



Risk Management Policy

Policy Reference	WLILP23
Category	Operational Policies — Governance & Health and Safety
Version	4.0 (merged with the newer ISO 31000-based redraft)
Status	APPROVED — by the Board of Directors on 9 October 2026
Supersedes	WLILP23 - Risk Management Policy - DRAFT v3.0; WLILP23 - Risk Management Policy 2026 (Approval Date 30 April 2026, not previously merged)
Policy Owner	Board of Directors, West Limerick Independent Living CLG
Applies To	All employees, including Personal Assistants and Coordinators; all service users and service environments
Related Policies	See Section 18
Review Cycle	Annually

1. Introduction

This document sets out the policy and procedures by which West Limerick Independent Living CLG (WLIL) manages risk.

WLIL adopts a proactive and structured approach to risk management in line with **ISO 31000 Risk Management Principles**, ensuring that risk management:

- Supports the achievement of organisational objectives
- Protects service users, staff, and the public
- Is embedded into day-to-day operations and strategic planning

WLIL recognises that risk management is the responsibility of all staff and must be integrated into all aspects of service delivery.

2. Policy Statement

It is the policy of WLIL to manage risk on an integrated basis across all activities, including:

- Service delivery (Personal Assistant and Home Support Services)
- Operational functions
- Strategic planning



WLIL is committed to:

1. Identifying and assessing risks proactively
2. Implementing appropriate control measures
3. Maintaining clear governance and accountability
4. Supporting a culture of safety and continuous improvement
5. Enabling service users to live independently while managing risk appropriately

3. Purpose

The purpose of this policy is to:

- Provide a consistent framework for risk management
- Define roles and responsibilities
- Establish clear processes for identifying, assessing, managing, and monitoring risks
- Ensure compliance with statutory and regulatory requirements
- Embed risk management into all organisational activities

4. Scope

This policy applies to:

- All employees, including Personal Assistants and Coordinators
- All service users and service environments
- All operational and strategic risks

It covers all services delivered by WLIL, including:

- Personal Assistant Services
- Home Support Services
- Community and external service environments

5. Definitions

Key terms used in this policy include:

- **Risk:** The effect of uncertainty on objectives
- **Risk Assessment:** Process of identifying, analysing, and evaluating risk
- **Risk Register:** A record of identified risks and associated actions
- **Risk Owner:** Person responsible for managing a risk
- **Residual Risk:** Risk remaining after controls are applied
- **Incident:** An event that has occurred (as distinct from a risk, which may occur)



- **Risk Appetite:** The level of risk WLIL is willing to accept

(A full definitions list aligned to ISO 31000 is maintained in Appendix 1.)

6. Risk Appetite

WLIL adopts the following approach:

- **Safeguarding Risks:** Zero tolerance
- **Health & Safety Risks:** Low tolerance
- **Service Disruption:** Managed to lowest practicable level
- **Financial Risks:** Moderate tolerance with oversight
- **Reputational Risks:** Low tolerance
- **Independence & Lifestyle Risks:** Balanced approach (risk-enabled, not risk-averse)

All risks are assessed in the context of supporting **independent living and personal choice**.

7. Risk Criteria

Risks are classified as:

7.1 Strategic Risks

Long-term risks affecting organisational objectives.

7.2 Operational Risks

Risks arising from day-to-day service delivery.

7.3 Risk Impact Categories

- Harm to a Person
- Service User Experience
- Compliance (Legal, Regulatory, Professional)
- Objectives and Projects
- Business Continuity
- Reputational Risk
- Financial Loss
- Environmental Impact

(Examples provided in Appendix 2)



8. Roles and Responsibilities

8.1 Board of Directors

- Reviews risk framework annually
- Reviews serious incidents and high risks
- Provides governance and oversight

8.2 Management

- Implements this policy
- Maintains risk registers
- Reviews incidents and escalated risks
- Reports to the Board

8.3 Service Coordinators

- Primary point of contact for risk reporting
- Conduct and review risk assessments
- Maintain regular contact with service users and staff
- Escalate risks where required

8.4 Designated Staff Member

- Oversees safeguarding concerns
- Ensures appropriate reporting and action

8.5 Staff (including Personal Assistants)

- Identify and report risks
- Follow risk control measures
- Participate in training

9. Risk Management Process

WLIL follows the ISO 31000 process:

9.1 Risk Identification

Risks identified through:

- Risk assessments
- Incident reports



- Staff/service user feedback
- Audits and reviews

9.2 Risk Analysis

Risks assessed based on:

- Likelihood
- Impact

Using WLIL Risk Assessment Tool (Appendix 3)

9.3 Risk Evaluation

Determines whether risk is acceptable or requires treatment.

9.4 Risk Treatment

Includes:

- Risk reduction (controls)
- Risk avoidance
- Risk transfer

Actions are:

- Assigned to responsible persons
- Time-bound
- Monitored

9.5 Monitoring and Review

- Ongoing through coordinators and management
- Reviewed in meetings and audits

9.6 Closing Risk

Risks may be:

- **Open** – under active management
- **Monitor** – reduced but still observed
- **Closed** – fully mitigated and archived

10. Risk Management Systems



10.1 Risk Register

Maintained:

- Hard copy (Head Office)
- Digital (SharePoint)

10.2 Risk Assessment System

WLIL operates a comprehensive system including:

- Service User Risk Assessments
- Manual Handling
- Safeguarding (Adults & Children)
- Falls Prevention
- Medication Support
- Infection Control
- Lone Working
- Violence & Aggression
- Transport
- Fire Safety
- Environmental Risks
- COSHH
- Pregnancy
- DSE
- Communication & Social Risks
- External Locations

10.3 Care Planning Integration

Risk management is embedded in:

- Client Service Agreements
- Activity Care Plans
- Emergency Plans

11. Incident Management

11.1 Reporting

Incidents reported by:



- Staff
- Service users
- Families

11.2 Review

Reviewed by:

- Manager
- Service Coordinator

11.3 Escalation

May result in:

- Risk assessment
- Notifiable event report

11.4 External Reporting

Where required, reports are made to:

- Health Service Executive
- Safeguarding Teams
- Health and Safety Authority
- An Garda Síochána

12. Communication and Notification of Risk

- All risks reported to Service Coordinator
- Escalated to Manager where required
- High risks escalated to Board
- Feedback provided to reporting party

13. Business Continuity

WLIL maintains continuity through:

- Workforce planning
- Recruitment strategies
- Strategic planning (5-year + annual plans)
- Monitoring service delivery risks



14. Legislative and Regulatory Compliance

This policy aligns with:

- Safety, Health and Welfare at Work Act 2005
- GDPR and the Data Protection Act 2018
- Charities Act 2009
- Charities Governance Code (Charities Regulator, mandatory since 1 January 2020)

And relevant standards including:

- HIQA Draft National Standards for Home Support Services (2024)
- Health Service Executive

15. Monitoring and Compliance

Management is responsible for:

- Ensuring implementation
- Monitoring compliance
- Reviewing effectiveness

16. Dissemination

This policy will be:

- Communicated to all staff
- Available internally (SharePoint)
- Supported by training

17. Implementation

Implementation includes:

- Staff training
- Integration into daily operations
- Ongoing review and improvement

18. Related Policies

This policy operates alongside the following WLIL policies, which govern the specific risk areas named below in full detail; this policy does not restate their content:

- WLILP1 - Policy on Policies



- WLILP3 - Child Protection and Welfare Policy
- WLILP4 - Garda Vetting Policy
- WLILP5 - Code of Standards and Behaviour
- WLILP7A-D - Data Protection Policy suite
- WLILP8 - Safeguarding Vulnerable Persons at Risk of Abuse Policy
- WLILP11 - Financial Procedures Policy
- WLILP12 - Board Code of Conduct and Governance Policy
- WLILP17 - Consent Policy
- WLILP19 - Lone Working Policy
- WLILP20 - Personal and Intimate Care Policy
- WLILP22 - Protected Disclosures and Good Faith Reporting Policy
- WLILP24 - Behavioural Management Policy
- WLILP25 - Crisis Management Policy and Response Procedure
- WLILP30 - Incident Management & Reporting Policy
- WLILP32 - Recruitment and Selection Policy
- WLILP43 - Falls Policy
- WLILP53 - Complaints Policy
- WLILP57 - Digital Risk Assessment Policy

Appendices

Appendix 1 - Definitions (ISO aligned)

Appendix 2 - Risk Impact Categories

Appendix 3 - Risk Matrix & Assessment Tool

Appendix 4 - Roles & Governance Structure

Appendix 5 - Risk Notification Process

APPENDIX 1 – DEFINITIONS (ISO ALIGNED)

West Limerick Independent Living CLG



These definitions are aligned to ISO 31000:2018 Risk Management – Principles and Guidelines.
They are used throughout this Risk Management Policy.

TERM	DEFINITION	IN PRACTICE (WLIL EXAMPLE)
 RISK	The effect of uncertainty on objectives.	 A risk is the possibility that a service user may fall during support, which could cause injury and affect their independence.
 RISK IDENTIFICATION	The process of finding, recognising and describing risks.	 Identifying that a loose rug in a service user's home could cause a trip hazard.
 RISK ANALYSIS	The process of understanding the nature of risk and determining the level of risk.	 Assessing how likely a fall is and how serious the injury could be if it happened.
 RISK EVALUATION	The process of comparing the results of risk analysis with risk criteria to determine whether the risk is acceptable.	 Deciding if the risk level is acceptable or if further action is required.
 RISK TREATMENT	The process of selecting and implementing measures to modify risk.	 Putting in place non-slip mats and ensuring Personal Assistants follow safe movement procedures.
 CONTROL	Any measure that modifies risk.	 Policies, training, equipment or supervision that reduce the likelihood or impact of a risk.
 RISK OWNER	The person or role with the accountability and authority to manage a risk.	 The Service Coordinator is the risk owner for risks within their service area.
 MONITORING & REVIEW	The process of checking and reviewing risks, controls and actions over time.	 Reviewing the risk assessment regularly and updating it when circumstances change.
 RESIDUAL RISK	The risk that remains after controls and actions have been implemented.	 The remaining risk of a fall after non-slip mats and safe support procedures are in place.
 RISK REGISTER	A record of identified risks, assessments, controls, actions and ownership.	 All risks are recorded in the WLIL Risk Register (digital and hard copy).
 STAKEHOLDER	Any person or group that may affect, be affected by, or perceive themselves to be affected by a decision or activity.	 Service users, Personal Assistants, families, staff, the Board and external agencies.



Clear understanding of these terms helps us manage risk consistently, support independence and keep service users, staff and our services safe.



Independence
• Choice • Dignity • Safety

APPENDIX 2 – RISK IMPACT CATEGORIES

West Limerick Independent Living CLG



Risks may affect different areas of our organisation. When assessing a risk, select the category that reflects the **PRIMARY** area of impact. A risk may have other secondary impacts.

IMPACT CATEGORY	WHAT THIS MEANS	EXAMPLES IN WLIL SERVICES
 1. HARM TO A PERSON	Potential for physical or mental harm, injury, illness or distress to a service user, staff member, visitor or member of the public.	• Fall or injury to a service user during support • Medication error causing harm • Aggression or abuse towards a service user or staff • Infection or illness transmission
 2. SERVICE USER EXPERIENCE	Impact on the quality, dignity, respect, choice and overall experience of the service user.	• Poor communication or cancelled support • Delay in service or inconsistent support • Lack of choice or involvement in decisions • Breach of privacy or confidentiality
 3. COMPLIANCE (LEGAL / STATUTORY / PROFESSIONAL)	Failure to meet legal, regulatory, contractual or professional obligations and standards.	• Breach of HSE contract requirements • Failure to follow safeguarding procedures • Non-compliance with health & safety legislation • Data protection breach
 4. OBJECTIVES AND PROJECTS	Impact on the achievement of our strategic objectives, service goals or specific projects.	• Delay or failure to deliver a key service • Project not completed on time or within scope • Inability to meet targets or service commitments • Reduced quality of service delivery
 5. BUSINESS CONTINUITY	Disruption to our ability to deliver services now or in the future.	• Staff shortages causing service disruption • IT system failure or loss of critical data • Severe weather or emergency impacting services • Loss of key suppliers or resources
 6. ADVERSE PUBLICITY / REPUTATIONAL	Damage to WLIL's reputation or public trust, affecting how we are perceived.	• Negative media coverage • Complaint upheld by external body • Poor feedback shared publicly • Loss of confidence by funders or community
 7. FINANCIAL LOSS	Potential for direct or indirect financial loss or unexpected additional costs.	• Unexpected repair or replacement costs • Loss of funding or reduction in contract value • Fines, penalties or legal costs • Fraud, theft or misuse of funds
 8. ENVIRONMENT	Impact on the natural environment or our environmental responsibilities.	• Waste not managed properly • Excessive use of energy or resources • Pollution or harmful emissions • Non-compliance with environmental regulations



REMEMBER:



Consider the primary impact category when assessing risk.



Some risks may impact more than one category.



Understanding impact helps us focus on what matters most.

APPENDIX 3 – RISK MATRIX & ASSESSMENT TOOL (4-LEVEL)

West Limerick Independent Living CLG

This tool is used to assess the level of risk by considering the **IMPACT** (severity) and **LIKELIHOOD** (probability) of a risk occurring. The **Risk Rating** determines the priority for action and required escalation.

1. IMPACT (SEVERITY)			2. LIKELIHOOD (PROBABILITY)			3. RISK RATING CATEGORIES	
Level	Description	Example	Level	Description	Frequency Guide		
4 Major	Serious impact or harm	Long-term injury, major service disruption, significant legal breach	4 Likely	Will probably occur	Several times per year		1 – 4 LOW (GREEN) Manage locally Monitor
3 Moderate	Noticeable impact requiring intervention	Medical treatment, short-term service disruption, breach rectified	3 Possible	Might occur	Annually		5 – 8 MODERATE (AMBER) Action required Monitor regularly
2 Minor	Minor injury or short-term issue	First aid required, minor dissatisfaction, late delivery of service	2 Unlikely	Could happen occasionally	Every 2–5 years		9 – 12 HIGH (RED) Immediate action required Escalate to management
1 Negligible	Minimal impact, no injury or disruption	Minor inconvenience, no harm, no impact on service	1 Rare	Highly unlikely	May occur every 5+ years		13 – 16 EXTREME (RED) Urgent action Escalate to senior management and Board

4. RISK MATRIX (4 x 4)				
LIKELIHOOD (PROBABILITY)	IMPACT (SEVERITY)			
	1 Negligible	2 Minor	3 Moderate	4 Major
4 Likely	4	8	12	16
3 Possible	3	6	9	12
2 Unlikely	2	4	6	8
1 Rare	1	2	3	4

■ 1 – 4 Low
 ■ 5 – 8 Moderate
 ■ 9 – 12 High
 ■ 13 – 16 Extreme



6. ESCALATION THRESHOLDS		7. KEY PRINCIPLE		8. INTEGRATION WITH WLIL SYSTEMS	
Risk Level	Action		Risk assessment must always consider: “Does the benefit to the service user outweigh the risk?” WLIL supports: Independence • Choice • Participation Risks should be managed, not automatically avoided.		Risk Assessment App
● Low (1–4)	Managed locally				Care Planning Systems
● Moderate (5–8)	Reviewed by Service Coordinator				Incident Reporting Processes
● Extreme (13–16)	Escalated to Senior Management and Board				SharePoint Risk Register

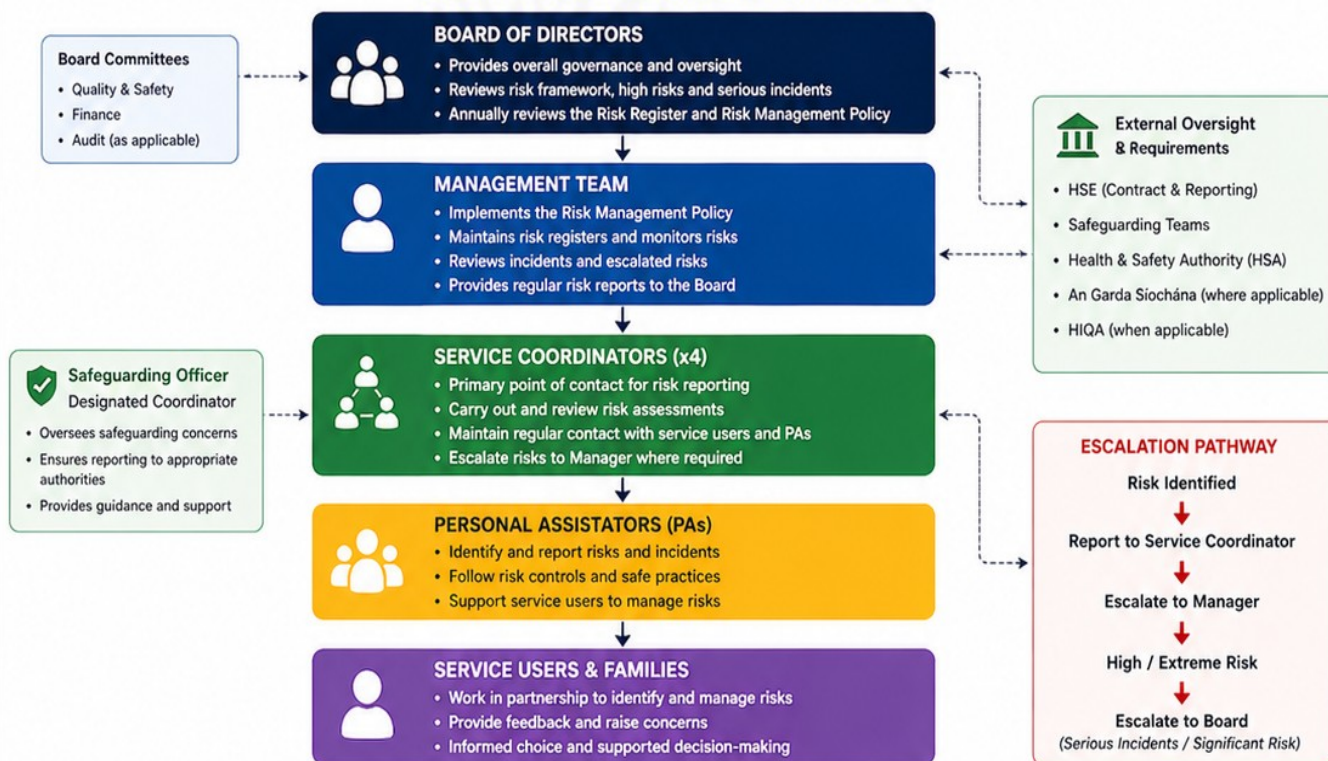


All risks must be recorded, monitored and managed in line with WLIL policies, legal requirements and our commitment to supporting safe, independent living.

APPENDIX 4 – ROLES & GOVERNANCE STRUCTURE West Limerick Independent Living CLG

Everyone has a role in managing risk. Clear responsibilities, reporting and escalation ensure risks are identified, managed and discussed at the right level.

GOVERNANCE STRUCTURE & REPORTING LINES



ROLES & RESPONSIBILITIES AT A GLANCE

ROLE	KEY RESPONSIBILITIES	RISK ACTIVITIES	REPORTS TO
 Board of Directors	- Provides strategic oversight and accountability - Ensures strong risk governance	- Reviews risk register and key risks - Approves policy and major risk decisions	Members/Stakeholders
 Management Team	- Implements policy and procedures - Monitors and manages organisational risks	- Reviews incidents and escalated risks - Reports risks and trends to the Board	Board of Directors
 Service Coordinators	- First line risk management - Maintain regular contact and oversight	- Risk assessments and reviews - Escalate risks as required	Manager
 Personal Assistants	- Identify risks in day-to-day work - Implement controls and safe practices	- Report risks and incidents - Participate in training and reviews	Service Coordinator
 Service Users & Families	- Partner in identifying and managing risk - Provide feedback and report concerns	- Highlight risks and incidents - Participate in decision-making	Service Coordinator
 Safeguarding Officer (Designated Coordinator)	- Oversee safeguarding concerns - Ensure appropriate reporting and follow-up	- Safeguarding assessments - Liaise with external safeguarding teams	Manager / Board

KEY RISK REPORTING CHANNELS



OUR GUIDING PRINCIPLE



We support independence and choice.
We assess risk, we don't avoid it.
Benefits and rights of the service user are always at the centre of our decisions.
Independence • Choice • Dignity • Safety



All staff are responsible for risk management. When in doubt – report, discuss and escalate.
Working together keeps service users, staff and our services safe.

APPENDIX 5 – RISK NOTIFICATION PROCESS

West Limerick Independent Living CLG



Timely reporting of risks and concerns allows us to act quickly, keep people safe and protect our services.
Everyone has a responsibility to report.

THE PROCESS – WHAT TO DO

1



IDENTIFY A RISK OR CONCERN

- You notice or become aware of something that could cause harm, disruption or have a negative impact.



2



REPORT IMMEDIATELY

- Report to your Service Coordinator (verbal or written).
- Use the Incident/Risk Report Form or report via the Risk Assessment App.



3



REVIEW & ASSESS

- The Service Coordinator records the report and reviews the risk.
- Further information may be gathered.



4



DETERMINE ACTION

- Decide on immediate actions to manage the risk.
- Decide if escalation is required based on risk level and impact.



5



IMPLEMENT ACTIONS

- Actions are carried out to reduce or eliminate the risk.
- Record actions, responsible person and timeframes.



6



MONITOR & REVIEW

- Monitor the risk and effectiveness of actions.
- Update the risk assessment as required.



7



CLOSE OR CONTINUE MONITORING

- Close the risk when it is fully managed and no longer a threat.
- Or keep under review if some risk remains.

ESCALATION PATHWAY



LEVEL 1

Service Coordinator

First point of contact.
Receives and reviews all risk reports.



LEVEL 2

Manager

Escalate if risk is Moderate or higher, or if additional support is required.



LEVEL 3

Senior Management

Escalate if risk is High or Extreme, or has significant impact.



LEVEL 4

Board of Directors

Escalate Serious Incidents / Significant Risks as required.

EXTERNAL NOTIFICATION

Where required, reports will be made to:

-  HSE (Contract & Reporting)
-  Safeguarding Teams
-  Health & Safety Authority (HSA)
-  An Garda Síochána (where applicable)
-  HIQA (when applicable)



All reports are treated seriously and confidentially.
No one will be penalised for reporting a risk in good faith.



Working together to keep service users, staff and our services safe.

WHAT TO REMEMBER



Report early



Give clear information



Escalate when needed



Record everything



Follow up and learn from every event



Approval

Approved by the Board of West Limerick Independent Living CLG on 9 October 2026.

Signed on behalf of the Board, on its instruction, by the General Manager:

Margaret O'Connor

Margaret O'Brien O'Connor, General Manager

Date signed: *09-10-2026*