

VENUE ASSESSMENT FORM (B1)

Risk Assessment forms must be retained in course evidence file and sent with sessional forms on completion of each course.

Course & Venue Information	
Name of Organisation:	
Venue:	
Date of visit (must be prior to course commencement):	
In attendance:	
Course Title:	
Details of proposed activities to be undertaken during the course:	
Proposed Course Dates:	
Tutor/s:	
Will there be a volunteer working with the class? If so who?	

1. Who is at risk, where the activity takes place?	Tick
KC employee	
Persons with a disability	
New and expectant mothers	
Visitor / Member of the Public	
Tutors	
Learners	


NOTE: Reference is made to social distancing throughout this form, whilst there is an acknowledgment that this not mandatory, please keep bare this in mind as some learners may be hesitant as well as tutors around returning to classroom/venue teaching.

2. Health and Safety & the General Learning Environment	Y	N	N/A
** Is there sufficient space for social distancing of learners in the building/teaching space if individuals wish to continue previous practice.			
A. Are there procedure's for signing in & checking ID's for learners & visitors			
B. Is the building open access i.e. can anyone walk in unchallenged?			
C. Does the general location of the premises feel safe?			
D. Is there a telephone accessible to the tutor?			
E. How close are the premises to a bus stop? (walk time)			
F. Is the external area well-lit?			
G. Are fire/smoke alarms fitted?			
H. Are exit routes clearly marked – inside and outside?			
I. Are escape routes adequate & suitably maintained (clear of obstruction)?			
J. Is the inside of the building free from obstructions?			
K. Is the lighting inside the building adequate?			
L. Have you seen/requested sight of the properties Fire Risk Assessment?			
M. Are there satisfactory fire safety precautions in place? (e.g. fire extinguishers easily available and maintained within the last year, fire blankets)			
N. Are alarms tested on a regular basis? What day /time?			
O. Do clear evacuation procedures exist?			
P. Are emergency evacuation procedures tested as appropriate?			
Q. Is there a well-stocked first aid kit?			
R. Is there a relevant person adequately trained in first aid?			
S. Are toilets and washing facilities adequate?			
T. Is anti-bacterial handwash / soap available throughout the building?			
U. Is drinking water available?			
V. Are hazardous substances an issue?			
W. Is manual handling an issue?			
X. Is there evidence that the electrical equipment is safe and has been checked?			
Y. Is the heating / ventilation adequate?			
Z. Is noise an issue?			
AA. Is furniture fit for purpose for learners?			
BB. Adequate disabled access?			
CC. All relevant posters displayed?			
ADDITIONAL NOTES:			

3. Detailed Learning Environment & Activity Assessment		Y	N	N/A
How many teaching rooms are there? Name / number : Room 1 _____ Name / number : Room 2 _____				
Room 1				
A. Is there level access/ramp into the teaching room?		Level or Steps		
B. If steps, how many are there?		No:		
C. Do the steps have handrails?				
D. Is there colour contrast on the steps?				
E. Is there adequate space for wheelchair movement throughout?				
F. Is the floor level and free from fixed obstructions?				
G. Is noise an issue?				
H. Is the teaching room comfortable?				
I. Approximately how many people can the room accommodate?		No:		
I* Is there adequate space to social distance for anticipated learners?				
J. Are there enough tables?				
K. Are the tables at the right height for the chairs?				
L. Are the chairs appropriate for the learners?				
M. Are there any tea/coffee making facilities?				
N. Is there a rest area?				
Room 2				
A. Is there level access/ramp into the teaching room?		Level or Steps		
B. If steps, how many are there?		No:		
C. Do the steps have handrails?				
D. Is there colour contrast on the steps?				
E. Is there adequate space for wheelchair movement throughout?				
F. Is the floor level and free from fixed obstructions?				
G. Is noise an issue?				
H. Is the teaching room comfortable?				
I. Approximately how many people can the room accommodate?		No:		
I* Is there adequate space to social distance for anticipated learners?				
J. Are there enough tables?				
K. Are the tables at the right height for the chairs?				
L. Are the chairs appropriate for the learners?				
M. Are there any tea/coffee making facilities?				
N. Is there a rest area?				
ADDITIONAL NOTES including appropriateness of room for courses being/proposed to be taught with particular reference to activities which will be carried out. 				

4. Equipment checks	Y	N	N/A
A. Digital projector?			
B. Interactive whiteboard?			
C. Laptop provided for use with projector/whiteboard?			
D. Blackout curtains / blinds?			
E. Secure equipment store?			
F. How many computers/laptops, etc?	No:		
G. Is Internet available?			
H. Is Wi-Fi available and password protected?			
I. Do all PC's, laptops, tablets and any other portable devices have the appropriate filters and/or firewalls in place to restrict web content?			
ADDITIONAL NOTES			

5. Disability Access	Y	N	N/A
A. Are there designated parking spaces for people with disabilities?			
B. Is there a level or ramped access into the building?	Level / Steps		
C. If not level to entrance, how many steps are there?	No:		
D. Do the steps have handrails?			
E. Is there colour contrast on the steps?			
F. Is there a designated and fully equipped non ambient toilet?			
G. Is there adequate space for wheelchair movement throughout?			
H. Are hearing induction loops available for use?			
ADDITIONAL NOTES:			

Follow-up Action 				
Action Point No	Action agreed	By whom	Date to be completed by:	Sign & date when completed

Assessment Date:

Review Date (if applicable):

Signed by Assessor/s

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General Risk and Activity Assessment:

Ref No	Hazard/Risk	Who is at risk?	Control Measures	Likelihood	Severity	Risk Rating	Any further action

Likelihood:

- 1 - Highly unlikely
- 2 - Unlikely
- 3 - Likely

Severity/consequences:

- 1 - Slightly harmful
- 2 - Harmful
- 3 - Extremely harmful

Risk rating (SC x L):

- 1 Trivial risk 6 Substantial Risk
- 2 Tolerable risk 9 Intolerable Risk
- 3-4 Moderate risk

HAZARDS

Access (confined spaces, etc)
Adverse weather
Animals
Ergonomics
Falling objects/materials
Fire
Ground condition
Hazardous: material/substance/vapour
Hot works
Inadequate supervision/instruction/training
Lighting
Lone Working
Live Services (gas/electric/water)
Machinery/equipment
Manual Handling
Noise
Physical/mental condition
Pressure systems
Radiation
Sharps (broken glass, needles etc.)
Traffic/vehicles/plant
Vibration
Visitors/people
Working at heights
Workplace conditions
Misuse of equipment

RISKS

Amputation
Bites
Asphyxia
Burns/scalds
Crushing
Cut, scratch, abrasion
Ejection
Electrocution
Entanglement
Explosion
Extremes of temperature
Eye injury
Exposure/contact-harmful substances
Fall from height
Fatality
Fire
Fractures
Hearing loss
Hit by moving, flying or falling object
Hit something fixed or stationary
Infection
Inhalation
Ingestion
Musculo skeletal injury
Personal safety
Personal discomfort
Physical assault/Verbal Abuse
Puncture
Slip, trip or fall on the same level
Traffic accident
Trapped
Vibration Disorder
Work Related Upper Limb Disorders –
(WRULD)
Safeguarding
Radicalisation