

VRAJ

**Cultural & Community Centre
Centre Management Handbook**

Conduct & Discipline Policy & Procedure

Policy

This policy and procedure is to be used by VRAJ where a participant at the Centre continually breach accepted standards of behaviour or where a single incident is a serious breach of guidelines.

Procedure

Participants and Member Rights

All participants and members have a right to:

- Be treated fairly and with respect to pursue their activities in a supportive and stimulating environment
- Learn in an environment free of discrimination and harassment
- Privacy of their personal information and membership records held by VRAJ
- Lodge a complaint without fear

Participants and member are responsible for:

- Treat other participants and VRAJ staff and volunteers with respect and fairness
- Follow any reasonable direction from VRAJ staff
- Be punctual and regular in attendance
- Refrain from using mobile phones or pagers during classes or performances
- Return VRAJ equipment / materials on time
- Observe normal safety practices; e.g., wear approved clothing and protective equipment
- Refrain from using offensive language
- Refrain from smoking in VRAJ buildings and grounds and directly outside the front gates
- Behave in a responsible manner by not:
 - Harassing or intimidating fellow VRAJ participants or members
 - Damaging, stealing, modifying or misusing property (including electronic records)
 - Being under the influence of alcohol or drugs
 - Engaging in any other behaviour, which could offend, embarrass or threaten others.

Complaints & Appeals Policy & Procedure

1. Policy

1.1 If a member has a complaint that they wish to raise with VRAJ (VRAJ) they are encouraged to do so through the VRAJ Committee.

1.2 Members may lodge informal and formal complaints.

1.3 VRAJ employs a procedure for handling complaints

1.4 All complaints lodged will be used for continuous improvement purposes.

1.5 The VRAJ Committee is responsible for implementing this policy and reviewing its effectiveness and compliance with regulatory guidelines.

1.6 The following procedure outlines how members will have their complaints and appeals processed.

Procedure

2. General complaints

2.1 Members are encouraged to approach any member of VRAJ Committee and make a complaint about any issue relating to VRAJ services.

2.3 Any committee member can be involved in this process to resolve issues.

2.4 Committee members should refer members to the VRAJ Directors if they feel they cannot or it is not appropriate for them to try and resolve the complaint/ issue.

2.5 Committee members may ask the member to come back at an arranged time if further investigation is required.

2.6 The outcome of the investigation should be communicated to the member within an agreed timescale.

2.7 If the complaint is against the VRAJ Manager, another member of Committee should in the first instance be approached to deal with the complaint.

2.8 The VRAJ Committee should record the complaints and outcomes in the Complaints & Appeals Register for continuous improvement purposes.

Emergency Policy & Procedure

(This document is intended to guide VRAJ on the content when producing their own Emergency procedures. An Emergency policy and procedure should not be employed unless approved by a qualified OHS professional).

Policy

- 1.1 VRAJ (VRAJ) employs an effective Emergency policy to guide all members in the event of an emergency.
- 1.2 This policy provides the emergency control structure and directions which will prevent injury to personnel, visitors and neighbouring people/premises in the event of an emergency.
- 1.3 This policy and procedure is employed to ensure the safety of personnel, members and other stakeholders.
- 1.4 The procedures also aim to minimise damage to the organisation's equipment, plant and installations.
- 1.5 VRAJ staff/committee are provided access to this policy and procedure at all times.
- 1.6 VRAJ ensures that the information provided is accurate and regularly reviewed to ensure currency of practice.
- 1.7 Emergency plans will be formulated and reviewed in consultation with personnel, emergency service specialists and in line with statutory requirements.
- 1.8 Plans should be simple but effective
- 1.09 Emergency control personnel will be trained in their appointed duties
- 1.10 All personnel will be regularly trained in appropriate response procedures
- 1.11 Specific plans should be drawn up for emergencies created within the site and those caused by external sources.
- 1.12 The VRAJ Committee is responsible for implementing this policy and reviewing its effectiveness.

Procedure

- 2.1 All risks will be continually monitored in order to minimise the potential of an emergency
- 2.2 Emergency plans are developed in accordance with this policy.
- 2.3 All volunteers, members and other appropriate stakeholders are informed of the emergency procedures.
- 2.4 Emergency procedures are included in member orientation.
- 2.5 Emergency procedures are included at meetings
- 2.6 Fire drills are conducted every 12 months.
- 2.7 Reviews of the effectiveness of the drills take place after each review with recommendations implemented where appropriate.
- 2.8 Professional expert advice is sought in relation to implementing this policy and procedure.
- 2.9 Recommendations are implemented where appropriate.

Internal Emergencies covered by these procedures are:

- Fire
- Medical emergency
- Standard Requirements for Emergency Procedures
- The alarm system

The alarm signal is denoted by Beep.Beep.Beep and means all people inside the building should evacuate the building using denoted exits and move to the identified assembly areas.

Raising the Alarm -There should be a system to allow people identifying an emergency to communicate this quickly to the emergency controller (staff member).

Standard Orders - Standard orders covering most emergencies eg fire, chemical etc will be posted in appropriate areas. It will contain brief instructions, emergency contact numbers and evacuation points.

Assembly points - These areas must be highlighted on floor plans for each area. Assembly points ensure wardens can take an initial count of personnel.

Evacuation points - These are highlighted on both any Standard orders and on the floor plans for each area. Evacuation to these points will only be undertaken upon the orders of a warden.

Controller & wardens - The controller(s) and wardens are listed on any Standing Orders and on noticeboards. Each of these officers will be distinguished at all times by name, badge, photo on noticeboard etc..

Emergency contacts - Emergency contact numbers for internal (wardens, controller, management, security) and external emergency liaison officers (police, fire brigade, ambulance) must be posted at each telephone. Training of Wardens Employees required to act as emergency wardens shall be provided with appropriate training.

Training of volunteers shall be provided with emergency evacuation training every 12 months.

First Aid First aiders will wear identification at all times (same method used for wardens).

Floor plans will be posted in all areas indicating exits, assembly points, fire protection equipment, break glass alarms and any other relevant information.

Checklists listing personnel evacuated will be completed and checked against attendance registers.

Procedure for Development of Emergency Plans

3.1 The management team shall identify possible emergency situations. A record of the assessment shall be kept.

3.2 The Committee shall develop emergency plans based on the Standard Requirements and using Standard Emergency Procedure.

3.3 Emergency Plans are kept up to date and reviewed every 12 months

3.4 Emergency Plans shall be verified by competent experts.

3.5 Emergency Information is displayed on an Emergency Information Notice, each near each entry and exit and kitchenette.

3.6 Equipment provided for Emergency Procedures shall be checked quarterly as part of the quarterly hazard inspection.

EMERGENCY PROCEDURES

1. Raise Alarm by phoning __000
2. Assist anyone in danger if safe to do so.
3. If safe use extinguisher to smother fire.
4. Move to assembly point on signal, on instruction from Staff members or when it is unsafe to remain in the area.
5. Assist visitors and disabled persons to evacuate.
6. Remain at Assembly Area until instructed by Staff Members.

MEDICAL EMERGENCY

- Step 1 Check for any threatening situation and control it if safe to do so
- Step 2 Remain with casualty (unless there is no other option) and provide appropriate support
- Step 3 Do not move any casualties unless in a life-threatening situation
- Step 4 Notify the Incident Controller and the first aider
- Step 5 Notify the ambulance if not already done and designate someone to meet them
- Step 6 Provide support to first aider or ambulance if required

Local Emergency & Key Contacts

Fire	000 Fire and Rescue NSW Penrith Fire Station - (02) 4721 5575 Fire and Rescue NSW Richmond Fire Station - (02) 4578 1222 Yarramundi Rural Fire Brigade - (02) 4776 1575
Police	000 Penrith Police Station, 317 High St, Penrith NSW 2750 - (02) 4721 9444
Medical	Nepean Hospital, Derby St, Kingswood NSW 2747 – (02) 4734 2000 Dr.
Ambulance	NSW Ambulance, 307 Windsor St, Richmond NSW 2753 – 000 Campbell St & Hamilton St, Riverstone NSW 2765 - (02) 9320 7777
Penrith Council	(02) 4732 7777 council@penrith.city
First Aid Officer	TBA

Committee

Himanshu Shah 0403 017 344	Aakash Shah 0412 480 420	Milin Chokshi 0431 561 193	Akshay Butani 0403 569 016
Shishir Patel 0403 491 920	Ramesh Desai 0422 052 382	Vikash Parikh 0449 950 556	

Evacuation Plan

TBC once DA approved

RESUSCITATION

1 Danger

Check For Danger To You To Casualty And To Others.

2 Response

Talk & Touch

RESPONDS

Reassure, Make Comfortable. Treat Bleeding And Other Injuries.



3 Send For Help

EMERGENCY PHONE: 000
REMOTE AREAS PHONE: 112
from mobiles

4 Airway

Open Airway

NO RESPONSE

If Required, Roll Casualty On Side To Clear Airway.



5 Breathing

Check For Breathing

BREATHING

Observe Breathing Look, Listen & Feel



6 CPR

For Mutual Protection The Use Of A Shield Devices Is Recommended

NOT BREATHING NORMALLY

Begin CPR
30 Compressions Followed By 2 Rescue Breaths
If Unwilling/ Unable To Perform Rescue Breaths Continue Chest Compressions
Continue CPR until responsiveness Or Normal Breathing Return



7 Defibrillation

Attach AED (Automated External Defibrillator) if Available & follow its prompts.



Child Resuscitation Guide

Child Not Breathing Normally → Give 2 small breaths. Moderate head tilt. Using 1 or 2 hands compress 1/3 chest depth in the middle of chest. Give 30 compressions & 2 breaths.

Infant Resuscitation Guide

Infant Not Breathing Normally → Give 2 puffs of air. Moderate head tilt. Using 2 fingers, compress 1/3 chest depth in the middle of chest. Give 30 compressions & 2 breaths.

FIRST AIDER'S CHOICE

See also: Resuscitation kit, Resuscitation kit, Resuscitation kit, Resuscitation kit

	Adult & Older Child	Young Child 1-8	Infant Less Than 1
Head Tilt	Maximum	Moderate	Nil
CPR Pressure	2 Hands	1 or 2 Hands	2 Fingers
CPR Chest Depth	1/3	1/3	1/3
CPR Rate	100/min	100/min	100/min
Ratio of Compressions to Inlations	30:2	30:2	30:2

If unwilling/unable to perform rescue breathe continue with chest compressions.



RESUS-a-Station

“Act don't React”

In an emergency call triple zero (000) for an ambulance

CPR Chart

Young children should be supervised when using this swimming pool.
Pool gates must be kept closed at all times.
Keep articles, objects & structures at least 900mm clear of pool fence.

D DANGER	Ensure the area is safe for yourself, others and the patient	
R RESPONSE	Check for Response: <ul style="list-style-type: none"> ask name squeeze shoulders NO RESPONSE <ul style="list-style-type: none"> send for help RESPONSE <ul style="list-style-type: none"> make comfortable, monitor response 	
S SEND FOR HELP	Call triple zero (000) for an ambulance or dial (112) from a mobile or ask another person to make the call	
A AIRWAYS	Open mouth: <ul style="list-style-type: none"> place in recovery position clear airway with finger 	
B BREATHING	Check for breathing: look, listen, feel NOT NORMAL BREATHING start CPR NORMAL BREATHING <ul style="list-style-type: none"> place in recovery position monitor breathing 	
C CPR 30 : 2	Start CPR 30 chest compressions: 2 breaths continue CPR until help arrives or patient recovers CHILDREN HEAD TILT CPR: Max breast bone depression one third the depth of the chest, two hands, 100 compressions per minute Approx 2 compressions per second INFANTS & BABIES KEEP HEAD HORIZONTAL Rescue breaths: Puffs only, no head tilt. CPR: Max breast bone compression one third the depth of the chest, with tips of 2 fingers only. Approx 100 compressions per minute	
D DEFIBRILLATOR	Apply defibrillator if available - follow voice prompts <i>(It is okay to use defibrillator in adult mode on a child or infant if no alternative available.)</i>	



Press infant, child or adult button for life saving instructions

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Buttons to be changed every 6 months