

Warwickshire County Council

Risk Assessment for: use of mobility aid (crutches) around school

Team/Section/	Date of	18/5/2012	Review date:	
Department:	assessment:			

Activity/ Process/ Operation	What are the hazards to health and safety	What risks do they pose and to whom?	What existing control measures are in place to reduce the risk?	Risk level achieved H/M/L*	Further action required Y/N?*
Movement around the school	 Uneven Surfaces Raised thresholds Furniture Crowds/busy area Wet flooring 	User of mobility aid, staff, children, visitors Mobility aid trapped/caught/ loss of use of aid/trip & fall of user	Procedures are to be put in place to allow circulation before or after busy times. Movelemtn only to occur when accompanied by an adult All building users are to be made aware that there is an individual using a mobility aid Uneven surfaces/raised thresholds are to be identified and highlighted were possible Defects to flooring etc are to be reported and dealt with appropriately Spilages to be cleared as soon as identified. 'Warning' signage to be used where necessary Physiotherapist has assessed use and ability	H/M/L**	Y/N ?"
			Access/Egress and corridors to be kept		

	clutter free
	Furniture to be arranged in such way that it does not become an obstacle/hazard for the mobility aid user
	Defects to flooring etc are to be reported and dealt with appropriately
Weather conditions	Crutches not to be used outside
Crowds/busy area	
Food debris on floor	Food debris to be cleared away. Hazard sinage boards to be used if needed
Trip hazard	Crutches to be stored securely in a safe place where they will not become a risk to others
	Crutches should be easily accessible should they be required by the user in an emergency
	Crowds/busy areaFood debris on floor

Fitness to be at school whilst using	Trip hazard Adverse effect to general health	Adult must be present at all times when steps are being accessed Visual assessment must take place prior to using steps and any water/debris/obstruction must be removed prior to use Clearance from medical practitioner
Access/ Egress	 Further injury Trip hazard Door closing on individual Delay evacuating in the event of an emergency 	Raised thresholds to be identified and highlighted were possible. Assistance provided (e.g Buddy system) when travelling through manual doors Ensure good housekeeping is maintend to ensure access/egress is clear of obstruction PEEP (Personal Emergancy Evacuation Procedure)
Lessons	 Inaccessible lessons Teaching/Lear ning methods 	Lessons to be adapted as and where required, with alternative methods of teaching/learning put in place if necessary Pupil to be seated close to the classroom



	inaccessible	do	oor as advised by Physiotherapist		
Off site activities	Separate Risk Assessment required				

Name of Assessor:	Signature
Name of Manager	Signature
responsible for Activity/ Process/ Operation:	

Reference should be made to the Risk Assessment Guide 4.1 Step-by-Step for guidance on when and how the action plan should be used.

^{*} If the risk level achieved is still **High**, the planned activity/ process/operation must not continue. The risk assessment action plan must be completed to identify what further action will be taken to reduce the risk to an acceptable lower level.

^{*} If the risk level achieved is **Medium** you must consider whether the existing control measures are sufficient or if any further action could be taken to reduce the risk to a low level. (The risk level may remain as Medium where the risk is inherent in a particular activity/process/operation).



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Risk Assessment Action Plan for:	

Activity/ Process/ Operation	Risk	Planned action to be taken to reduce the risk to a reasonable level	Anticipated risk reduction level M/L post action	Responsible person for taking action	Planned completion date	Completion date (Line manager signature to verify and date)



Risk Assessment for:		

Name of Persons involved in the Activity/ Process/ Operation	Signature	Date