

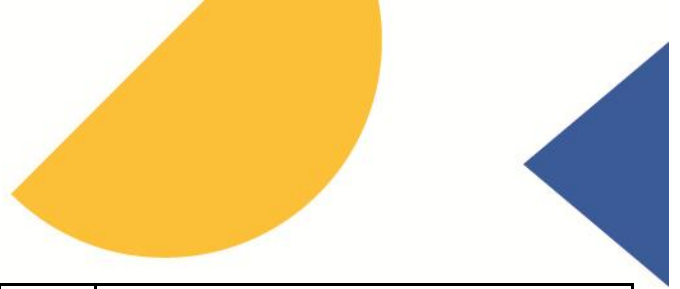


## HOME-BASED RISK ASSESSMENT CHECKLIST

<b>u3a Name: SWAFFHAM AND DISTRICT</b>	<b>Date:</b>
<b>Name of the group:</b>	
<b>Description of the group activity:</b>	
<b>Address of where the activity takes place:</b>	
<b>Name of the group leader:</b>	

	Risk Assessment Checklist	Yes	No	If no, what actions will you take to mitigate this risk?
Equipment	Is any special equipment needed? If so please state			
	If electrical, is the equipment safe to use?			
	Is there a risk from cables or trailing wires?			
Venue	Is everyone able to be accommodated safely and comfortably?			
	Is the venue accessible to someone with a mobility problem?			
	Are all walkways in the home free from obstructions?			
	Are there any possible trip hazards?			
	Are all exits unobstructed?			
	Is there a working smoke alarm?			






	Risk Assessment Checklist	Yes	No	If no, what actions will you take to mitigate this risk?
People	Is a register of attendees taken at each meeting for safety reasons?			
	Is there are a list of emergency contacts			
	Are light refreshments available to members? (e.g., water)			
	Have members been made aware of any pets?			

Specific risks: Group leader to identify any additional risks specific to their group/activity/venue	What will you do to mitigate these risks?

Please log any incidents and accidents and if necessary report them to the group co-ordinator.

 <b>Home based Risk Assessment Checklist</b>	
Date received by group co-ordinator	
Date of next review	

