



Board and Governance

DOCUMENT REFERENCE	PS Gov01(18)
DOCUMENT OWNER	Board of Management Sector - Governance
DOCUMENT AUTHORISER/APPROVER	Reynella Neighbourhood Centre Inc Board of Management

DOCUMENT REVISION HISTORY:

BOARD OF MANAGEMENT MEETING DATE	IMPLEMENTATION/ALTERATIONS	VERSION CONTROL NO.
07/03/2018	Implementation	01
29/04/2019	p.2 second dot point – spelling of center change to Centre	02
23/08/2020	Policy Reviewed	03
22/02/2021	Template change containing stricter document controls – no changes to actual policy content	03

1. Scope
2. Related Documents
3. Legislative Requirements
4. Policy
5. Roles and Responsibilities
6. Consequential Documents

BOARD AND GOVERNANCE POLICY

1. SCOPE:

The purpose of this Policy Statement and related Operating Procedures relates to the role and function of the individual members of the Board of Management and the Board as a whole in achieving its objectives and responsibilities under law.

The Board of Management comprises individual members elected in line with Constitution and any regulatory or legislative requirement. Office Bearers, elected from within the Board, may hold additional responsibilities as defined in this Policy Statement and any consequential Operating Procedures.

2. POLICY STATEMENT:

The Board of Management will achieve best practice in meeting its responsibilities to the business and affairs of the Centre as required in its Constitution and in compliance with the regulatory bodies.

It will at all times encourage development and maintenance of a culture that delivers community development, embraces contemporary best practice in leadership, governance and corporate management. To achieve this, the Board will ensure a positive, productive working relationship between itself and the staff is developed and maintained. The Board will provide support and guidance to ensure optimal organisational structure is maintained, adequate resources are allocated and effective management is applied so that the highest possible level of service and client outcomes are achieved.

3. OBJECTIVES:

The objectives of this Policy Statement and associated procedures are to ensure that:

- The Board effectively governs the organisation.
- The Board effectively represents the interests of the community.
- Composition of the Board reflects the skills, knowledge and experience necessary to effectively guide the Centres strategic direction and performance.
- Appropriate strategic direction is established and achieved.
- Compliance with all legislative and regulatory obligations is met.
- Highest standards of financial and ethical behaviours is achieved

4. GUIDING PRINCIPLES:

The development of Operating Procedures under this Policy Statement is based on the following guiding principles:

- The Board maintains an outward vision, concentrating on providing strategic leadership and future focus.
- Risks to the organisation are appropriately identified and managed.

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- The organisation's reputation is respected and protected.
- Board Member roles and responsibilities are clear.
- The role of the Chairperson is clearly defined.
- Diversity of opinions and views is encouraged.
- Decisions are those made by the collective Board.
- The Community Development Officer (CDO) is encouraged to use reasonable interpretation of the Board's Strategic Direction and delegations to establish all operating policies, make operating decisions and take actions to achieve organisational objectives.
- The Community Development Officer (CDO) is encouraged to maintain open communication with Board Members and utilise expert skills, knowledge and experience of individual Board members where appropriate.
- Delegations of authority are clearly defined.
- Expectations of Board Member contribution and behaviours is clearly defined and managed.
- Members are informed of major developments affecting the organisation's activities and state of affairs.

5. RESPONSIBILITIES:

All members of the Board of Management share the following governance responsibilities with fellow Board members:

- Developing/approving the vision, mission and values of the Centre.
- Developing/approving a sound framework of organisational policies and procedures.
- Approving/developing strategic and business plans.
- Developing a risk management plan and ensuring it is implemented.
- Financial management including developing/approving the budget.
- Ensuring legal requirements are met.
- Ensuring quality of services.
- Ensuring there are adequate funds and resources for the organisation.
- Ensuring the Board is functioning well, reviewing the work of the Board and planning for the succession and orientation of Board members.

6. CONSEQUENTIAL DOCUMENTS:

The following documents have been developed as a consequence of this Policy Statement and to guide its implementation and should be read in conjunction with the following controlled documents:

Records –

- Board of Management Meeting Minutes
- Board Evaluation Records
- Board Personnel Files

Procedures -

- Delegated Authority
- Board Sub-Committees & their Terms of Reference
- Conflict of Interest
- Board Performance
- Annual Reports

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- Board Grievance
- Board Meeting and Minutes
- Meetings

This Policy supersedes all previous versions and is applicable across the Reynella Neighbourhood Centre Inc. from the date it was last approved by the Board of Management



Policy Statement

Finance

DOCUMENT REFERENCE	PS F01(18)
DOCUMENT OWNER	Governance Sub-Committee Sector - Finance
DOCUMENT AUTHORISER/APPROVER	Reynella Neighbourhood Centre Inc Board of Management

DOCUMENT REVISION HISTORY:

BOARD OF MANAGEMENT MEETING DATE	IMPLEMENTATION/ALTERATIONS	VERSION CONTROL NO.
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1. Scope
2. Related Documents
3. Legislative Requirements
4. Policy
5. Roles and Responsibilities
6. Consequential Documents

FINANCE POLICY

1. SCOPE:

This policy provides guidelines to Board of Management and staff for financial management based on sound planning, control and evaluation, to achieve optimum use of Reynella Neighbourhood Centre (RNC) resources and accountability to centre members, the community and funding bodies.

The centre is a not-for-profit body with the following status under the Australian Taxation Act:

- Income Tax Exempt charitable entity
- Registered for Goods and Services Tax (GST)

The Centre's financial year returns from 1 July to 30 June.

2. RELATED DOCUMENTS:

- Finance Procedures
- Risk Management Policy and Procedure
- Delegation of Authority
- Standard Chart of Accounts (Commonwealth)
- Funding and Service Agreements
- Lease/s
- Contracts
- Finance Sub-Committee Terms of Reference

3. LEGISLATIVE REQUIREMENTS:

- Associations Incorporation Act 1985
- Commonwealth Incorporations Act 2001
- A New Tax System (Goods and Services Tax) Act 1999
- Superannuation Guarantee (Administration) Act 1992
- Long Service Leave Act 1987
- Australian Charities and Not for Profits Act 2012

4. POLICY:

The organisation manages its finances and assets effectively and efficiently to achieve the most cost effective use of its resources in achieving its objectives. It reports on its financial transactions openly and honestly to provide an accurate view of its financial status by ensuring that:

- 4.2 Necessary systems and procedures are in place to effectively manage finances including reporting, professional development and signatories
- 4.3 An Annual Business Plan is developed and monitored
- 4.4 Financial expenditure is monitored
- 4.5 Clear delegations of financial authority are in place
- 4.6 Administration adequately supports the requirements of the organisation
- 4.7 Funding body accountability requirements are met

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- 4.8 Legal requirements are met in relation to the ATO, Incorporations Act, funding and service agreements
- 4.9 An asset register is maintained
- 4.10 Clear procedures are in place for the contracting of services and purchases of assets
- 4.11 An annual budget is developed, approved, monitored and reviewed

5. ROLES AND RESPONSIBILITIES:

5.1 The Board:

- Is responsible for the organisation meeting all its financial obligations and reporting openly and accurately on its financial transactions and status
- Monitors the adoption of and adherence to internal controls to ensure the protection of the organisation's assets and that the financial affairs are managed prudently and with integrity
- Approves an annual budget to achieve priorities determined in its strategic plan and monitors income and expenditure relative to the agreed budget
- Approves above budget and non-budgeted expenditure on the recommendation of the Treasurer
- Provides limited delegated authority to the CDO and reviews this annually
- Approves the opening of bank accounts and investment vehicles, on the recommendation of the Treasurer, and authorises signatories (including electronic) for operating accounts
- Approves the establishment of cash advance and petty cash funds
- Approves all contracts and ensures contractual obligations are met
- Authorises all grant applications and signs funding and service agreements; ensures contractual obligations and reporting requirements are met
- Appoints a Treasurer and a Finance Sub-Committee
- Contracts the organisation's auditor, ensures the accounts are audited, verifies all Annual Financial Statements provided

5.2 Treasurer

- is a member of the Board of Management
- is responsible for working with the Finance Officer and the CDO to monitor the accounting processes for recording income and expenditure against the budget
- reviews all financial reports to ensure that they accurately reflect the organisation's financial position
- proposes the organisations budget to the Board
- ensures that prudent financial procedures and practices are adopted to minimise prospective misuse of resources
- ensures the organisation's financial accounts are audited annually and any audit recommendations are actioned
- presents financial statements and reports to the Board at meetings and as required

5.3 Community Development Officer (CDO)

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- is responsible for, in conjunction with the Treasurer and Finance Officer, monitoring income and expenditure against programme and grants budgets on a regular basis
- 5.4 The Auditor
- annually audits the organisation's financial accounts to establish their accuracy and reflects the financial status of the organisation – to the extent that it is reasonably practicable to do so and within standard accounting/auditing practice
 - advises on the correct recording of transactions and account presentation
 - presents recommendations to the Board and noted to the annual financial statements.

6. CONSEQUENTIAL DOCUMENTS

- Definitions for Procedures
- Accounts Payable Procedure
- Banking Procedure
- Asset Management Procedure
- Reporting and Audits Procedure
- Purchasing / Procurement Procedure
- Grants, Sponsorships & Donations Procedure
- Course Fees and Concessions Procedure
- Budget Planning & Monitoring Procedure
- Venue Hire Procedure
- Finance Forms Folder and Related Procedures (Reception)

This Policy supersedes all previous versions and is applicable across the Reynella Neighbourhood Centre Inc. from the date it was last approved by the Board of Management

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Policy Statement

People and Culture

DOCUMENT REFERENCE	PS P&C01(18)
DOCUMENT OWNER	Governance Sub-Committee Sector – People & Culture
DOCUMENT AUTHORISER/APPROVER	Reynella Neighbourhood Centre Inc Board of Management

DOCUMENT REVISION HISTORY:

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22/02/2021	Template change containing stricter document controls – no changes to actual policy content	01

1. Scope
2. Policy Statement
3. Objectives
4. Guiding Principles
5. Responsibilities
6. Consequential Documents

PEOPLE AND CULTURE POLICY

1. SCOPE:

The purpose of this Policy Statement and related Operating Procedures relates to the Neighbourhood Centres commitment to building positive culture, promoting integrity and supporting the Centre's staff, volunteers, members and community.

2. POLICY STATEMENT:

The Board will exercise effective and independent judgement and oversee the activities of the Centre to ensure:

- Quality Staff and volunteers are recruited, selected and appropriately trained and the recruitment processes are fair and equitable with required probity checks completed.
- Safe work practices are implemented and monitored.
- Staff, volunteer and client records are maintained in line with privacy legislation.
- Grievances, complaints and disputes are managed in an effective and timely manner without fear of retribution.
- Feedback is regularly sought and considered.
- A culture of continuous improvement is imbedded in work practices.
- All Board members, staff volunteers and visitors will follow the Centres Code of Conduct and declare conflicts of interest if and when they arise.
- That the services of the Community Centre are promoted and conducted with integrity and encourage community engagement and a person centred approach.

3. OBJECTIVES:

This policy aims to:

- Build a positive culture through fostering a safe, respectful and rewarding environment
- Set clear expectations and accountability for responsible working, acceptable behaviours and sustainable practices
- Set the highest ethical standards for staff and volunteers
- Explain the standards and practices that staff, volunteers, participants, visitors, and the community can expect from one another.

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4. GUIDING PRINCIPLES:

All members of the Neighbourhood Centre community, including staff, volunteers, participants and visitors, are expected to be guided by and act in accordance with the following principles:

- Integrity
- Ethical standards
- Honesty
- Fairness
- Inclusion
- Impartiality
- Accountability
- Respect, for others and for the reputation and goodwill of the Centre
- Compliance with the law and the legislation that applies to the Centre, resources, facilities, activities and people
- Appropriate use of Centre resources, information, equipment and facilities.

5. RESPONSIBILITIES:

All members of the Board of Management share the following responsibilities:

- Developing /approving Code of Conduct
- Ensuring legal requirements are met
- Ensuring a Child safe environment is established and maintained
- Guiding and ensuring principles are met

6. CONSEQUENTIAL DOCUMENTS:

The following documents have been developed as a consequence of this Policy Statement and to guide its implementation and should be read in conjunction with the following controlled documents:

- Employee management procedure
- Volunteer management procedure
- Protection of children and vulnerable people
- Dispute and conflict resolution
- Privacy and confidentiality procedure
- Sharing of information guidelines

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Policy Statement

Quality Management

DOCUMENT REFERENCE	PS QM01(18)
DOCUMENT OWNER	Governance Sub-Committee Sector Quality Management
DOCUMENT AUTHORISER/APPROVER	Reynella Neighbourhood Centre Inc Board of Management

DOCUMENT REVISION HISTORY:

BOARD OF MANAGEMENT MEETING DATE	IMPLEMENTATION/ALTERATIONS	VERSION CONTROL NO.
07/03/2018	Implementation	01
29/04/2019	Scope – added – "Position Descriptions and Duty Statements"	02
22/02/2021	Template change containing stricter document controls – no changes to actual policy content	02

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7. Related Documents

QUALITY MANAGEMENT POLICY

1. SCOPE:

The purpose of this Policy Statement and related Operating Procedures supports the development of a quality culture as it relates to the Community Centre's Management System and has been developed for the continual improvement of governance, finance, people and culture, work health and safety, risk and audit, administration, marketing and fundraising operations.

It is to ensure the delivery of service to community meets or exceeds their needs and expectations.

The Community Centre's quality framework consists of Policy Statements, Procedures, Work Instructions, Records and Forms, Position Descriptions (paid staff) and Duty Statements (Volunteers).

The Quality Framework is applicable to all operations of the business.

2. POLICY STATEMENT:

The Board of Management is committed to consistent and comprehensive quality assurance principles. To do this we will:

- maintain a culture of quality within the organization that supports continuous improvement and evaluation
- monitor and measure processes against policies, objectives and requirements and report the results
- develop and implement processes to underpin quality service delivery to the community

3. OBJECTIVES:

The objectives of this Policy Statement and associated procedures are to ensure that:

- The quality management system provides a framework for measuring and improving our performance
- The Centre is compliant with all legislative and regulatory obligations
- The quality management system enables continual monitoring and improvement
- Highest standards governance and management is achieved

4. GUIDING PRINCIPLES:

The development of Operating Procedures under this Policy Statement is based on the following guiding principles:

- Compliance, risk management and reliability underpin our quality assurance principles and we are committed to consistent and comprehensive quality assurance principles.
- The commitment to a Quality Framework ensures that the practices and operations of the Community Centre are conducted in a consistent manner, with focus on quality and efficiency.

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To achieve these principles the Centre will:

- Ensure that Procedures and Work Instructions comply with all relevant legislation, codes of practice and Australian and industry standards
- Ensure staff and volunteers comply with this Policy and associated procedures and work instructions
- Improve the Centre's performance and systems through the continuous improvement process
- Maintain quality management system certification to Australian Service Excellence Standards
- Provide education and training in order to improve staff and volunteers skills, awareness, knowledge of quality assurance and practices
- Identify, report, investigate and resolve all issues and take action to prevent recurrence
- Maintain all relevant documentation to demonstrate compliance and facilitate process improvement

5. RESPONSIBILITIES:

The Board of Management is responsible for developing/approving a sound framework of organisational policies and procedures and ensuring quality of services.

6. CONSEQUENTIAL DOCUMENTS:

The following documents have been developed as a consequence of this Policy Statement and to guide its implementation and should be read in conjunction with the following controlled documents:

- Document Control guidelines
- Document Control register
- Strategic Plan
- Business Plan

7. RELATED DOCUMENTS:

- Board Quality Management Procedure
- Document and Data Control Procedure
- Internal Audit Procedure
- Policy and Procedure Development Procedure

This Policy supersedes all previous versions and is applicable across the Reynella Neighbourhood Centre Inc. from the date it was last approved by the Board of Management

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Policy Statement

Risk and Audit

DOCUMENT REFERENCE	PS R&A01(18)
DOCUMENT OWNER	Governance Sub-Committee Sector Risk and Audit
DOCUMENT AUTHORISER/APPROVER	Reynella Neighbourhood Centre Inc Board of Management

DOCUMENT REVISION HISTORY:

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1. Scope
2. Policy Statement
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RISK AND AUDIT POLICY

1. SCOPE:

The purpose of this Policy Statement and related Operating Procedures relates to the Neighbourhood Centres risk management framework and internal controls. This policy is to assist the Board in fulfilling its responsibilities in overseeing the Centre's financial reporting, compliance and legal and regulatory requirements and overseeing the Centres systems of internal control and its risk management framework.

2. POLICY STATEMENT:

Risk Management is a systematic approach that creates focus on the things that the Centre needs to get right to achieve its outcomes. The Centre's philosophy is that risk and opportunity management are the same; as every opportunity contains a level of risk.

It is how the Centre manages that risk which will then lead to great outcomes and achievements.

The Centres Risk Management Methodology incorporates a holistic and structured approach to the identification and mitigation of business risks. This standardised risk approach covers strategic, operational, reputational, compliance and financial risks. The accountability for managing such key risks, rest with the Board of Management through the delegated authority and the Risk and Audit Working Group and Governance Sub-Committee.

3. OBJECTIVES:

The objectives of this Policy Statement and associated procedures are to ensure that the Centre:

- meet the Centre's strategic and operational objectives whilst also minimising the impact of significant risks that the Centre can meaningfully and realistically control
- protect and enhance the Centre's reputation
- behave as a responsible and ethical corporate citizen, protecting employees, volunteers, the Board and the broader community from harm and protecting physical property from loss or damage
- establish the right balance between the cost of control and the risks it is willing to accept as part of the community development environment within which the Centre operates
- recognise and make the most of opportunities, and increase organisational efficiency and resilience in relation to risk management
- oversee the effectiveness of the systems of internal controls and audits and external auditing
- oversee the policies and procedures to ensure compliance to meet the Australian Service Excellence Standards

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4. GUIDING PRINCIPLES:

The development of Operating Procedures under this Policy Statement is based on the following guiding principles:

- Risk and opportunity go hand in hand. Many projects or activities undertaken by the Centre intend to offer or achieve something that hasn't been done before. Community development cannot always be achieved without sometimes taking risk.
- Risk in itself is not bad. Sometimes risk is essential to progress and failure is often a valuable part of learning. The Centre will strive to balance the possible negative consequences of risk against the potential benefits of any decision, action or proposal.

The *Australian Standard for Risk Management - Principles and guidelines (AS/NZ ISO 31000:2009)* is based on eleven best practice principles. These principles underpin this Policy and guide how it manages risk across the Centre.

- **Creating and protecting value** – contributes to the achievement of our objectives and improves performance in for example work health and safety, legal and regulatory compliance, environmental protection, project management, efficiency in operations and or governance and reputation.
- **An integral part of all organisational processes** – an integrated part of our governance, compliance, accountability, planning and reporting processes. Risk management is part of the Boards responsibilities and an integral part of processes such as strategic planning.
- **Part of decision-making** – risk awareness aids decision-makers to make informed choices and identify the most appropriate course of action.
- **Explicitly addresses uncertainty** – identifies uncertainty and how it can be addressed.
- **Systematic, structured and timely** – contributes to efficiency and to consistent and reliable results.
- **Based on the best available information** - draws on data, experience, expert judgment and stakeholder feedback to make evidence-based decisions.
- **Tailored** – aligns with the internal and external environment within which we operate and our willingness to take risk.
- **Human and cultural factors** – recognises that the capabilities, perceptions and aims of people (internal and external) can aid or hinder the achievement of our objectives.
- **Transparent and inclusive** – requires appropriate and timely involvement of stakeholders and decision makers to ensure that risk management stays relevant and up to date.
- **Dynamic, iterative and responsive to change** – responds to both internal and external events, results of monitoring and reviewing activities, new risks that emerge and others that change or disappear.
- **Continual improvement of the organisation** – supports the continuous improvement of our operations.

The success of risk management is dependent on the effectiveness of the Centre to provide the appropriate arrangements that will drive risk awareness throughout the organisation.

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5. RESPONSIBILITIES:

All members of the Board of Management share the responsibility of reviewing the Risk and Internal Audit Plan annually.

6. CONSEQUENTIAL DOCUMENTS:

The following documents have been developed as a consequence of this Policy Statement and to guide its implementation and should be read in conjunction with the following controlled documents:

- Risk and Audit Working Group Terms of Reference
- Governance Sub-Committee Terms of Reference
- Risk Management Procedure
- Acquisition and use of Images Procedure
- Information and communication Technology Procedure
- E-Communication Procedure

This Policy supersedes all previous versions and is applicable across the Reynella Neighbourhood Centre Inc. from the date it was last approved by the Board of Management

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Policy Statement

Work Health and Safety

DOCUMENT REFERENCE	PS WHS01(18)
DOCUMENT OWNER	Governance Sub-Committee Sector Work Health and Safety
DOCUMENT AUTHORISER/APPROVER	Reynella Neighbourhood Centre Inc Board of Management

DOCUMENT REVISION HISTORY:

BOARD OF MANAGEMENT MEETING DATE	IMPLEMENTATION/ALTERATIONS	VERSION CONTROL NO.
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1. Scope
2. Policy Statement
3. Objectives
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5. Responsibilities
6. Definitions
7. Relevant Documents
8. Consequential Documents

WORK HEALTH AND SAFETY POLICY

1. SCOPE:

The purpose of this Policy Statement is to provide guidelines to the Board of Management and staff of the Centre to minimise the risk of injury and risks to health for workers, Centre participants, visitors and hirers who use the Centre's services or facilities.

2. POLICY STATEMENT:

This Policy Statement provides guidelines to the Board of Management and workers of the Centre that will minimise the risk of injury and risks to health for workers and others by adopting a planned and systematic approach to the management of work health, safety and providing the resources for its successful implementation and continuous improvement.

3. OBJECTIVES:

The objectives of this Policy Statement and associated procedures are to ensure that:

- The Board of the Centre meets its legal requirements under the Work Health and Safety Act 2012 (SA) and Work Health and Safety Regulations 2012 (SA), supported by the relevant Codes of Practice.
- The Centre demonstrates commitment to the highest possible standards of work health and safety.
- The Board of Management demonstrates commitment to consultation with workers on matters of work health and safety.
- The development and maintenance of a planned, systematic approach to the removal (or where removal is not possible, the minimisation) of risks of harm, injury or disease associated with paid or unpaid work or participation in the activities of the Centre.
- Measures to control hazards and risks to health and safety are regularly monitored and evaluated.
- All workers receive appropriate information, instruction, training and supervision to safely carry out their duties and meet their responsibilities.

4. GUIDING PRINCIPLES

The development of Operating Procedures under this Policy Statement will be based on the following guiding principles:

- Roles and responsibilities in relation to Work Health & Safety for all staff are clearly defined, communicated and understood.
- Hazards and risks are effectively managed by the application of risk assessment and management processes.
- Safety management systems and safe work practices are developed, implemented and maintained.
- Potentially hazardous substances are stored, handled and disposed of in a safe manner.
- Appropriate information, instruction, training and supervision necessary to ensure the ongoing safety for all staff is provided.

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- There is appropriate consultation with all workers on all issues that may affect the health, safety and welfare of workers in the work place.
- There is an effective system in place to allow the efficient reporting, recording, investigation and analysis of injuries and work related illness.
- Regular auditing, review and evaluation of Work Health & Safety management systems occur within the Centre.
- The active involvement of staff in health and safety matters is encouraged.
- The effectiveness of the Work Health & Safety Policy, Procedures and related documents is monitored by the Governance Sub-Committee.
- Ensure that appropriate sharing of information in a person's management/care is in accordance with the National Privacy Principles contained within the Privacy Act.

5. RESPONSIBILITIES:

5.1 The Board of Management is responsible for:

- As an incorporated body, having ultimate moral and legal responsibility for ensuring that the Centre complies with the requirements of the Work Health and Safety Act 2012 (SA).
- Ensuring that effective Policies, Procedures, Safe Work Method Statements and Standard Operating Procedures are in place and that these are generally known, monitored, revised and maintained.
- Ensuring, in the case of work injury, that all efforts will be made to assist the person to make a speedy and safe return to work and to receive effective rehabilitation.
- Appointing Fire Wardens and a Senior Fire Warden.
- Ensuring that WHS is a Standard item on all Board of Management Agendas

5.2 The Community Development Officer (CDO) is responsible, as far as is reasonably practical, for:

- In consultation with the Board, providing a healthy and safe workplace with adequate resources.
- In consultation with the Governance Sub-Committee, developing and maintaining relevant Policies and Procedures, monitoring Health and Safety performance, participating in the development of solutions to Health and Safety issues and deciding how resources (including funds for training) should be allocated to address Health and Safety issues.
- Developing Safe Work Method Statements in consultation with the Board.
- Considering any proposal for, or changes to Safe Work Method Statements which may affect health and safety.
- Ensuring that mechanisms are provided to enable workers and volunteers to be consulted on any proposals for, or changes to the workplace, work practices, policies or procedures which may affect their health and safety.
- Supporting Program Leaders and the Volunteer Coordination Team to manage their Health and Safety responsibilities.
- Promoting Health and Safety responsibilities and awareness as an integral part of all induction procedures.
- Ensuring that performance in relation to Health and Safety is considered as part of appraisal/performance development processes.
- The CDO must report in writing each month to the Board of Management on the development, review and implementation of risk management practices, health and safety audits and the reporting and response to incidents and near misses.

5.3 The CDO, Program Leaders and Staff in consultation with the Board, are responsible, as far as is reasonably practical, for:

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- Ensuring staff, volunteers, Centre users and others follow safe systems of work and participation.
- Promoting health, safety and well-being.
- Ensuring that work and participation is within the physical and psychological capacity of the people involved.
- Maintaining positive relationships with staff and volunteers so they can detect any early warning signs of difficulty and take appropriate action.
- Creating an atmosphere that encourages early reporting of problems or potential problems.
- Documenting and investigating any accident, injury and 'near-miss' incident within their area(s).
- Regularly inspecting the workplace, monitoring working conditions and taking or recommending appropriate action where necessary.
- Ensuring the provision, maintenance of, and proper use of approved personal protective equipment.
- WHS is a Standard item on all employee/volunteer meeting agendas.

5.4 Staff and Volunteers are responsible, as far as is reasonably practical, for:

- Observing all safety and health instructions including Safe Work Method Statements, acting safely and avoiding unnecessary risks to themselves and others.
- Excepting for an approved maintenance or repair procedure, not interfering with, removing, displacing or making ineffective any safeguard, safety device, equipment or appliance, provided for safety or health purposes.
- Reporting potential hazards to the CDO, in accordance with the relevant sections of the Act and Regulations.
- Assisting in the identification of hazards, the assessment of risks and the implementation of risk control measures.

5.5 Everyone has a responsibility to:

- Take reasonable care to protect their own and others health and safety when at the Centre or participating in Centre activities.
- Comply with instructions, including Policies, Procedures and Safe Work Method Statements, issued to protect their own personal health and safety and the health and safety of others.
- Report potential hazards to the appropriate staff member as soon as possible.
- Report accidents, injuries and "near miss" incidents to the appropriate staff member as soon as possible after the event.
- Ensure that they are, by the consumption of alcohol or a prohibited substance or other drug (including medically prescribed or over the counter drugs) not in such a state as to endanger their own safety or the safety of any other person when at the Centre or participating in Centre activities.

6. DEFINITIONS

Due diligence: taking reasonable steps - taking reasonable steps, or demonstrating due diligence, requires Officers to:

- Acquire and maintain work health and safety knowledge relevant to the workplace (the Centre).
- Understand the Centre's operations and associated hazards and risks.
- Ensure resources and processes are available to eliminate or minimise health and safety risks.
- Ensure there are appropriate processes for receiving and considering information about incidents, hazards and risks as well as respond to these in a timely way.

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- Ensure the Centre has and implements processes to comply with any duties or obligations such as reporting incidents, consulting with workers, complying with notices issued under the Act, providing training and instructing workers about work health and safety, and making sure that Health and Safety Representatives receive training.

Hazard - means a situation or thing that has the potential to harm a person. Hazards at work may include: chemicals, electricity, working at heights, working alone, and violence at the workplace, bullying and doing a repetitive job.

Officer - an Officer under the Act is a person who makes or helps make decisions that affect the whole, or a substantial part, of a PCBU's (the Centre's) activities. If a person is responsible only for implementing, not making those decisions, they are not considered an Officer.

Officer - Duties - the duties of an Officer, established in the Work Health and Safety Act 2012 (SA), are that an Officer must:

- keep up to date with work health and safety issues
- Exercise due diligence to ensure the PCBU's (the Centre's) health and safety duties are met.

An Officer must actively fulfil this duty and not assume that someone else has taken care of health and safety outcomes.

Others - clients, customers and visitors (including workers from external agencies).

Others - Duties - the duties of others, established in the Work Health and Safety Act 2012 (SA), are that, while at work (i.e. at the Centre) they must:

- Take reasonable care for their own and others' health and safety
- Take reasonable care not to adversely affect the health and safety of others
- Comply with any reasonable instruction given by the PCBU (the Centre), so far as they are reasonably able.

Reasonably practicable – the Person Conducting a Business or Undertaking's - PCBU (the Centre's) duty is qualified by the words 'so far as is reasonably practicable'. There are two elements to what is 'reasonably practicable'. Officers must consider:

- What can be done – that is, what is possible in the circumstances for ensuring health and safety
- Whether it is reasonable in the circumstances to do all that is possible.

Factors that may determine whether something is 'reasonably practicable' include:

- The likelihood of the hazard or the risk concerned occurring
- The degree of harm that might result from the hazard or the risk
- What the person concerned knows, or ought reasonably to know about the hazard/risk and ways of eliminating the hazard/risk
- The availability and suitability of ways to eliminate or minimise the risk
- The cost associated with available ways of eliminating or minimising the risk, including whether the cost is grossly disproportionate to the risk
- What influence and control can be applied.

Risk - is the possibility that harm (death, injury or illness) might occur when exposed to a hazard.

Risk control means taking action to eliminate health and safety risks so far as is reasonably practicable, and if that is not possible, minimising the risks so far as is reasonably practicable.

Eliminating a hazard will also eliminate any risks associated with that hazard.

Worker – a worker is someone who carries out work for a PCBU (the Centre) and includes:

- An employee
- A volunteer
- A contractor or sub-contractor (facilitators and group leaders)
- An employee of a contractor or sub-contractor

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- An employee of a labour hire company
- An apprentice or trainee
- A student gaining work experience

Worker - Duties - the duties of a worker, established in the Work Health and Safety Act 2012 (SA), are that, while at work, a worker must:

- Take reasonable care for their own safety
- Ensure that they do not adversely affect the health and safety of co-workers or other people
- Comply with any reasonable instruction and co-operate with a PCBU's (the Centre's) Work Health and Safety Policy and Procedures including Safe Work Method Statements.

Workplace - workplace is a place where work is carried out for a business or undertaking and includes any place where a worker goes, or is likely to be, while at work. This includes a vehicle, vessel, or other mobile structure.

7. RELEVANT DOCUMENTS

- Work Health And Safety Act 2012 (SA)
- Work Health and Safety Regulations 2012 (SA)
- Safe Work SA's resources and publications (including the Health and Safety Handbook)
- Safe Work Australia's resources and publications
- Food Standards Australia's resources and publications
- Material Safety Data Sheets

8. CONSEQUENTIAL DOCUMENTS

The following documents have been developed as a consequence of this policy statement and to guide its implementation and should be read in conjunction with the following controlled documents:

- Work Health & Safety Operating Procedures
- Centre's Safe Work Method Statements
- Chemical Register
- Chemical Safety Data Sheet
- WH & Safety Folder (Reception Cupboard)
- Accident/Incident/Near-Miss Report Form

This Policy supersedes all previous versions and is applicable across the Reynella Neighbourhood Centre Inc. from the date it was last approved by the Board of Management

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