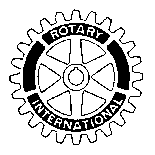
**Venue Risk Assessment Checklist**

|  |  |
| --- | --- |
| **Rotary Club** | |
| **Date of Event** | **Location and Postcode** |
| **Description of activity** | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Hazard** | | **Yes** | **No** | **N/A** | **Comments** |
| 1 | **Is the access suitable for the people attending the activity especially anybody with limited mobility?** |  |  |  |  |
| 2 | **Is wheelchair access adequate?** |  |  |  |  |
| 3 | **Is the area free from obstructions and trip hazards?** |  |  |  |  |
| 4 | **Are there adequate means of escape in an emergency?** |  |  |  |  |
| 5 | **Are there appropriate direction signs in an emergency?** |  |  |  |  |
| 6 | **Is there a Fire Alarm?** |  |  |  |  |
| 7 | **Is there emergency lighting?** |  |  |  |  |
| 8 | **Is there a designated fire/emergency assembly point?**  **Where is it?** |  |  |  |  |
| 9 | **Is there an emergency procedure for the building?** |  |  |  |  |
| **Do you have a copy?** |  |  |  |  |
| 10 | **Is seating always laid out?** |  |  |  |  |
| **Is it a Rotary responsibility before and after the event to lay out seating?** |  |  |  |  |
| 11 | **Is there a kitchen?** |  |  |  |  |
| **Allergen Controls applied?** |  |  |  |  |
| **Is the kitchen adequate and hygienic? HACCP applied?** |  |  |  |  |
| **Are food safe cleaning materials available?** |  |  |  |  |
| **Has the electrical equipment been visually safety checked?** |  |  |  |  |
| 12 | **Are the toilet facilities adequate and accessible?** |  |  |  |  |
| **Is there hand washing and drying facilities?** |  |  |  |  |
| 13 | **Is equipment being brought to the venue?** |  |  |  |  |
| **Has it been checked?** |  |  |  |  |
| 14 | **Is there a First Aid box and if so where is it located?** |  |  |  |  |
| 15 | **Hearing Impaired? - Does the venue have a sound system with an induction loop? Is it switched on?** |  |  |  |  |
| 16 | **Does the venue have a current Fire Certificate?** |  |  |  |  |
| 17 | **Does the venue have adequate Third-Party Insurance cover?** |  |  |  |  |
|  | **Others (define)** |  |  |  |  |
| **Additional information**  **Copy of Emergency Procedure?**  **Fire Alarm Weekly / Annual Maintenance Tests & evidence?**  **Fire Assembly Point location?**  **Public Liability Insurance for Hotel / Business or Venue owned by another organisation? Obtain a copy**  **Legionella Prevention / Records?**  **Pat Test Cert for Electrical equipment?**  **Does venue have a defibrillator or one nearby? Location?**  **Is Crowd control required?**  **Are you near to moving vehicles?**  **Need to support Egress of Limited Mobility persons from upper stories of building?**  **Do you need a PEEP plan? (Personal Emergency Egress Procedure).** | | | | | |

**This document is an aide memoire, so when you inspect a Venue, prior to an event, your enquiries obtain the information you need, to create an effective Risk Assessment.**

**AJB D 1220**