**Sample Risk Assessment Record**

***“A risk assessment is nothing more than a careful examination of what, in your work, could cause harm to people, so that you can weigh up whether you have taken enough precautions or should do more to prevent harm. The aim is to make sure that no one gets hurt or becomes ill…”***

*- Health and Safety Executive: INDG163 (rev1) 5/99 C2620*

Any checklist cannot be exhaustive nor are you expected to be a qualified tradesman. The checklist requires you to look around and to make a common-sense judgement. The following form offers prompts to get you thinking of potential risks and some may not be relevant to the venue and activity.

* Assess the venue using the questions provided and then complete the action plan below.
* Remember: risk assessment is an on-going process – any significant changes need a re-assessment.

|  |  |
| --- | --- |
| **1. Activity / Event:**  | **2. Location:** |
|  |  |
| **3. Date of Assessment:** | **4. Name of Assessor:** |
|  |  |

|  |  |
| --- | --- |
| **1. LOCATION & ACCESS:** | **Action needed:** |
| **Consider**: access, shared venues, security, phone reception / access to a landline, location near busy roads, etc. |  |
| **2. LIVING ENVIRONMENT:** | **Action needed:** |
| Consider: any obstacles or hazards, trailing wires, any jagged or broken edges, slipper floors when wet, stackable furniture, cleanliness, issues of damp or poor ventilation, risk of glass doors and windows breaking, etc.  |  |
| **3. KITCHEN** | **Action needed:** |
| Consider: cleanliness, handwashing facilities, adequate food and drink preparation and cleaning, kitchen rules, how waste is dealt with, storage of cleaning materials, dangers to children including their access to the kitchen, management of food allergies, etc. |  |
| **4. TOILETS / BATHROOMS** | **Action needed:** |
| Consider: cleanliness, disposal of sanitary towels, safe storage of cleaning materials, etc. |  |
| **5. OUTSIDE ENVIRONMENT** | **Action needed:** |
| Consider: state of steps and ramps, general safety, safety for drivers, lighting, maintenance issues, threat from pets and animals, play equipment, garden tools, access to ponds and pools, etc. |  |
| **6. FIRST AID** | **Action needed:** |
| Consider: who is responsible for First Aid, are basic first aid supplies available, are there any medical needs highlighted in the consent forms, how is medication stored (e.g. Asthma inhalers), etc. |  |
| **7. ELECTRICAL** | **Action needed:** |
| Consider: do electrical appliances appear to be in good working order, does visible electrical wiring appear safe and secure, light switches and electrical sockets are accessible and appear in good condition, no overloaded sockets, etc. |  |
| **8. FIRE SAFETY** | **Action needed:** |
| Consider: are fire procedures known to all, where is the fire / emergency evacuation point, fire exits open and are unobstructed, exits have signage, is there emergency lighting, location of nearest A&E, where are smokers permitted to smoke, are any open fires / campfires safely located, etc. |  |
| **9. ANY OTHER RISKS** | **Action needed:** |
|  |

**ACTION PLAN:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date:** | **Risks & Actions Required** | **By Whom:** | **By When:** | **Date Achieved:** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |