## Risk Assessment

|  |  |
| --- | --- |
| Name of Event:  Location: |  |
| Date(s) of activities/ frequency |  |
| Lead delivery organisation |  |
| Lead contact(s) |  |
| Event/activity co-ordinator |  |
| Welfare Officer Contact |  |
| State the process for recording a concern |  |
| Where unaffiliated/outside agencies such as schools, colleges, uniformed organisations, etc. are hiring facilities identify the lead organisation for safeguarding policy and procedures |  |
| Where there is a contract for services or SLA in place;  Reference the minimum safeguarding arrangements |  |
| Location  (GPS co-ordinates) |  |
| Potential location for air ambulance landing |  |
| Identify location of any access barrier keys |  |
| Identify the location of the nearest defibrillator |  |
| Suitability of Facility |  |

## Consent

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Area of concern** | **Risk to children** | **Risk before mitigation** | **Solution/mitigation** | **Risk after mitigation** | **Review post-activity** |
|  |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Area of concern** | **Risk to children** | **Risk before mitigation** | **Solution/mitigation** | **Risk after mitigation** | **Review post-activity** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**Site facilities**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Area of concern** | **Risk to children** | **Risk before mitigation** | **Solution/mitigation** | **Risk after mitigation** | **Review post-activity** |
|  |  |  | **Pre:**  **During:** |  |  |
|  |  |  | **Pre:**  **During:** |  |  |

**Site facilities continued**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Area of concern** | **Risk to children** | **Risk before mitigation** | **Solution/mitigation** | **Risk after mitigation** | **Review post-activity** |
|  |  |  | **Pre:**  **During:** |  |  |
|  |  |  | **Pre:**  **During:** |  |  |
|  |  |  | **Pre:**    **During:** |  |  |

**Reporting incidents**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Area of concern** | **Risk to children** | **Risk before mitigation** | **Solution/mitigation** | **Risk after mitigation** | **Review post-activity** |
|  |  |  | **Pre:**  **During:** |  |  |

1. **Medical**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Area of concern** | **Risk to children** | **Risk before mitigation** | **Solution/mitigation** | **Risk after mitigation** | **Review post-activity** |
|  |  |  | **Pre:**  **During:** |  |  |
|  |  |  | **Pre:**  **During:** |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Area of concern** | **Risk to children** | **Risk before mitigation** | **Solution/mitigation** | **Risk after mitigation** | **Review post-activity** |
|  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Completed by** | **Name-** | **Date-** |