



RAISE-AP Student Risk Assessment

Student Name:	
Date of Birth:	
Primary Contact Name:	
Social Worker Name (If Appropriate):	

Please see MIS for full details

Assessment Conducted By:	
Date of Assessment:	
Date of Next Review:	

Risk Rating		Likelihood of Occurrence		
		Probable	Possible	Remote
Likely Impact	Major Causes major physical injury, harm or ill-health to self or others	High	High	Medium
	Severe Causes physical injury or illness requiring first aid to self or others	High	Medium	Low
	Minor Causes physical or emotional discomfort to self or others	Medium	Low	Low



Please complete as many of the risk assessment categories as possible, giving **details of specific supervision levels required** alongside any **specific risk categories for the pupil**. Please include as much detail as possible, including previous history / examples of the risk and actions required to mitigate the risk. Please also tick (✓) the level of risk for each section (high, medium or low).

When adding details to the **action required**, please add as much information as possible for an assessment of the risk, such as:

- The time of day, if applicable, the risk is likely to occur.
- If the risk were to occur, who is likely to be injured / hurt.
- Any known triggers.
- Situations the risk might occur in.

Then include **how this risk can be reduced**, such as:

- Proactive interventions to reduce or prevent the risk.
- Early interventions to de-escalate / manage the risk.
- Additional interventions to respond to situations that have escalated further (priority to ensure safety of all concerned).

This document should be reviewed annually or when noticeable changes have been identified, with an evaluation of the effectiveness of the risk reduction measures and updates where required.

Supervision Levels

Risk Level	✓	Action Required
High		
Medium		
Low		



Specific Risk

Absconding

Risk Level	✓	Previous History	Action Required
High			
Medium			
Low			

Transportation

Risk Level	✓	Previous History	Action Required
High			
Medium			
Low			



Self-Harm

Risk Level	✓	Previous History	Action Required
High			
Medium			
Low			

Online Safety

Risk Level	✓	Previous History	Action Required
High			
Medium			
Low			



Medical

Risk Level	✓	Previous History	Action Required
High			
Medium			
Low			

Social Time

Risk Level	✓	Previous History	Action Required
High			
Medium			
Low			



Violence towards Peers / Bullying

Risk Level	✓	Previous History	Action Required
High			
Medium			
Low			

Sexual Risk towards Young People

Risk Level	✓	Previous History	Action Required
High			
Medium			
Low			



Sexual Risk to Staff or Other Adults

Risk Level	✓	Previous History	Action Required
High			
Medium			
Low			

Sexual Risk from Other People

Risk Level	✓	Previous History	Action Required
High			
Medium			
Low			



Alcohol Abuse

Risk Level	✓	Previous History	Action Required
High			
Medium			
Low			

Drug Abuse

Risk Level	✓	Previous History	Action Required
High			
Medium			
Low			



Solvent Abuse

Risk Level	✓	Previous History	Action Required
High			
Medium			
Low			

Eating Disorders

Risk Level	✓	Previous History	Action Required
High			
Medium			
Low			



Arson

Risk Level	✓	Previous History	Action Required
High			
Medium			
Low			

Child Criminal Exploitation / Child Sexual Exploitation / Radicalisation

Risk Level	✓	Previous History	Action Required
High			
Medium			
Low			



Review of the Risk Assessment

Please evaluate the effectiveness of the risk reduction measures outlined above:

- Have the risks / behaviours reduced in frequency / intensity duration?
- What has worked / what has not worked, and why?
- Are there any staff specific training / skills required to assist with risks identified in this document?

Proactive interventions used to reduce / prevent the risk:	
Early interventions used to de-escalate / manage the risk:	
Additional interventions used to respond to situations that have escalated further:	

Please keep this document relevant and up to date for the student.