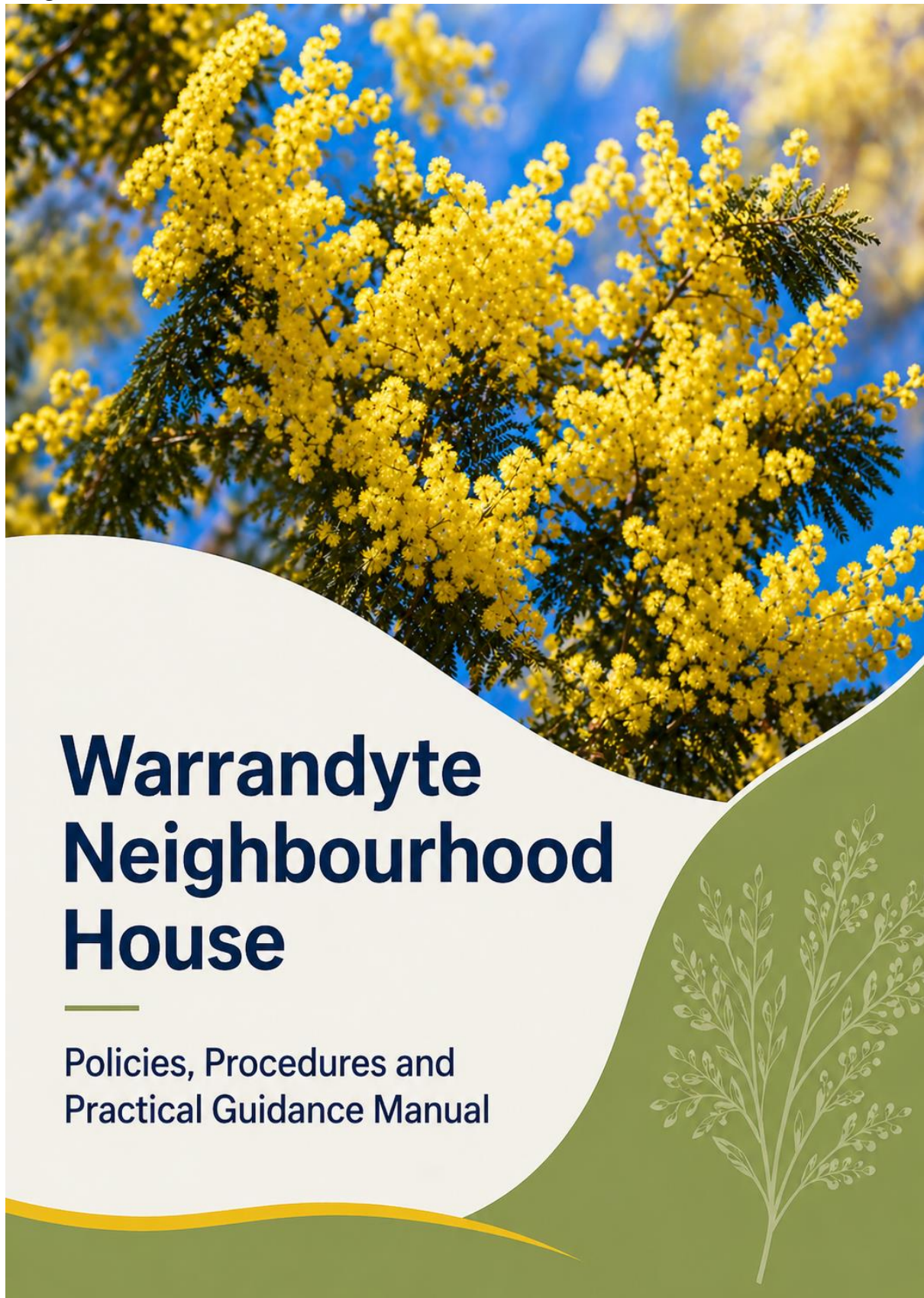




Warrandyte Neighbourhood House

Policies, Procedures and
Practical Guidance Manual



Introduction

Warrandyte Neighbourhood House has been part of the local community for over 30 years, providing a welcoming, inclusive, and supportive environment for people to connect, learn, and participate.

As a not for profit organisation, Warrandyte Neighbourhood House is governed by a volunteer Board of Governance and supported by a small team of part time staff. Our programs are delivered through a combination of professional tutors and dedicated volunteers, reflecting a strong community-led approach.

We offer a range of low cost courses, clubs, workshops, and talks designed to be accessible, engaging, and responsive to community needs. The organisation values participation, inclusion, and creating opportunities for people to build skills, relationships, and confidence in a friendly and supportive setting.

Purpose of this Manual

This manual sets out the policies, procedures, and practical guidance that support the governance and operation of Warrandyte Neighbourhood House.

It provides a clear framework for Board members, staff, and volunteers to understand their roles, responsibilities, and expectations, and to ensure that the organisation operates in a consistent, safe, and accountable manner.

The manual supports:

- Effective governance and decision making
- Compliance with legal, funding, and regulatory requirements
- Safe and inclusive practices for all participants
- Clear and consistent operational processes
- Continuous improvement across the organisation

This document is intended to be practical and accessible, supporting day to day operations while maintaining strong governance and accountability.



Introduction	2
Purpose of this Manual	2
Aboriginal and Torres Strait Islander Acknowledgement and Statement	4
Child Safe Statement	5
Privacy statement	7
Governance Policy	9
Financial Management Policy	12
Risk Management Policy	14
Child Safe Policy	19
Privacy and Information Management Policy	22
Incident Management Policy	25
Complaints and Feedback Policy	28
Work Health and Safety Policy	31
Marketing and Social Media Policy	34
RISK Ratings	42
Risk Register	43
Emergency Incident Response Plan	45



Aboriginal and Torres Strait Islander Acknowledgement and Statement

Warrandyte Neighbourhood House acknowledges the Traditional Owners of the land on which we operate, the Wurundjeri Woi Wurrung people of the Kulin Nation, and pays deep respect to Elders past and present.

We recognise that sovereignty was never ceded. This land always was, and always will be, Aboriginal land.

We acknowledge the ongoing impacts of colonisation and the role that institutions, including community organisations, have played within systems that have not always been inclusive or equitable.

Warrandyte Neighbourhood House is committed to using its position in the community to contribute to positive change. This includes creating culturally safe and welcoming spaces, strengthening access and participation, and actively removing barriers where they exist.

We commit to listening, learning, and building respectful relationships with Aboriginal and Torres Strait Islander peoples and communities. We will seek to reflect this commitment in our governance, programs, partnerships, and day to day practice.



Child Safe Statement

Warrandyte Neighbourhood House is deeply and actively committed to the safety, wellbeing, and inclusion of all children and young people who engage with our programs, services, and facilities. This commitment is central to our mission as a community organisation.

We have an absolute zero tolerance for child abuse in any form and are unequivocally committed to acting in the best interests of children at all times. We firmly recognise that all children, regardless of their background, ability, or gender identity, have the fundamental right to feel safe, to be heard, and to be treated with respect. We actively work to dismantle barriers and ensure their full participation is supported within a safe, inclusive, and culturally sensitive environment.

We acknowledge and embrace our ethical and legal responsibility as a community organisation in creating environments where children are protected from all forms of harm. We implement robust systems where risks are not only identified but are managed proactively, consistently, and transparently. Child safety is not an add-on; it is fundamentally embedded in our governance structures, permeates our organisational culture, and guides our day-to-day operations.

We are committed to cultural safety for Aboriginal children, ensuring they feel connected, safe, and supported. We are committed to the full inclusion of children with disability, providing reasonable adjustments to facilitate their access and participation. Furthermore, we are committed to respecting and supporting children from culturally and linguistically diverse backgrounds, ensuring their unique needs and perspectives are understood and valued.

Warrandyte Neighbourhood House strictly upholds all Victorian Child Safe Standards (CSS), as set out in the *Child Wellbeing and Safety Act 2005 (Vic)*. Our commitment extends to full compliance with all relevant State and Commonwealth legislation, including the *Worker Screening Act 2020 (Vic)* and fulfilling all mandatory reporting obligations under the *Children, Youth and Families Act 2005 (Vic)*. We use the Child Safe Standards as a framework for continuous improvement in all our practices.

To maintain a secure environment, Warrandyte Neighbourhood House ensures that all Board members, staff, and volunteers who work with or near children are appropriately screened and vetted. This includes maintaining current and verified National Police Checks and valid Working with Children Checks (WWCC) where required by law. The organisation is officially registered with the relevant Victorian bodies to receive automatic notifications of any changes in the status of a WWCC, allowing us to act immediately on any risk.

We treat all concerns, allegations, and disclosures of harm or abuse with the utmost seriousness, sensitivity, and confidentiality. We have clear, established procedures to respond to such matters in line with our comprehensive Incident Management Policy and our



legal obligations, including mandatory reporting to relevant authorities where required. Retaliation against anyone raising a concern is strictly prohibited.

We are committed to ongoing evaluation and continuous improvement in our child safe practices. By fostering a vigilant, open, and accountable culture, we strive to maintain a safe, inclusive, and trusted environment for every child and young person who engages with Warrandyte Neighbourhood House.-----Relevant Legislation and Standards

- *Child Wellbeing and Safety Act 2005* (Vic)
- *Children, Youth and Families Act 2005* (Vic)
- *Worker Screening Act 2020* (Vic)
- Victorian Child Safe Standards (CSS) (Regulated by the Commission for Children and Young People)



Privacy statement

Protecting the privacy of everyone in our community, including participants, volunteers, members, and staff, is paramount at Warrandyte Neighbourhood House. This statement outlines our commitment to handling your personal information according to Australian privacy law, including the Australian Privacy Principles (APPs) in the *Privacy Act 1988 (Cth)*, and the *Privacy and Data Protection Act 2014 (Vic)*.

Information We Gather

We collect only the necessary information to connect you with our programs and services, such as your name, contact details, and activity participation. For staff and volunteers, we collect role-related information. Sensitive information, like health details, is only collected with your explicit permission, as required by the *Health Records Act 2001 (Vic)*.

How We Use It

We use your information exclusively to support our community:

- To operate, manage, and improve our services and programs.
- To keep you informed about House activities, events, and membership.
- To manage the day-to-day running of the House.
- To meet all legal and funding obligations.

Sharing Information

We will not share your personal information outside the Neighbourhood House without your clear agreement, unless:

- It is essential for providing the service you requested.
- The law requires or authorises us to share it.
- It is necessary to prevent a serious threat to someone's life, health, or safety.

Keeping Your Information Safe

We take strong measures to secure your personal information from misuse, loss, or unauthorised access, using appropriate security for both paper and electronic records.

Your Rights

You have the right to request access to the personal information we hold about you and to ask for corrections if it is inaccurate or incomplete. Contact the Neighbourhood House's Responsible Person to make a request.

Handling Data Incidents

In the event of a data breach likely to cause serious harm, we comply with the mandatory Notifiable Data Breaches (NDB) scheme under the *Privacy Act 1988 (Cth)*. We will promptly



notify you and the Office of the Australian Information Commissioner (OAIC).

Concerns

If you have privacy concerns, please first contact the Responsible Person at Warrandyte Neighbourhood House for resolution. If you remain unsatisfied, you may take your complaint to the OAIC (for *Privacy Act* issues) or the Office of the Victorian Information Commissioner (OVIC) (for Victorian public sector information issues).

For full details on our practices, please see the Warrandyte Neighbourhood House Privacy Policy.



Governance Policy

Policy number: G1

Version: V1

Drafted by: BOG

Approved by Board on:

Responsible person:

Scheduled review date:

Policy Statement

Warrandyte Neighbourhood House is committed to strong, transparent, and accountable governance that supports its purpose, ensures compliance, and maintains community trust.

1. Purpose

This policy sets out the governance framework for Warrandyte Neighbourhood House, including the role of the Board of Governance, the role of operational leadership, and the principles that guide authority, accountability, and decision making.

2. Scope

This policy applies to Board of Governance members, staff, and volunteers involved in governance, decision making, or delegated authority.

3. Principles

Warrandyte Neighbourhood House is governed in accordance with its Rules of Association, the *Associations Incorporation Reform Act 2012 (Vic)*, and relevant regulatory obligations.

Governance provides stewardship, accountability, strategic direction, and oversight.

Operational management is the responsibility of the Manager or equivalent operational lead.

Delegation supports efficient decision making, but accountability remains with the Board of Governance.

4. Relationship to the Rules

This policy operates alongside the Rules of Warrandyte Neighbourhood House.

The Rules are the primary governing document and prevail where there is any inconsistency.



Matters relating to membership, general meetings, committee composition, office bearer roles, elections, voting, financial management, records, and alteration of rules are governed by the Rules.

5. Role of the Board of Governance

The Board of Governance is responsible for:

- Strategic direction and planning
- Financial oversight and sustainability
- Risk oversight
- Policy framework
- Legal and regulatory compliance
- Appointment and oversight of the Manager

The Board acts in the best interests of the organisation and the community and remains accountable to the members of the Association.

6. Role of Operational Leadership

The Manager, or equivalent operational lead, is responsible for:

- Day to day operations
- Implementation of Board decisions
- Program delivery
- Management of staff and volunteers
- Operational risk management

Operational leadership works within approved budgets, policies, and delegated authority.

7. Delegation of Authority

The Board of Governance may delegate authority to staff, subcommittees, or individual Board members where appropriate and consistent with the Rules.

Delegated authority must be clearly documented, subject to any limits or conditions set by the Board, and may be varied or withdrawn at any time.

A separate Delegations Schedule sets out operational and financial authority levels.

8. Conflict of Interest

Board members must disclose and manage conflicts of interest in accordance with the Rules and relevant organisational policies.

A person with a material personal interest in a matter must not participate in decision making on that matter unless permitted by law and the Rules.

9. Decision Making and Accountability

The Board of Governance makes governance and strategic decisions through properly convened meetings.

Operational decisions are made by the Manager within delegated authority.

The Board remains accountable for decisions made under delegation and ensures appropriate oversight, reporting, and review.

10. Strategy and Risk Oversight

The Board of Governance is responsible for monitoring organisational strategy and overseeing key risks.

Risk management is undertaken in line with the Risk Management Policy, with operational risks managed by the Manager and escalated where required.

11. Review

This policy is reviewed every two years, or earlier if there is a change to the Rules, legislation, or governance arrangements.

References

- Rules of Warrandyte Neighbourhood House, 10 November 2016
- *Associations Incorporation Reform Act 2012* (Vic)
- Governance Institute of Australia, Good Governance Guide for Not-for-Profit Organisations (2024)
- Community Houses Network, Governance Handbook (2024)



Financial Management Policy

Policy number: G2

Version: V1

Drafted by: BOG

Approved by Board on: [Date]

Responsible person: [Name/Role]

Scheduled review date: [Date]

Policy Statement

Warrandyte Neighbourhood House is committed to responsible, transparent, and accountable financial management that supports its purpose and ensures the proper use of funds.

1. Purpose

This policy sets out how financial resources are managed to ensure sustainability, accountability, and compliance.

2. Scope

This policy applies to Board members, staff, and volunteers involved in financial processes or decision making.

3. Principles

Financial management supports the organisation's purpose and community outcomes. Funds are managed transparently and accountably, with appropriate controls to reduce risk. The organisation complies with all legal, regulatory, and funding requirements.

4. Role of the Board of Governance

The Board is responsible for approving the annual budget, monitoring financial performance, ensuring financial sustainability, maintaining oversight of financial risks, and ensuring appropriate financial controls are in place.

5. Roles and Responsibilities

The Treasurer provides oversight and supports compliance with financial obligations. The Manager is responsible for day to day financial operations, implementing the budget, maintaining accurate records, and ensuring controls are followed. Board members review financial reports and contribute to financial decision making.



6. Financial Controls

The organisation maintains appropriate financial controls, including separation of responsibilities where possible, approval of expenditure, authorisation of payments, accurate recording of transactions, and proper handling of income and cash.

7. Financial Reporting

Financial records must be accurate and up to date. Regular reports are provided to the Board, and annual financial statements are prepared in line with legal and funding requirements. Reports tabled at each Board meeting may include, or be requested by the board to include:

- Statement of Financial Performance (Profit & Loss)
- Statement of Financial Position (Balance Sheet)
- Cash Flow Statement/Report.
- Bank Reconciliations/Summary of Bank Balances.
- Grant Status Reports

8. Use of Funds

Funds must be used to support the organisation's purpose and must not be used for personal benefit. Board members are not paid for their governance role. Grant funding must be used in accordance with funding conditions.

9. Risk and Fraud Management

Financial risks are managed in line with the Risk Management Policy. Suspected fraud or irregularities must be reported and addressed appropriately.

10. Compliance

The organisation complies with all legal, financial, and funding obligations.

11. Review

This policy is reviewed every two years or earlier if required.

References

Associations Incorporation Reform Act 2012 (Vic)
Australian Accounting Standards (as applicable)
Australian Charities and Not-for-profits Commission guidance (as applicable)
Funding agreements and requirements (DFFH / NHCP)



Risk Management Policy

Policy number: G3

Version: V1

Drafted by: BOG

Approved by Board on: [Date]

Responsible person: [Name/Role]

Scheduled review date: [Date]

Policy Statement

Warrandyte Neighbourhood House is committed to identifying, assessing, and managing risk to protect people, resources, and reputation while supporting effective and sustainable operations.

1. Purpose

This policy sets out how risk is identified, assessed, and managed across the organisation.

2. Scope

This policy applies to Board members, staff, and volunteers involved in identifying or managing risk.

3. Principles

Risk management is integrated into governance and operations and supports informed decision making. The organisation takes a proactive and practical approach to risk and encourages reporting and management of risks.

4. Risk Appetite

Warrandyte Neighbourhood House adopts a defined risk appetite that balances the need to protect its core assets and comply with obligations against the necessity of driving community benefit, innovation, and growth.

The organisation's risk appetite is defined by the following principles:

- **Zero Tolerance** for risks that:
 - Compromise the safety or well-being of any person (staff, volunteer, or participant).
 - Result in a breach of legal, statutory, or mandatory funding obligations.
 - Threaten the fundamental financial integrity or long-term solvency of the organisation.
 - *Example:* Operating without mandatory Working With Children Checks (WWCC) for staff is a zero-tolerance risk.

- **Low Appetite** for risks related to financial stability and asset protection:
 - The organisation will take a cautious approach to financial commitments and debt.
 - It will only accept minor, quantifiable, and non-recurring financial losses that are within the operational budget's contingency.
- **Moderate Appetite** for reputational and stakeholder risks:
 - The organisation understands that public operation involves a risk of temporary negative publicity or complaints, and it is prepared to accept these risks provided they are managed transparently and do not cause long-term erosion of community trust.
 - Risks are acceptable where the potential community benefit significantly outweighs the potential negative publicity.
 - *Example:* Running a controversial but high-demand community forum on a sensitive local issue is acceptable, provided clear moderation and communication strategies are in place.
- **High Appetite** for innovation, program delivery, and operational improvement risks:
 - The organisation is willing to accept reasonable and calculated risks to deliver innovative community programs, pilot new service models, or improve operational efficiency, provided the risks are thoroughly assessed, understood, and proactively managed.
 - Risk-taking is encouraged where the potential for community impact and strategic objective achievement is high.
 - *Example:* Piloting a new, highly specialized program targeting an underserved community group, even if the initial funding is secured for a limited period, is encouraged, provided the exit strategy is defined.

5. Risk Tolerance

Risk tolerance defines the level of risk the organisation is willing to accept in specific categories to achieve its objectives, informed by the overall Risk Appetite (Section 4). It guides decision-making and resource allocation for control measures.

Risk Category	Tolerance Description (The maximum acceptable level of residual risk after controls are applied)	Management Action Guidance
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People Safety (Child Safety, Volunteer/Staff Safety, Participant Safety)	Zero Tolerance for Severe Harm: ABSOLUTELY NO exposure to risks resulting in death, serious injury, or major psychological harm. Residual risk must be Low or Very Low .	Implement robust, mandated controls (e.g., WWCC, Incident Management Policy, OHS training). Any risk assessed as "High" or "Extreme" must cease immediately or be escalated to the Board for urgent mitigation.
Legal and Regulatory Compliance	Zero Tolerance for Non-Compliance: NO acceptance of breaches of legislation (e.g., <i>Associations Incorporation Reform Act 2012</i> , WHS laws, funding agreements, Child Safe Standards). Residual risk must be Very Low .	Maintain mandatory compliance checklists, regular legal reviews, and mandatory training. Compliance risks are always prioritized for corrective action.
Financial Integrity and Sustainability	Low Tolerance for Loss: MINIMAL exposure to risks threatening financial viability, major fraud, or inability to meet financial obligations. Acceptable residual risk is Low .	Require separation of duties, mandatory dual signatory requirements for payments over a set threshold, monthly Board financial reporting, and annual audits/reviews. Operational budget variances must be managed within 10% tolerance unless Board approved.
Reputational and Stakeholder Trust	Moderate Tolerance: Acceptance of minor, temporary negative media or low-level complaint risks inherent in public operation, provided the organisation acts with integrity. NO acceptance of risks causing long-term damage to community trust. Residual risk should be Medium or Low .	Maintain transparent communication, a formal Complaints Policy, and an active community engagement strategy. Proactively address and report significant stakeholder concerns.

Programmatic and Operational	High Tolerance for Program Innovation: Willingness to accept reasonable risks associated with piloting new community programs, minor scheduling issues, or equipment failure, provided continuity of core services is maintained. Residual risk is acceptable up to Medium .	Require clear project plans, resource allocation, and a Service Continuity Plan. Operational issues must not impact core safety or legal requirements.
IT and Data Security (Privacy)	Low Tolerance: MINIMAL acceptance of risk leading to data breaches or significant IT service disruption, especially concerning sensitive personal information. Residual risk must be Low .	Implement mandatory password policies, regular data backups, and training on the Privacy Policy. Significant IT infrastructure investments are prioritized for risk reduction.

6. Role of the Board of Governance

The Board provides oversight of risk, sets and reviews risk appetite and tolerance, monitors key risks, and ensures appropriate controls are in place.

7. Role of the Manager

The Manager is responsible for identifying and managing operational risks, maintaining the risk register, implementing controls, and reporting risks to the Board.

8. Risk Identification and Assessment

Risks are identified and assessed regularly across areas including strategic, operational, financial, compliance, safety, and reputational risks using a defined matrix of likelihood and consequence to determine the inherent and residual risk ratings.⁹ Risk Management and Controls

Appropriate controls are implemented to reduce risks to acceptable levels, including prevention, mitigation, and response measures. Controls are monitored and reviewed for effectiveness.

10. Emergency and Continuity Considerations

Risk management includes consideration of emergency events (e.g., fire, flood, pandemic), continuity of services, and protection of people and facilities.



11. Incidents and Escalation

Incidents are managed in line with the Incident Management Policy. Serious risks and incidents are escalated to the Manager and, where appropriate based on the risk tolerance level, to the Board for immediate action and review.

12. Monitoring and Reporting

Risks are monitored regularly, with key risks reported to the Board at least quarterly and recorded in a maintained risk register. The Manager ensures controls are actively monitored.

13. Continuous Improvement

Risk management practices are reviewed and improved over time to ensure effectiveness and responsiveness to the changing operating environment.

References

- *Associations Incorporation Reform Act 2012* (Vic)
- Risk Management Information Handbook (Neighbourhood Houses Victoria)
- ISO 31000 Risk Management Principles and Guidelines (reference only)
- Incident Management Policy
- Warrandyte Neighbourhood House Delegations Schedule



Child Safe Policy

Policy number: G4

Version: V1

Drafted by: BOG

Approved by Board on: [Date]

Responsible person: Manager / Responsible Person for Child Safety

Scheduled review date: [Date]

Policy Statement

Warrandyte Neighbourhood House is committed to the safety, wellbeing, and inclusion of all children and young people and has absolute zero tolerance for child abuse. This commitment is non-negotiable and is the responsibility of every person associated with the organisation.

1. Purpose

This policy sets out how Warrandyte Neighbourhood House ensures the safety and wellbeing of children and young people across all activities, meets its legal and ethical obligations, and complies with the 11 Victorian Child Safe Standards (CSS).

2. Scope

This policy applies to all Board members, staff (paid and unpaid), volunteers, contractors, casual hires, program tutors, and any person engaged in activities, programs, or services involving children and young people under 18 years of age.

3. Principles

Warrandyte Neighbourhood House recognises that all children have the fundamental right to feel safe, be heard, and be respected. Child safety is actively embedded in governance, organisational culture, and everyday practice.

The organisation is committed to:

- **Cultural Safety:** Ensuring the cultural safety of Aboriginal children and young people.
- **Inclusion:** Ensuring the inclusion of children and young people with disability, by making reasonable adjustments and providing appropriate support.
- **Diversity:** Respecting and supporting children and young people from culturally and linguistically diverse backgrounds, and those who identify as LGBTIQ+.
- **Empowerment:** Promoting the rights of children and actively encouraging their participation in decisions that affect them.

4. Child Safe Practices

The organisation implements robust systems and practices, in line with the Child Safe Standards, to prevent harm and support safe participation. Key practices include:

- **Code of Conduct:** Maintaining a clear Code of Conduct that establishes behavioural boundaries and expectations for appropriate staff/volunteer-child interactions, prohibiting abusive behaviour, and promoting professional boundaries.
- **Recruitment and Screening:** Ensuring all Board members, staff, and volunteers who work with children are appropriately screened and vetted. This includes maintaining a current National Police Check and a valid Working with Children Check (WWCC) where applicable, which must be verified upon engagement and kept current. Warrandyte Neighbourhood House is registered as an organisation on relevant WWCC registrations to receive notification of any changes in status.
- **Environment:** Designing and maintaining physical and online environments that minimise opportunities for harm, ensure visibility, and promote safety.
- **Supervision:** Providing appropriate levels of supervision for all activities involving children.
- **Communication:** Having clear communication strategies to promote children's participation and inform them about their rights, expectations, and how to raise concerns.

5. Risk Management

Specific risks to children are identified and managed proactively as an integrated part of the organisation's broader Risk Management Framework (Policy G3).

This involves:

- Conducting formal risk assessments for all programs, activities, and environments involving children.
- Implementing targeted controls to mitigate identified risks, particularly concerning online safety, physical safety, and recruitment processes.
- Regularly reviewing the Child Safety Policy and associated practices to ensure they remain effective.

6. Reporting and Response

All concerns, allegations, or disclosures relating to child abuse, harm, or breaches of the Code of Conduct must be reported immediately, regardless of how minor the concern may seem.

- **Internal Reporting:** Reports must be made to the Manager (Responsible Person) immediately, who is responsible for managing the initial response and record-keeping.
- **Incident Management:** All reports are managed in strict adherence to the **Incident Management Policy (G7)**, ensuring sensitivity, confidentiality, and due process.
- **Mandatory Reporting:** Where required by law, mandatory reporting obligations must be followed, including immediately reporting to Victoria Police or the Department of Families, Fairness and Housing (DFFH) Child Protection, or other relevant statutory bodies, in accordance with the *Children, Youth and Families Act 2005 (Vic)* and other legislation.
- **Confidentiality:** Information will be managed confidentially on a "need to know" basis to protect the privacy of those involved, while ensuring the safety of the child is paramount.

7. Training and Awareness

Staff, volunteers, and Board members are provided with appropriate induction and ongoing training and awareness sessions to ensure they:

- Understand their responsibilities under the Child Safe Policy and Code of Conduct.
- Can identify potential signs of child abuse or harm.
- Know how to respond to disclosures and follow mandatory reporting requirements.
- Are aware of the organisation's commitment to cultural safety and inclusive practices.

8. Continuous Improvement

Child safety is a continuous journey. Practices are reviewed, monitored, and audited regularly by the Board and Management to ensure compliance with the Victorian Child Safe Standards and to respond effectively to emerging risks and changes in the operating environment.

References

- *Child Wellbeing and Safety Act 2005 (Vic)*
- *Worker Screening Act 2020 (Vic)*
- Victorian Child Safe Standards (CSS)
- Incident Management Policy (G7)
- Risk Management Policy (G3)



Privacy and Information Management Policy

Policy number: G5

Version: V1

Drafted by: BOG

Approved by Board on: [Date]

Responsible person: Manager

Scheduled review date: [Date]

Policy Statement

Warrandyte Neighbourhood House is committed to protecting the privacy and confidentiality of personal information and maintaining strong, secure, and compliant information management practices in accordance with Australian and Victorian legislation.

1. Purpose

This policy sets out how personal and organisational information is collected, used, stored, protected, retained, and managed to support services, operations, and compliance with the Australian Privacy Principles (APPs) and the *Privacy and Data Protection Act 2014 (Vic)*.

2. Scope

This policy applies to all Board members, staff (paid and unpaid), volunteers, contractors, and any person handling or accessing information, systems, or records on behalf of the organisation, including physical and digital data.

3. Principles

Information is managed lawfully, ethically, securely, and transparently. Key principles include:

- Only information necessary for the organisation's functions and activities will be collected.
- Personal information is collected with consent where appropriate, and individuals are aware of the purpose of the collection.
- Information security is prioritised to prevent unauthorised access or data loss.
- The organisation is accountable for all information under its control. Collect only information necessary for the organisation's functions and activities.

4. Collection and Use of Information

Personal information (e.g., name, contact details, program attendance) is collected directly from the individual where possible and is used for specific, legitimate purposes, including:



- Delivering, administering, and improving Neighbourhood House programs and services.
- Processing membership and maintaining communication.
- Managing staff and volunteer records (e.g., screening, training, payroll).
- Complying with funding, legal, and reporting obligations.
- **Sensitive Information:** Sensitive information (e.g., health information) is only collected with explicit consent or when legally required, and is handled in line with the *Health Records Act 2001 (Vic)*.

5. Disclosure

Personal information will not be disclosed to a third party without the individual's clear agreement, unless:

- The disclosure is reasonably expected by the individual and relates directly to the primary purpose of collection.
- The disclosure is required or authorised by law (e.g., mandatory reporting, subpoena).
- The organisation has reasonable grounds to believe it is necessary to prevent a serious threat to the life, health, or safety of any individual or to public health or safety.
- The disclosure is required for compliance with funding body requirements.

6. Information Security and Data Breach Management

The organisation takes reasonable steps to protect information from misuse, interference, loss, unauthorised access, modification, or disclosure:

- This includes using secure password protection, encryption, physical secure storage for paper records, and controlling access to both digital and physical files.
- In the event of a data breach that is likely to cause serious harm, the organisation will comply with the mandatory Notifiable Data Breaches (NDB) scheme under the *Privacy Act 1988 (Cth)*, which includes prompt notification to affected individuals and the Office of the Australian Information Commissioner (OAIC).

7. Records Management

Records are maintained in a structured and secure manner. Information is retained for the minimum period required to meet legal, regulatory, and organisational requirements (e.g., funding body requirements, tax law) and is disposed of securely when no longer needed.

8. Access and Correction



Individuals have the right to request access to the personal information held about them and to ask for corrections if the information is inaccurate, incomplete, or out of date. Requests must be made in writing to the Responsible Person and will be addressed promptly.

9. Continuous Improvement

Information management practices and technologies are reviewed and improved over time to maintain effectiveness, security, and compliance with evolving legislation.

10. Review

This policy is reviewed every two years or earlier if there is a change to legislation or significant changes in the organisation's information handling practices.

References

- *Privacy Act 1988* (Cth) (including the Australian Privacy Principles)
- *Privacy and Data Protection Act 2014* (Vic)
- *Health Records Act 2001* (Vic)
- Office of the Australian Information Commissioner (OAIC) Guidance



Incident Management Policy

Policy number: G7

Version: V1

Drafted by: BOG

Approved by Board on: [Date]

Responsible person: Manager

Scheduled review date: [Date]

Policy Statement

Warrandyte Neighbourhood House is committed to responding to all incidents, hazards, and near misses promptly, safely, fairly, and proportionately. The process ensures the safety and wellbeing of all individuals, minimises harm, supports effective recovery, and drives continuous improvement in risk management.

1. Purpose

This policy sets out the clear procedures for how incidents are identified, reported, assessed, managed, and reviewed to ensure a consistent, accountable, and legally compliant response.

2. Scope

This policy applies to all Board members, staff, volunteers, participants, contractors, and any person involved in activities or utilising the facilities of the organisation. An incident includes any event or situation that results in, or has the potential to result in, injury, illness, property damage, harm, financial loss, reputational damage, or a breach of policy or law.

3. Principles

- **Safety First:** The immediate safety and wellbeing of affected individuals is the absolute priority.
- **Consistency:** Incidents are managed using a consistent process regardless of severity.
- **Fairness:** All parties involved in an incident are treated with respect and fairness.
- **Learning:** Information gathered from incidents is used to identify root causes, improve systems, strengthen controls, and reduce future risk.

4. Incident Identification and Reporting

- **Obligation:** All Board members, staff, and volunteers have an obligation to report any incident, hazard, or near miss as soon as practicable to the Manager or the designated Responsible Person.
- **Reporting Tool:** All reports must be documented on the organisation's Incident Report Form, detailing the what, when, where, and who, and any immediate actions taken.



- **Serious Incidents:** Serious incidents (defined in Section 6) must be reported to the Manager immediately by phone or in person, followed by a written report within 24 hours.

5. Incident Assessment and Management

The Manager, or delegated authority, is responsible for the overall management of the incident response:

- **Immediate Action:** Securing the scene, ensuring first aid or emergency services are called, and addressing the immediate safety of all individuals involved.
- **Assessment:** Rapidly assessing the incident's severity, risk, and category (e.g., OHS, child safety, financial, reputational).
- **Follow-Up:** Determining necessary actions, which may include internal investigation, notifying insurers, implementing immediate corrective actions, and providing support to affected individuals.

6. Escalation and Board Notification

The Board must be informed of serious incidents as soon as possible, and at least at the next scheduled meeting. Serious incidents include those involving:

Criteria for Board Notification	Example Incidents
Major Safety	Serious injury requiring medical attention, death, or major psychological harm.
Child Safety	Any allegation, disclosure, or suspicion of child abuse or a breach of the Child Safe Policy.
Legal/Compliance	Mandatory reporting obligations, police involvement, or a breach of law/funding contract.
Financial	Suspected fraud, theft over a threshold set in the Financial Management Policy, or major unexpected financial loss.
Reputational	Incidents likely to attract significant negative media attention or cause long-term erosion of community trust.

7. Mandatory Reporting

Where an incident meets the threshold for mandatory reporting, the Manager must ensure reporting is completed to the relevant external authorities (e.g., Police, Child Protection, WorkSafe, funding bodies) in line with legal obligations and the **Child Safe Policy (G4)**.

8. Documentation and Record Keeping

All incident reports, investigation findings, follow-up actions, and communications must be documented accurately and retained securely as organisational records in line with the **Privacy and Information Management Policy (G5)**. Confidentiality must be maintained throughout the process.

9. Review and Continuous Improvement

The Manager must lead a formal review of all serious incidents to:

- Determine the root cause.
- Assess the adequacy of existing controls.
- Identify and implement necessary systemic improvements (e.g., policy change, training, physical controls).
- A summary of incident trends and resulting improvements must be reported to the Board quarterly as part of the risk oversight process

References

- Risk Management Policy (G3)
- Child Safe Policy (G4)
- Work Health and Safety Policy (G10)
- Complaints and Feedback Policy (G8)

Complaints and Feedback Policy

Policy number: G8

Version: V1

Drafted by: BOG

Approved by Board on: [Date]

Responsible person: Manager

Scheduled review date: [Date]

Policy Statement

Warrandyte Neighbourhood House is committed to a culture of openness, accountability, and continuous improvement. We welcome and actively encourage feedback and complaints from all stakeholders as an essential mechanism to improve services, strengthen relationships, and ensure accountability.

1. Purpose

This policy establishes the framework for how complaints and feedback are received, managed, investigated, and resolved in a manner that is fair, transparent, accessible, and consistent.

2. Scope

This policy applies to all complaints and feedback received from community members, participants, clients, staff, volunteers, Board members, and other external stakeholders regarding the conduct, services, programs, or staff of the organisation.

3. Principles

- The process is accessible to all, providing support (e.g., assistance with written complaints) where needed.
- All complaints are managed confidentially, with information shared only on a strict 'need to know' basis, in line with the Privacy and Information Management Policy (G5).
- Individuals can raise concerns without fear of retribution or disadvantage.
- Complaints are acknowledged and resolved promptly, ensuring all parties are treated with impartiality and respect.

4. Receiving Complaints and Feedback

Complaints and feedback may be made verbally, in writing (email or formal letter), or through an anonymous feedback channel.

- All complaints, regardless of severity, must be recorded, including the date, nature of the complaint, and the desired outcome.
- Written complaints will be formally acknowledged within five (5) business days.
- Anonymous feedback will be considered for systemic improvement but may not be able to be formally investigated or resolved.

5. Assessment and Management

The Manager is responsible for assessing and assigning complaints based on their complexity, seriousness, and required level of investigation:

- Minor issues or misunderstandings will be managed and resolved by the staff member closest to the issue (e.g., Manager) through discussion and clarification.
- Serious matters, those involving safety, misconduct, policy breaches, or legal risk, will be managed via a formal investigation process led by the Manager or a delegated, impartial Board member/external party.
- The organisation aims to resolve all formal complaints within thirty (30) business days, keeping the complainant informed of progress.

6. Escalation

Complaints must be escalated:

- When they involve allegations of serious misconduct, child safety concerns (must also trigger **Child Safe Policy (G4)**), or legal/financial risk.
- When the matter involves the Manager (in which case the complaint is referred directly to the Board Chair).
- When the complainant is dissatisfied with the outcome of the formal resolution process.
- Serious, unresolved, or systemic matters will be referred to the Board. If a complainant remains unsatisfied after all internal avenues are exhausted, they may be advised of relevant external bodies (e.g., Consumer Affairs Victoria, funding bodies).

7. Outcomes and Resolution

Outcomes of the complaint process may include:

- A formal apology or clarification.
- Disciplinary action (for staff or volunteers, in line with relevant HR policies).
- Corrective action to prevent recurrence (e.g., changes to policy, procedures, or training).
- Referral to the **Incident Management Policy (G7)** for broader systemic review.

8. Continuous Improvement

The Manager will report a summary of complaints and feedback (excluding confidential details) to the Board quarterly to identify trends, areas of risk, and opportunities for systemic service and process improvement.

References

- Incident Management Policy (G7)
- Child Safe Policy (G4)
- Privacy and Information Management Policy (G5)



Work Health and Safety Policy

Policy number: G10

Version: V1

Drafted by: BOG

Approved by Board on: [Date]

Responsible person: Manager

Scheduled review date: [Date]

Policy Statement

Warrandyte Neighbourhood House is committed to providing and maintaining a safe and healthy environment for all people involved in its activities, including staff, volunteers, participants, and visitors. The organisation will strive to eliminate or minimise all risks to health and safety in the workplace.

1. Purpose

This policy outlines the organisation's commitment and framework for managing Work Health and Safety (WHS) across its operations, ensuring compliance with the *Occupational Health and Safety Act 2004 (Vic)* and associated regulations.

2. Scope

This policy applies to all Board members, staff (paid and unpaid), volunteers, participants, contractors, and visitors operating within the Neighbourhood House premises or involved in off-site activities organised by the organisation.

3. Principles

- **Shared Responsibility:** Safety is a fundamental and shared responsibility; everyone is accountable for their own safety and the safety of others.
- **Proactive Management:** WHS risks are identified, assessed, and managed proactively to prevent injury and harm.
- **Consultation:** Staff and volunteers are consulted on WHS matters that directly affect their work.
- **Compliance:** The organisation is committed to complying with all relevant WHS legislation and standards.

4. Roles and Responsibilities

- **Board of Governance:** Responsible for WHS oversight, ensuring adequate resources are allocated for safety management, and receiving regular WHS reports.
- **Manager (WHS Responsible Person):** Responsible for implementing and maintaining safety practices, ensuring legislative compliance, managing hazard controls, and leading the incident response.



- **Staff and Volunteers:** Responsible for taking reasonable care of their own health and safety, following safe work practices and instructions, and promptly reporting all hazards and incidents.

5. Hazard and Incident Reporting

- **Reporting:** Hazards, near misses, and incidents must be reported promptly to the Manager using the organisation's official WHS reporting mechanism.
- **Action:** Hazards will be addressed by the Manager by either eliminating the risk or implementing controls according to the hierarchy of control.
- **Incident Management:** All incidents resulting in injury or harm must be managed in line with the **Incident Management Policy (G7)**, including mandatory reporting to WorkSafe Victoria when required.

6. Risk Management

Health and safety risks are systematically identified, assessed, and controlled as part of the organisation's broader **Risk Management Policy (G3)**. Key risk areas include:

- Building and facility safety (e.g., slips, trips, maintenance).
- Manual handling and office ergonomics.
- Psychological hazards (e.g., stress, bullying).
- Infection control and hygiene.

7. Training and Awareness

The organisation ensures that staff and volunteers are provided with relevant WHS induction, training, and ongoing awareness to understand:

- Emergency procedures (e.g., fire, evacuation).
- Safe use of equipment and safe work practices.
- Hazard identification and reporting procedures.

8. Emergency Management

Clear and practiced emergency procedures (e.g., evacuation plans, designated assembly points) are in place for all foreseeable emergency situations. Emergency contact details are clearly visible, and relevant staff/volunteers are trained in first aid.

9. Continuous Improvement

Health and safety practices and performance are reviewed regularly (including facility safety inspections and incident data analysis) to ensure effectiveness and to implement necessary improvements.

10. Review



This policy is reviewed every two years or earlier if there is a change to the facility, work processes, or WHS legislation.

References

- *Occupational Health and Safety Act 2004* (Vic)
- *Occupational Health and Safety Regulations 2017* (Vic)
- WorkSafe Victoria Guidance
- Risk Management Policy (G3)
- Incident Management Policy (G7)

Marketing and Social Media Policy

Policy number: G11

Version: V1

Drafted by: BOG

Approved by Board on: \[Date\]

Responsible person: Manager

Scheduled review date: \[Date\]

Policy Statement

Warrandyte Neighbourhood House is committed to accurate, respectful, and responsible communication that reflects its values, supports community engagement, and protects the privacy and dignity of individuals.

1. Purpose

This policy sets out how Warrandyte Neighbourhood House manages marketing, communications, and social media to ensure consistency, appropriateness, and compliance with legal and organisational requirements.

2. Scope

This policy applies to:

- Board members
- Staff
- Volunteers
- Contractors or third parties engaged in communication activities

It applies to all forms of communication, including digital platforms, printed materials, and public messaging.

3. Principles

Warrandyte Neighbourhood House ensures that communication:

- Is accurate, clear, and not misleading
- Reflects organisational values and purpose
- Supports community engagement and participation
- Respects diversity and inclusion
- Protects the privacy and dignity of individuals
- Maintains professionalism and accountability

4. Roles and Responsibilities

- The Board provides oversight of communication practices.
- The Manager is responsible for approving or delegating responsibility for marketing and communication activities and ensuring compliance with this policy.
- Staff and volunteers involved in communication are responsible for ensuring content is appropriate, accurate, and aligned with organisational expectations.

5. Content and Representation

All marketing and communication materials must:

- Be accurate and factually correct
- Be appropriate for public distribution
- Reflect the organisation's purpose and values
- Avoid misleading or exaggerated claims

Individuals must not present personal views as those of the organisation unless authorised to do so.

6. Use of Social Media

Social media platforms are used to promote programs, engage with the community, and share information.

Use of social media must:

- Be respectful and appropriate at all times
- Avoid content that may damage the organisation's reputation
- Not disclose confidential or sensitive information
- Comply with organisational policies and standards

Staff and volunteers must not use organisational social media accounts for personal purposes.

7. Personal Use of Social Media

Individuals associated with Warrandyte Neighbourhood House should ensure that personal social media use does not:

- Misrepresent the organisation
- Breach confidentiality
- Damage the organisation's reputation



Where individuals identify their connection to the organisation, they must act responsibly and in a manner consistent with the Code of Conduct.

8. Privacy and Consent

Personal information, images, or identifiable content must only be used with appropriate consent.

Consent must be informed and recorded where required.

Content involving children must comply with Child Safe requirements and relevant consent processes.

9. Use of Images and Media

Images, videos, or recordings used in promotional material must:

- Be appropriate and respectful
- Have appropriate consent where individuals are identifiable
- Not place individuals at risk or cause harm

Special care must be taken when using images of children.

10. Compliance with Legislation

All marketing and communication activities must comply with relevant legislation and standards, including:

- Privacy laws
- Anti-spam requirements
- Copyright and intellectual property obligations

11. Risk Management

Communication risks, including reputational risk, must be identified and managed.

Inappropriate or inaccurate communication must be addressed promptly.

12. Breaches

Breaches of this policy may result in corrective action and may be managed under the Code of Conduct or other relevant policies.

13. Review

This policy is reviewed every two years or earlier if required.



References

- Privacy and Information Management Policy (G5)
- Child Safe Policy (G4)
- Code of Conduct Policy (G12 - To be drafted)
- *Spam Act 2003* (Cth)
- *Privacy and Data Protection Act 2014* (Vic)



Warrandyte Neighbourhood House Code of Conduct Agreement Form

I. Acknowledgement of Code of Conduct

I, the undersigned, acknowledge that I have received, read, and thoroughly understood the Warrandyte Neighbourhood House Code of Conduct Policy (G12). I recognise that this document defines the expected ethical and behavioural standards for all individuals associated with the organisation.

I understand that this Code of Conduct applies to me in my capacity as a:

- ☐ **Board Member**
- ☐ **Staff Member (Paid)**
- ☐ **Staff Member (Unpaid/Volunteer)**
- ☐ **Contractor / Service Provider** (Including cleaning, maintenance, IT support, etc.)
- ☐ **Program Tutor / Class Instructor**
- ☐ **Participant** (Enrolled in a course, attending a group, or using the facilities)

II. Declaration of Compliance

I solemnly agree to fully comply with and actively uphold the standards of behaviour and professional conduct outlined in the Code of Conduct, recognising that these standards are essential for maintaining a safe and respectful community environment. This commitment includes, but is not limited to:

1. **Respect and Inclusivity:** Treating all individuals (including colleagues, participants, and community members) with dignity, courtesy, fairness, and respect. I will actively contribute to an inclusive environment and will refrain from any form of discrimination, harassment, bullying, or victimisation based on any characteristic.
2. **Safety and Wellbeing:** Adhering strictly to the **Child Safe Policy (G4)**, the **Work Health and Safety (WHS) Policy (G10)**, and associated procedures. I commit to prioritising the safety and wellbeing of children and all community members and will immediately report any hazards, incidents, or safety concerns.
3. **Professionalism and Integrity:** Acting with honesty and ethical behaviour in all dealings. I will maintain appropriate professional boundaries, especially with children and vulnerable people, and will ensure that I use organisational assets, resources, and time efficiently and solely for the benefit of Warrandyte Neighbourhood House.
4. **Compliance:** Complying with all relevant Australian and Victorian laws, including WHS, privacy, and anti-discrimination legislation. I will also adhere to all internal Warrandyte Neighbourhood House policies, procedures, and lawful directions.

III. Understanding of Breaches and Consequences

I understand that any failure to comply with the obligations set out in this Code of Conduct constitutes a breach. I acknowledge that such a breach may result in disciplinary action,



which could include, depending on the nature and severity of the breach: formal warning, mandatory training, removal from a program or class, termination of a contract, removal from the Board, or immediate dismissal from employment. I further understand that serious breaches, particularly those involving child safety or criminal activity, will be reported to the relevant authorities.

IV. Confidentiality Agreement

I agree to strictly maintain the confidentiality of sensitive organisational, financial, operational, and personal information, including participant and staff details, in accordance with the **Privacy and Information Management Policy (G5)**. I will only disclose confidential information when legally required or specifically authorised to do so. -

Full Name:	
Contact Phone:	
Email:	
Date:	

Signature

Please return this signed and dated form to the Manager or Board Secretary upon commencement of your role/participation.



Warrandyte Neighbourhood House (WNH) Manager's Monthly Report Template

To: The Board of Governance

From: The Manager

Reporting Period:

Date Prepared:

The Manager confirms the five required financial documents (P&L, Balance Sheet, Cash Flow, Bank Reconciliations, Grant Status Reports) are attached to this report for your review.

Area / Focus	Risk Level	Manager's Notes (Performance, Variance, and Commentary)	Recommendations for Board Action
Core Financial Documents		[Confirm all reports are attached and reconciled. If any reports are missing or delayed, please state why.]	[e.g., None required]
Keeping to our Budget		[Note major variances (>10% threshold). State the cause and corrective steps taken to manage the difference (G3, Sec 5).]	[If needed, request approval for a small budget adjustment.]
Using Our Grants Correctly		[Confirm current grant spending aligns with funding conditions and note any risks of unspent funds or upcoming reporting deadlines (G2, Sec 8).]	[e.g., Recommend supporting an extension request for [Grant Name].]

II. Safety, Risk, and Keeping Things Running Smoothly (Policies G1, G3, G4, G5, G7, G10)

The Manager ensures we are meeting our obligations to keep our community safe and compliant.

Policy Area	Risk Level	Manager's Notes (Details of Incident, Risk, or Compliance)	Recommendations for Board Action
Safety Incidents and Learning (G7)		[If a serious incident occurred this month, briefly describe it and confirm if mandatory external reporting (e.g., WorkSafe, Police) was completed. If None, state "None." (G7, Sec 6).]	[Request Board review and endorsement of the follow-up investigation and systemic improvement.]

Key Risks Needing Attention (G3)		[Identify any operational risks (G3, Sec 11) that have escalated this month (e.g., severe facility issue, key staffing shortage) that require immediate Board attention.]	[Request Board approval of resources or a strategic discussion to mitigate the risk.]
Child Safety Check-in (G4)		[Confirm all required WWCCs/Police Checks for new people are current and verified (G4, Sec 4).]	[If needed, recommend specific Board training on Child Safety.]
Privacy and Data Update (G5)		[Report on any actual or suspected data breaches (G5, Sec 6). If serious, confirm if the Privacy Commissioner (OAIC) was notified.]	[If needed, recommend investment in updated IT security/training.]
Manager Decision s (G1)		[Confirm all operational decisions were within the Board-approved Delegations Schedule (G1, Sec 9). If there was a deviation, explain it.]	[e.g., None required]
Building & People Safety (G10)		[Summary of any new or unresolved major WHS hazards identified (G10, Sec 5). Note outstanding issues that require funding/support.]	[If needed, request Board approval for capital expenditure to resolve a major hazard.]

III. Community Voice and Feedback (Policy G8)

The Manager escalates serious feedback matters monthly.

Area	Risk Level	Manager's Notes (Count and Brief Nature)	Recommendations for Board Action
Formal Feedback /Complaints		[Insert Count and brief nature of formal feedback received (G8, Sec 4).]	[e.g., None required]
Serious Matters for the Board		[Confirm if any matter was referred to the Board Chair (if involving Manager) or referred as unresolved/systemic (G8, Sec 6).]	[Request Board review of specific systemic issue identified.]

RISK Ratings

Rating	Definition of Consequence	Required Management Action (Policy G3)
Extreme (E)	Will result in catastrophe: Death, organizational collapse, or major legal/criminal consequences.	Must cease immediately and be escalated to the Board for urgent mitigation.
High (H)	Will result in serious harm: Serious injury, loss of a core funding stream, or long-term reputational damage.	Must cease immediately or be urgently mitigated and escalated to the Board.
Medium (M)	Will cause significant impact: Minor injury requiring medical attention, quantified financial loss (e.g., over 10% budget variance), or temporary negative media.	Requires active management, resource allocation, and monitoring. Acceptable for Programmatic risks.
Low (L)	Will cause minor, manageable impact: Non-serious injury, minor recoverable financial loss, or low-level complaint.	Manage by routine procedures and monitoring. Acceptable for most compliance and financial risks.
Very Low (VL)	Minimal chance of minor impact, managed by existing controls.	Acceptable. Monitor regularly.

Risk Register

Risk Category	Key Risk Event	Worst-Case Consequence	Key Control/Mitigation	Residual Risk Target (Tolerance)
People Safety / Child Safety	Allegation, disclosure, or suspicion of child abuse or any risk resulting in death, serious injury, or major psychological harm.	Catastrophe (Extreme)	Implement robust, mandated controls, including verified Working with Children Checks (WWCC) and National Police Checks; immediate reporting via the Incident Management Policy (G7).	Low or Very Low (Zero Tolerance for Severe Harm)
Legal & Regulatory Compliance	Breach of legislation (e.g., Child Safe Standards, WHS laws, or funding agreements).	Major legal/criminal consequences (Extreme)	Maintain mandatory compliance checklists, regular legal reviews, and mandatory training.	Very Low (Zero Tolerance for Non-Compliance)

Financial Integrity & Sustainability	Major fraud, theft, or risk threatening long-term solvency or financial viability.	Loss of a core funding stream or organisation collapse (High/Extreme)	Separation of duties, mandatory dual signatory requirements for payments over a set threshold, and monthly Board financial reporting (Policy G2).	Low (Low Tolerance for Loss)
IT and Data Security (Privacy)	Data breach or significant IT service disruption concerning sensitive personal information.	Long-term damage to community trust (High)	Implement mandatory password policies, regular data backups, and training on the Privacy Policy (G5); secure storage for all records.	Low (Low Tolerance)
Programmatic and Operational	Operational failure, such as equipment malfunction or staff shortage, that impacts core service delivery.	Significant impact (Minor injury or over 10% budget variance) (Medium)	Require clear project plans, resource allocation, and a Service Continuity Plan.	Acceptable up to Medium (High Appetite for Innovation risks, provided core safety is maintained)

To	Person Person Person
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Warrandyte
Neighbourhood House

Cc	Person
Bcc	Person
Subject	

Emergency Incident Response Plan

The following outlines the immediate escalation and mandatory actions required for different types of emergencies or serious incidents, as defined by Warrandyte Neighbourhood House's policies (G3, G4, G5, G7, G10).-----Emergency Incident Response Plan (Non-Table Format)

This plan is activated by the Manager (or delegated Board Chair) immediately following an event rated as a High (H) or Extreme (E) risk that threatens the safety of people, financial stability, or legal compliance (Policy G3). 1. Major Safety / Work Health and Safety (WHS) Incidents

These incidents involve death, serious injury requiring medical attention, or major psychological harm (Risk Tolerance: Zero Tolerance for Severe Harm).

- **Immediate Action:** Prioritise safety. Call emergency services (000) for medical or police assistance, and administer first aid if safe to do so.
- **Internal Reporting:** The incident must be reported immediately to the Manager by phone/in-person, followed by a written Incident Report Form within 24 hours (Policy G7).
- **Escalation and Mandatory Reporting:** The Manager must immediately inform the Board Chair. For serious injuries or fatalities, the Manager must notify **WorkSafe Victoria** in line with the *Occupational Health and Safety Act 2004 (Vic)* (Policy G10).

2. Child Safety Incidents

These involve any allegation, disclosure, or suspicion of child abuse or a breach of the Child Safe Policy (G4) (Risk Tolerance: Absolute Zero Tolerance for child abuse).

- **Immediate Action:** Ensure the child's immediate safety. Do not conduct an internal investigation. Preserve confidentiality and only share information on a "need to know" basis (Policy G4, G7).
- **Internal Reporting:** Report immediately to the Manager (Responsible Person for Child Safety). Manager immediately reports to president.
- **Mandatory Reporting:** Where legally required, the Manager must immediately report the matter to **Victoria Police** and/or the **Department of Families, Fairness and Housing (DFFH) Child Protection** (Policy G4).

3. Financial Integrity Crisis

These include major fraud, theft, or any risk threatening long-term solvency or financial viability (Risk Tolerance: Low Tolerance for Loss).

- **Immediate Action:** The Manager must immediately secure all financial records and computer systems and stop all outgoing non-essential payments (Policy G2).

- **Escalation:** The Manager and Treasurer must ensure access to core bank accounts for payroll/essential payments and immediately notify the Board of the crisis for approval of emergency expenditure.
- **Compliance:** Ensure mandatory reporting and compliance processes for ongoing grants are maintained (Policy G2).

4. IT and Data Security Breach

This involves a data breach or significant IT disruption concerning sensitive personal information (Risk Tolerance: Low Tolerance).

- **Immediate Action:** The Manager must immediately isolate the affected systems/devices to contain the breach and prevent further data loss (Policy G5).
- **Mandatory Reporting:** If the breach is likely to cause serious harm, the organisation must comply with the Notifiable Data Breaches (NDB) scheme by promptly notifying affected individuals and the **Office of the Australian Information Commissioner (OAIC)** (Policy G5).

5. Legal and Regulatory Compliance Breach

These events involve mandatory reporting obligations or a breach of law/funding contract (Risk Tolerance: Zero Tolerance for Non-Compliance).

- **Immediate Action:** The Manager must stop the non-compliant activity and ensure all required compliance checklists and legal reviews are undertaken.
- **Escalation:** All breaches requiring police or external authority involvement must be immediately escalated to the Board Chair for legal oversight (Policy G7).

-----Critical Contact Directory

Role / Authority	Purpose for Contact	Mandatory Phone Number (General)
Emergency Services	Police, Fire, Ambulance – Immediate threat to life or property.	
BCP Lead / Manager	Operational response lead, internal reporting, and external notification coordination.	
Board Chair	Strategic oversight, major expenditure approval, and managing legal/reputational risks.	

WorkSafe Victoria	Mandatory reporting for serious workplace injuries or deaths.	
DFFH Child Protection	Mandatory reporting for suspicion of child abuse (Victoria).	
OAIC	Mandatory notification for serious data breaches (NDB scheme).	