|  |  |  |  |
| --- | --- | --- | --- |
| **Service user name:** |  | **NHI/ACC Number:** |  |
| **Service user address:** |  | **Service user phone number:** |  |
| **Environmental Risks** *(please be specific)* |
| **Dogs:** |  | **Path/steps:** |  |
| **Stairs:** |  | **Parking:** |  |
| **Visibility:** |  | **Other:** |  |
| **Plan:** |  |
| **Behavioral/psychosocial Hazards** *(please be specific)* |
| **Gangs** |  | **Illegal activities** |  |
| **Aggression/hostility** |  | **Drugs/alcohol** |  |
| **Violence** |  | **Unpredictable behavior** |  |
| **Plan:** |  |
| **Biological Hazards** *(please be specific)* |
| **Infectious diseases** |  | **Hygiene** |  |
| **Exposure to sharps** |  | **Exposure to blood or body fluids** |  |
| **Plan:** |  |
| **Manual Handling Hazards***(please be specific)* |
| **Issue:** |  |
| **Plan:** |  |
| **Chemical Hazards** *(please be specific)* |
| **Issue:** |  |
| **Plan:** |  |
| **Other Safety Risks**  *(please be specific)* |
| **Plan:** |  |
| **Service user comments:** |  |
| **Staff****Name:** |  | **Staff Phone Number:** |  |
| **Date:** |  | **Signature:** |  |