



**Medical Risk Management Assessment Template (version 1 March 2023)**

Risk Assessed					
Date Assessed:			Child's Name:		
Allergies:					
Age of child:	0-1 <input type="checkbox"/>	1-2 <input type="checkbox"/>	2-3 <input type="checkbox"/>	3-5 <input type="checkbox"/>	5-13 <input type="checkbox"/>
Reason for plan- Has a Medical management Plan been completed? <b>Y or N (circle)</b>					
Level of supervision required:	Strict supervision <input type="checkbox"/> (standing in immediate area)	Close supervision <input type="checkbox"/>		Visual <input type="checkbox"/> (ensure they can be seen at all times)	

Risk assessment					
Activity	Hazard identified	Risk assessment (use matrix)	Elimination/control measures	Who	When




Plan prepared by			
Consulted with and Approved by:			
Communicated to:			
Safety information reviewed and attached eg. standards, equipment information and warnings.	Yes / No	Comment if needed:	



Reminder: Monitor the effectiveness of controls and change if necessary. Review the risk assessment if an incident or significant change occurs.

## Risk Matrix

		Consequence				
		Insignificant	Minor	Moderate	Major	Catastrophic
Likelihood	Almost certain	Moderate	High	High	Extreme	Extreme
	Likely	Moderate	Moderate	High	Extreme	Extreme
	Possible	Low	Moderate	High	High	Extreme
	Unlikely	Low	Low	Moderate	High	High
	Rare	Low	Low	Low	Moderate	High

