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| Company name  Description automatically generated**Catholic Archdiocese of Perth****Safeguarding Risk Assessment Checklist** |
| **Entity** | [ ]  **Archdiocesan Agency**  [ ]  **Office** [ ]  **Organisation**  [ ]  **Ministry**  [ ]  **Parish** |
| **Scope** | **USE THIS CHECKLIST PRIOR TO RUNNING AN ACTIVITY.** |
| **Activity Name** |  | **Date** |  |
| **Location**  |  |
| **Person/s Completing the Checklist** |
| **SURNAME** | **FIRST NAME** | **SIGN** | **ROLE**Director/Manager/Parish Priest/Safeguarding Officer/Activity Leader |
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| **INSTRUCTIONS** |
| **1** | **Identify the risks:** Who is involved? Where is the activity being held? What could happen? How could it happen? Is it likely, possible or unlikely to happen? Are the consequences minor, moderate or major? This will give you a risk rating. |
| **2** | **Consequences:** List what could happen as a result of the risk. |
| **3** | **Mitigation:** Consider what strategies are needed to mitigate the safeguarding risk. |
| **4** | **Risk Rating**: If high: Initiate a Risk Assessment in consultation with your insurance company and/or the Archdiocesan Risk Manager and implement a Risk Management Plan. |
| **5** | **Evaluate**: Did the risk mitigation work? Did risks arise? What may need to be improved for next time? |
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| **RISK RATING** |
|  | **CONSEQUENCE** |
| **LIKELIHOOD** | **MINOR****(Tolerate & observe)** | **MODERATE****(Monitor & Review)** | **MAJOR****(Priority Treatment)** |
| **LIKELY** | Medium | High | High |
| **POSSIBLE** | Low | Medium | High |
| **UNLIKELY** | Low | Low | Medium |
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| **Identify the Risk** | **Risk Rating** | **Consequences** | **Mitigation** | **Is a Risk Assessment Required?****YES/NO** |
| Low |
| Medium |
| High |
| **PERSONNEL INVOLVED** |
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| **Identify the Risk** | **Risk Rating** | **Consequences** | **Mitigation** | **Is a Risk Assessment Required?****YES/NO** |
| Low |
| Medium |
| High |
| **PARTICIPANTS ATTENDING** |
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| **PHYSICAL ENVIRONMENT OF THE VENUE** |
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| **ONLINE ENVIRONMENT COMMUNICATION FOR THE ACTIVITY** |
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| **EVALUATE AFTER THE ACTIVITY** |
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| **RETURN THE COMPLETED FORM TO THE ACTIVITY LEADER AND LINE MANAGER/PARISH PRIEST/AGENCY DIRECTOR** |