



**HEALTH AND SOCIAL CARE MORAY
CARE AT HOME**

CASE SPECIFIC RISK ASSESSMENT

Name of Assessor **Date of visit...**

Service User Name

Address

This risk assessment should be completed with details of any potential risks that have been identified during the visit. Relevant actions should be recorded to reduce/eliminate the risk/s. Only risks specific to the individual Service User should be recorded. An update to this assessment should be completed within 4 weeks of the service commencing in order to update further risk/s identified by Social Care Assistants during the initial period. This should also be updated on a 6monthly basis, in conjunction with the statutory bi-annual reviews.

Where risks relating to safer people or behaviour have been identified, these should be noted below as having a specific risk assessment in place in relation to the actions to be followed for these risks.

Risk	Details of Risk	Actions Required
<p>PROPERTY AND LOCATION</p> <p>E.g.</p> <p>Appropriate lighting for SCA's to access the property safely.</p> <p>Pathway/Driveway –pot holes on access roads (farm tracks, etc.) uneven/moss covered garden paths</p> <p>Consider the risk and identify if an anticipatory care plan from social work is required in the event of bad weather</p>		

Risk	Details of Risk	Actions Required
<p>HOME ENVIRONMENT This may include</p> <p>Rugs, loose/frayed carpet, wet flooring steep stair, etc. Use of electrical equipment. The condition of electrical flexes. Furniture and obstructions. Smoking. Pets/Animals.</p>		
<p>PERSONAL RISKS</p> <p>Risks relating to alcohol or drug issues and safer people moving and handling will be noted here and reference given to referring to the appropriate risk assessment.</p> <p>Use of mobility aids should be identified if applicable</p>		
<p>OTHER RISKS</p>		
<p>ASSESSORS SIGNATURE:</p>		

All Care at Home staff providing care to the Service User should have knowledge of the risks identified and the relevant actions they are required to undertake in relation to these risks. Once read and understood, the Social Care Assistant should sign and date below, to confirm their understanding of the relevant risks and actions.

Social Care Assistants signature:

Date:

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