

Home Risk Assessment Form

Client:	Client Address:	Date of Birth:	Portfolio Number:	DATE:

OUTSIDE	Safe	Not Safe	Admin Advised
Access			
Pets			
Security and parking			
Front door accessible			
Steps			
Pathways			
Lighting at night			
INSIDE			
Lighting			
Floor surfaces			
Alternative exit			
Access around furniture			
Pets			
ELECTRICAL / GAS			
Heaters			
Power points			
Electrical cords / extension cords			
KITCHEN			
Fridge – expired food items			
Utensil storage			
Workplace organization			
Stove			
Oven			
BATHROOMS / TOILETS			
Access to bath and/or shower			
Floor surfaces			
Drainage			
Rails, bath			
Ventilation			
BEDROOMS			
Access around furniture			
Bed height			
LOUNGE / DINING			
Access around furniture			
Heaters / Air conditioners			

LAUNDRY	Safe	Not Safe	Admin Advised
Floor surfaces			
Access around equipment			
Water temperature			
Drainage			
PERSONAL CARE			
Gloves required			
Hand washing facility			
Risk of infection			
Contaminated articles / surfaces			
FORESEEABLE HARM			
Resistance to care			
History of aggression			
Challenging behaviours			
MANUAL HANDLING			
Manual Handling equipment			
Excessive reaching lifting			
Heavy items			
CLEANING EQUIPMENT			
Vacuum			
Dryer			
Broom			
Washing Machine			
Ladder			
Mop / bucket			
SUBSTANCES			
Medicines Labelled			
Substances Labelled			
Original containers			
Gloves			
Stored safely			
Protective clothing required			
Emergency response			
Safe disposal of chemicals / waste			

COMPLETED BY:
