

HOME BASED ACTIVITY CHECKLIST	
Date of completion:	
Address:	
Person completing:	
Interest Group:	
Description of Activity:	

This checklist is to help in the planning for an activity in a member's home. This isn't an exhaustive list, so think carefully about any specific risks you may encounter. It is likely that you will need to add to this risk assessment checklist. This form can (and should) be altered to suit specific activity requirements.

Where you identify a particular risk you should note the actions you will take to reduce the risk. It's important to carry out a risk assessment before the activity takes place, and you can always add to this during the activity.

HAZARD CHECKLIST	YES	NO	N/A	If no, what actions will you take to mitigate this hazard?
GENERAL:				
Is there enough space for all members in attendance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Are there any trip hazards or anything that might make members slip or fall?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Are all walkways that members have access to kept free from obstruction?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Are there enough seats for all members in attendance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

HAZARD CHECKLIST	YES	NO	N/A	If no, what actions will you take to mitigate this hazard?
Can everyone access the room? (n.b. there is no requirement to make home adaptations)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have you taken a register of members in attendance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ELECTRICAL:				
Have you made sure there are no trailing leads or cables to prevent a member tripping?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have all cables in use for this activity been visually inspected to ensure they are intact and safe for use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
FIRE SAFETY:				
Are all exits unobstructed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Is there a working smoke alarm?*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
WELLBEING:				
Are light refreshments available to members? (e.g., water)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have members been made aware of any pets?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

*If you do not have a working smoke alarm, you can contact your local fire service for a 'Safe and Well Visit', during which they can fit a free smoke alarm in your home.

Other identified hazards:	What will you do to mitigate these hazards:

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