

## 1 RISK MATRIX

A risk matrix is a useful tool to use during the risk assessment process. It helps in identifying the level of risk by looking at the likelihood that a negative event may occur, and the severity of the consequence should it occur.

Risk Matrix						
		Likelihood				
		Rare	Unlikely	Possible	Likely	Almost certain
Consequences	Major	Moderate	High	High	Critical	Critical
	Significant	Moderate	Moderate	High	High	Critical
	Moderate	Low	Moderate	Moderate	High	High
	Minor	Very low	Low	Moderate	Moderate	Moderate
	Insignificant	Very low	Very low	Low	Moderate	Moderate

## 2 LIKELIHOOD

The risk matrix includes five levels of likelihood. When thinking about likelihood, the approved provider and service leaders should prioritise actions based on ensuring compliance with the minimum legislative standards, particularly those standards relating to the safety, health and wellbeing of children. The following table is a useful guide.

Likelihood	
<b>Rare</b>	Very unlikely – the event may occur only in exceptional circumstances
<b>Unlikely</b>	Improbable – the event is not likely to occur in normal circumstances
<b>Possible</b>	Potential – the event could occur at some time
<b>Likely</b>	Probable – the event will probably occur in most circumstances
<b>Almost certain</b>	Very likely – the event is expected to occur in most circumstances

## 3 CONSEQUENCE

The risk matrix includes five levels of consequences. This considers the potential impact and how it might affect the safety and wellbeing of children, families, staff and the wider community

- Insignificant
- Minor
- Moderate
- Significant
- Major



**RISK ASSESSEMENT FOR** \_\_\_\_\_

(name of centre)

EYLF-013

Sleep and Rest ELCOSCHCFDC

Risk Assessment Template

Activity	Hazard identified	Risk assessment (use matrix)	Elimination/control measures	Who?	When?

Plan prepared by		Plan prepared in consultation with	
Full name		Full name	
Role/position		Role/position	
Signature		Signature	



REVIEW AND PLAN				
Today's date _____	Communicated to all relevant staff Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/a <input checked="" type="checkbox"/>	Yes	No	Comments
Risks identified from this risk assessment have been addressed within policy and procedure (regulation 84C) as well as other matters required under regulation 84C, including:		<input type="checkbox"/>	<input type="checkbox"/>	
• the number, ages and development stages of children being educated and cared for.		<input type="checkbox"/>	<input type="checkbox"/>	
• the sleep and rest needs of children at the service (including specific health care needs, cultural preferences, sleep and rest needs of individual children and requests from families about a child's sleep and rest).		<input type="checkbox"/>	<input type="checkbox"/>	
• the suitability of staffing arrangements required to adequately supervise and monitor children during sleep and rest periods		<input type="checkbox"/>	<input type="checkbox"/>	
• the level of knowledge and training of the staff supervising children during sleep and rest periods		<input type="checkbox"/>	<input type="checkbox"/>	
• the location of the sleep and rest areas, including the arrangement of cots and beds within the sleep and rest areas.		<input type="checkbox"/>	<input type="checkbox"/>	
• for FDC services that provide <b>overnight care</b> to a child, any risks that the overnight care provided at the family day care residence or approved venue may pose to the safety, health or wellbeing of the child.		<input type="checkbox"/>	<input type="checkbox"/>	
• the safety and suitability of any cots, beds and bedding equipment and having regard to the ages and developmental stages of the children who will use them.		<input type="checkbox"/>	<input type="checkbox"/>	•
• any potential hazards in sleep and rest areas or on a child during sleep and rest periods.		<input type="checkbox"/>	<input type="checkbox"/>	
• the physical safety and suitability of sleep and rest environments, including temperature, lighting and ventilation.		<input type="checkbox"/>	<input type="checkbox"/>	
<b>DATE OF NEXT REVIEW</b> _____		<input type="checkbox"/>	<input type="checkbox"/>	

Plan prepared by		Plan prepared in consultation with	
Full name		Full name	
Role/position		Role/position	
Signature		Signature	



**RISK ASSESSEMENT FOR**

\_\_\_\_\_

(name of centre)

EYLF-013

Sleep and Rest ELCOSCHCFDC

Risk Assessment Template

Plan prepared by		Plan prepared in consultation with	
Full name		Full name	
Role/position		Role/position	
Signature		Signature	