





PERSONAL SUPPORT CARE PLAN

MEDICAL ALERTS: (i.e epilepsy)								
Nama	•	D.O.	D.		Nisaya sisa	Allowing		
Name:		D.O.	ь:		Diagnosis:	Allergies:		
About me and situation include behaviours of	ding	v:						
Triggers:								
My Health and and things to b								
NDIS and personal goals:								
			_					
Activity	Full Assist	Partial Assist	Prompt	N/A	Comment:			
Showering								
Dressing								
Mobility								
Continence								
Grooming								
Skin Integrity								
Oral Care								

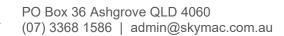






Risk Management								
Risk	Risk Rating	Mitigation Action, Task	Responsibility					

			Potential Consequences					
			L6	L5	L4	L3	L2	
			Minor injuries or discomfort. No medical treatment or measurable physical effects.	Injuries or illness requiring medical treatment. Temporary impairment.	Injuries or illness requiring hospital admission.	Injury or illness resulting in permanent impairment.	Fatality.	
			Not Significant	Minor	Moderate	Major	Severe	
	Expected to occur regularly under normal circumstances	Almost Certain	Medium	High	Very High	Very High	Very High	
рс	Expected to occur at some time	Likely	Medium	High	High	Very High	Very High	
Likelihood	May occur at some time	Possible	Low	Medium	High	High	Very High	
	Not likely to occur in normal circumstances	Unlikely	Low	Low	Medium	Medium	High	
	Could happen, but probably never will	Rare	Low	Low	Low	Low	Medium	



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