

RETURNING TO THE DAY FACILITY

Individual Member Risk Assessment - EXAMPLE

Members Name:	Date of Assessment:	Risk Assessor:
Title: Changes in the delivery of support to member within the day facility since Covid-19.	People Involved in Making This Assessment: in consultation with Member and/or carer	
Task or Process: To mitigate risks to Members	People at Risk: Members	
Date of next review: When changes in legislation occur or guidance from Public Health England		

Hazard (hazard and hazard description): Changes are required to the way we deliver support to members since Covid-19. This risk assessment will include any changes to health, wellbeing, and personal care.		
Control Measures (existing): Devising this new form to undertake any relevant changes to each members' needs and underlying health issues after Covid-19.		
Further Control Measures Required:	Assigned To:	Due Date:
Staff will work in an allocated zone and support 4-5 members each day	Staff	
Staff will sanitize and clean all areas up to 4 times a day	Staff	
Staff to look after their allocated members in their respective bubbles and always maintain safe distancing and follow health & safety procedures.	Staff	

	Needs / Changes	Questions Discussed with Member
1	PPE	
2	Maintaining a Social Distance	
3	Assistance with personal care	
4	Any changes to health/mobility/transfers	

5	Support with meals /drinks	
6	Aids and adaptations used each day	
7	Reason for a higher temperature reading	
8	Were you shielded in lockdown and reason why?	
9	Have you had Covid-19 or has anyone where you live had, Covid-19?	
10	Have you ever been tested for Covid -19 or been offered the antibody test?	
11	Emotional Wellbeing	
12	Days Funded	
13	Days offered in Day Facility	

Specific Hazards Identified for specific Members

Hazard (description):		
Control Measures (existing):		
Further Control Measures Required:	Assigned To:	Due Date:

Hazard (description):		
Control Measures (existing):		
Further Control Measures Required:	Assigned To:	Due Date: