

# PUPIL RISK ASSESSMENT



<b>Educational Establishment</b>	<b>Assessor/Role</b>	
<b>Name of Pupil and D.O.B</b>	<b>Reason for Assessment</b>	<b>Date Completed</b>
	<i>Initial</i>	<i>Review</i>

<b>DIAGNOSIS:</b>			
<b>Weight:</b>	<b>Height</b>		
<b>PUPIL PROFILE</b> <i>(Tick as appropriate)</i>	Always	Sometimes	Comments
<b>Comprehension/Communication</b>			
Age appropriate			
Limited/delayed			
<b>Compliance:</b>			
Co-operative			
Unco-operative			
Unpredictable			
<b>Pupil Profile</b>		<b>Details</b>	
Continence Issues			
Fatigue/Varying Abilities			
Anxiety/Emotional State			
Skin condition/Fragility			
Falls			
Pain			
Sensory Issues			
Attachments/Splints			
Other – surgery, cultural issues.			

## Assessment of Pupil ability and Levels of independence.

<b>Manoeuvre/Task</b>	<b>Unable</b>	<b>Equipment or aids used</b>	<b>Independent</b>	<b>Supervision &amp; Verbal prompts only</b>	<b>1 helper required</b>	<b>2 helpers required</b>	<b>Level of risk to Staff - details (Low, medium, high)</b>
<b>Mobilising/Walking</b>							
<b>Sit/Stand</b>							
<b>Standing</b>							
<b>Steps/stairs</b>							
<b>Transfer: chair-chair</b>							
<b>Transfer: on/off toilet</b>							
<b>Transfer: on/off floor</b>							
<b>Transfer: on/off Changing bed</b>							
<b>Other Transfers: car, Trike.</b>							
<b>Other environments: Swimming/hydro pool,</b>							
<b>Personal care and Toileting.</b>							
<b>Other</b>							

## Assessment of Tasks:

List activity/task – mobility, transfers, change of position, personal care and manual handling.

List all equipment used: ( Does it require service/maintenance/LOLER testing?)

List any environmental issues:

Individual Staff Capability:

## *Assessment of the Risks - System of safe working*

No.	List the HAZARDS/RISKS from the activities/tasks above	Control Measures in place or required – safe system of work.
<b>Date of next review:</b>		
<b>Signature of assessor:</b>		<b>Designation:</b>