

Name \_\_\_\_\_

Issue 1:

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## *RISK ASSESSMENT 12* *Personal Safety and Risk*

### Risk Assessment Objectives: Maximise Personal Safety and Minimise Risks

Tick box if relevant

- Minimise Health and Safety Risks
- Minimise Moving, Transferring and Handling Risks
- Maximise comfort and food and drink intake
- Observe and Monitor Health, welfare and Behaviour
- Discuss Name's needs with Significant Others
- Discuss Name's needs with Carers and Professionals
- Ensure a safe and effective environment
- Discuss Name's Needs with them
- Ensure electrical equipment is tested and safe to use
- \_\_\_\_\_

### PERSONAL STATEMENT

\_\_\_\_\_  
\_\_\_\_\_

### RISK ASSESSMENT THROUGH CONCERN LEVELS

IF THE SCORE IS BETWEEN 7-10 THERE MUST BE AN ESSENTIAL ACTION PLAN

Severity	Concern level	Tick Box for Concern level	Concern by colour
10	Safeguarding concerns	[ ]	
09	3rd Party Intervention concerns	[ ]	
08	Destabilising concerns	[ ]	
07	Escalating concerns	[ ]	
06	Concerning concerns	[ ]	
05	Moderate Concerns	[ ]	
04	Medium concerns	[ ]	
03	Minimal concerns	[ ]	
02	Trivial concerns	[ ]	
01	No concerns	[ ]	

### ACTION PLAN

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Review Monthly

## SUPPORT PLAN 12

### Personal Safety and Risk

**Outcome:** Name is supported to care for himself in a way that helps me do as much as I can for myself .

#### ASSESSMENT

- Name** will tell staff "NO" if I do not want to do something or express to them if they are concerned about something.
- Name** access the local shop but has to have support where required
- Name needs help to** ~~can~~ their room, however, he can have staff supervision to handle any COSHH items. They can have help choose and prepare their breakfast, lunch and help to cook evening meals.

#### SUPPORT NEEDED

- Name** is happy in and feel safe in most environments, if he is scared or anxious I rely on their staff team for reassurance and support.
- Name** has to be supported in social situations.
- Name** does /does not require 1-1 support and help when crossing busy roads.
- When **Name** needs staff to travel in the car, staff must ensure that the central locking is on
- Name's** staff steam support him to access the wider community
- Name** has a 24/7 staff team, including waking night staff
- Name** may need staff to remind him to wash their hands before all meal preparations and before eat.
- Name** may need staff present when using any hot objects or appliances.
- Staff ensure **Name** prepares all their meals in accordance with the food hygiene regulations.

#### SPECIFIC OUTCOMES/ ACTIONS TO ACHIEVE

- For **Name** to feel safe in their environment
- People may need safety from Name
- For **Name** to feel safe in their environment
- People may need safety from Name
- Name** will be made to feels safe in their environment due to having good relationships with their staff team at Meadow Court, and also having a good level of trust in them, in areas of the community as per support plan
- Name** does /does not require support 1-1 support from staff, however, as they become familiar with their new surroundings he should grows in confidence
- Name** will be made to feels safe in their environment due to having good relationships with their staff team at \_\_\_\_\_ Home, and also having a good level of trust in them, in areas of the community as per support plan
- Name** may need safety from Name