

Risk Reduction Plan (Doc 2)

Name:		DOB:		Date:		Review Date:	
Photo		Risk reduction measures and differentiated measures (to respond to triggers)					

Pro social / positive behaviour	Strategies to respond
Anxiety / DIFFICULT behaviours	Strategies to respond
Crisis / DANGEROUS behaviours	Strategies to respond
Post incident recovery and debrief measures	

Signature of Plan Co-ordinator..... Date

Signature of Parent / Carer..... Date

Signature of Young Person.....Date.....