No 5B Venue Risk Ass.

VENUE-BASED RISK ASSESSMENT CHECKLIST

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| u3a Name: | Date: |
| Name of person completing risk assessment checklist: | |
| Interest Group: | |
| Description of Activity: | |

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| --- | --- | --- | --- | --- | --- |
|  | Risk Assessment Checklist | Yes | No | N/A | If no, what actions will you take to mitigate this risk? |
| General | Is the area where the u3a activity is taking place in well lit and away from any hazards? |  |  |  |  |
|  | Are floor surfaces in good condition to prevent slips, trips, and falls? |  |  |  |  |
|  | Are all walkways kept clear and free from obstruction? |  |  |  |  |
|  | Are there enough seats for all members in attendance? |  |  |  |  |
|  | Has a register of members in attendance been taken for fire safety reasons? |  |  |  |  |
| Electrical | Have you made sure there are no trailing leads or cables? |  |  |  |  |
|  | Is the use of socket adapters (e.g., extension leads) per socket kept to an absolute minimum to prevent overloading? |  |  |  |  |
|  | Have all cables been inspected to ensure they are intact and safe for use? |  |  |  |  |
|  | If the venue requires PAT testing, has equipment been PAT tested? |  |  |  |  |
|  | | | | | |
| Fire Safety | Are all fire exit and escape routes, fire alarm points and fire-fighting equipment clearly visible, unobstructed and appropriately indicated? |  |  |  |  |
|  | Have members been informed of safety procedures, including where to congregate in the event of a fire alarm? |  |  |  |  |
|  | Is there a working smoke alarm? |  |  |  |  |
|  | Is there a working carbon monoxide alarm? |  |  |  |  |
|  | Are all smoke and fire stop doors kept closed when not in use, and never wedged open (except doors on magnetic catches linked to the fire alarm system)? |  |  |  |  |
|  | Are appropriate procedures in place to assist disabled members who may be present during a fire evacuation? |  |  |  |  |
|  | | | | | |
| Equipment | Do you have a lockable and secure area to store u3a equipment, if applicable? |  |  |  |  |
|  | | | | | |
| Wellbeing | Are refreshments available to members? (e.g., water, tea) |  |  |  |  |
|  | Is there a first aid box that is checked regularly and has been stocked? |  |  |  |  |

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| Other identified risks: | What will you do to mitigate these risks? |
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