

Venue Checklist (Day of Use)

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|-------------------------|-------------------|
| U3A Name | |
| Interest Group | |
| Date | Location/Postcode |
| Description of Activity | |

| Check | Yes (✓) |
|--|---------|
| 1 Emergency Exits unobstructed | |
| 2 Emergency Exits unlocked | |
| 3 Fire Extinguishers in place | |
| 4 Toilet facilities open, clean, paper available etc | |
| 5 Walkways free from trip hazards | |
| 6 Kitchen facilities accessible & clean | |
| 7 Kettle leads in good condition, free from wear and fraying, plug securely attached | |
| 8 Refreshment items available | |
| 9 First Aid equipment accessible | |
| 10 Safety Briefing given <ul style="list-style-type: none"> a. Emergency exits b. Assembly point c. What to do if fire discovered d. What to do if the alarm sounds e. Accident / injury reporting f. Toilet and washing facility location | |
| 11 Other (specify) | |
| 12 Other (specify) | |

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| Notes |
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Exceptional Circumstances

There may be reasons why additional conditions may have to be taken into consideration when completing this risk assessment.

When completing a risk assessment in exceptional circumstances you need to consider how this will impact on the activity, what additional measures or changes you will need to make for each identified hazard in order to reduce risks involved in running the activity. These changes will need to be incorporated into the assessment of how hazards can be reduced or avoided to respond appropriately to the exceptional circumstances you are facing.

Notes for exceptional circumstances:

Signed

Dated