| **Considerations** | **Yes or No** | **If yes, what additional actions may be required** | **Person responsible** | **Date action completed** |
| --- | --- | --- | --- | --- |
| Are there students with disabilities including a physical disability, vision impairment, a hearing impairment, an intellectual disability or a mental health condition? |  |  |  |  |
| Are there students whose first language is not English and who may require extra focus with respect to safety and health? |  |  |  |  |
| Are there students with a known medical condition/ allergen requiring the administration of medication and/or care plan? |  |  |  |  |
| Are there students with challenging behaviour that could increase the potential for injury to occur? |  |  |  |  |

If there is one or more **High Risk (H)** actions needed, then the risk of injury could be high and immediate action should be taken.

**Medium Risk (M)** actions should be dealt with as soon as possible. **Low Risk (L)** actions should be dealt with as soon as practicable.

Risk Assessment carried out by: Date: / /

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