table 2).*

**Table 2 – Risk Calculation Scorecard**

Likelihood	Risk Consequences			
	Low	Medium	High	Critical
<b>Almost Certain and Highly Probable</b>	Medium	High	Critical	Critical
<b>Likely and Probable</b>	Medium	High	Critical	Critical
<b>Possible</b>	Medium	Medium	High	Critical
<b>Unlikely</b>	Low	Medium	Medium	High
<b>Rare and remote</b>	Low	Low	Medium	High

Risk Consequences (impact and severity)			
CRITICAL	HIGH	MEDIUM	LOW
-Death or life threatening injury of any person arising from the carrying out of MA business -Child or young person is missing or has been abducted and there are fears for their safety and wellbeing -Major security incident (e.g. fire, bomb threat, hostage situation) -Alleged criminal behaviour where a child or young person is significantly harmed	-Serious physical or psychological injury of any person arising from the carrying out of MA business -Dangerous incidents as defined by the <i>Work Health Safety Act</i> -Non serious injury where there has been a pattern of non-serious injury arising from the carrying out of MA business -Child or young person is likely to suffer harm -Child or young person is using substances which pose a significant risk to their health and wellbeing. -Child or young person is having or likely to have contact with a person who may cause them significant harm.	-Non serious injury requiring treatment from a medical practitioner, arising from the carrying out of MA business. -Child or young person experiences a mental health episode that requires medical intervention. -Child or young person displays increased risk taking behaviours which poses an increase risk to themselves or others. -Child or young person is at risk of harm and/or neglect which requires a harm report to be made. -Child or young person is absent without permission and their location is known -Child or young person is responsible for noticeable property damage.	No injury or an injury that can be treated with first aid arising from the carrying out of MA business.

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## Service Description:

Describe your service as it related to the risks identified below.

RISK OWNER	RISK ASSESSMENT PLAN UPDATED ON:	NEXT SCHEDULED REVIEW

## Risk Assessment Plan

RISK NUMBER	RISK DESCRIPTION	RISK LIKELIHOOD	RISK CONSEQUENCE	RISK CALCULATION
1		Choose an item.	Choose an item.	Choose an item.
2		Choose an item.	Choose an item.	Choose an item.
3		Choose an item.	Choose an item.	Choose an item.
4		Choose an item.	Choose an item.	Choose an item.

RISK NUMBER	RISK FACTOR(S)	PROTECTIVE FACTORS	PROPOSED ACTIONS	PERSON RESPONSIBLE	DUE DATE
1					

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<b>RISK NUMBER</b>	<b>RISK FACTOR(S)</b>	<b>PROTECTIVE FACTORS</b>	<b>PROPOSED ACTIONS</b>	<b>PERSON RESPONSIBLE</b>	<b>DUE DATE</b>
2					
<b>RISK NUMBER</b>	<b>RISK FACTOR(S)</b>	<b>PROTECTIVE FACTORS</b>	<b>PROPOSED ACTIONS</b>	<b>PERSON RESPONSIBLE</b>	<b>DUE DATE</b>
3					

# [Name of Service] Risk Assessment

RISK NUMBER	RISK FACTOR(S)	PROTECTIVE FACTORS	PROPOSED ACTIONS	PERSON RESPONSIBLE	DUE DATE
3					
4					
4					
4					

Authorised Leader: [Click or tap here to enter text.](#)

Approved? Y  N

Plan Completed By:

Date Initial Plan Completed: [Click or tap to enter a date.](#)