HEAI	TH & SAFETY CHECKLIST	YES	NO N/A	A Further Action Needed	
SAFETY INFORMATION	Are evacuation procedures published and posted				
	Do members have access to information relating to Health & Safety				
	Emergency Points				
	Can emergency vehicles access the facilities Is there a working phone available				
	Do members have access to emergency numbers				
VOLUNTEERS	Are emergency access points checked and operational				
	Are DBS checks up to date				
FIRST AID	Are contact details up to date				
FIRST AID	Are medical supplies adequate				
	Is first aid equipment in good working order				
	Do members have access to information regarding first aid practices Verify that first aid volunteers are appropriately qualified		_		_
EQUIPMENT	Tomy that mot and tomicological appropriately quanton				
	Is the equipment fit for the activity Is the equipment suitable for the age group		-		
	Is the equipment safe for the activity				
PLAYING AREA	le the consent and two formula delay				
	Is the area safe and free from obstacles Is the are appropriate for the activity				
PLAYERS					
	Are the players registered Are players medical information up to date				
	Are players contact details up to date				
	Are players wearing appropriate attire for the activity				
CAR PARK	Are players safe for the activity				
	Is the car park surface maintatined to minimise slip & trip risks				
	Are vehicle and pedestrians flows and car park entrances/exits clearly marked Is the car park well lit		_	+	_
	Can emergency vehicles gain access				
CLUBHOUSE	Are paths, steps and ramps properly maintained to minimise slip and trip risks				
	Is lighting suitable to allow safe access and exit - including lighting of emergency exits				
	Do changing rooms have sufficient lighting Do corridors have sufficient lighting				_
	Are corridors clear		+		
	Are there any trailing electrical leads or cables				
	Are permanent fixtures in good condition - eg - seats, signage, cupboards Is internal flooring in good condition				
ELECTRICAL EQUIPMENT & SERV					
Fixed electrical installations	Are they correctly installed, modified or repaired				
	Have they been tested by a suitably qualified person before being put in use				
	Are they inspected and tested at suitable intervals		工		
Portable electrical equipment	Has it been visually checked and where necessary tested to ensure it is safe to use	П			
	Has any damaged electrical equipment been taken out of service or replaced				
GAS EQUIPMENT Fixed gas appliances - boiler - cooke	ur - water heater				
Tixou gas appliantees - boller - cooke	Are arrangements in place for periodic examninations	П	Т		
	Any remedial actions by a gas safe registered engineer				
Mobile gas appliances	Are arrangements in place for periodic examninations		T		
	Any remedial actions by a gas safe registered engineer				
ASBESTOS	Does the building contain any asbestos				
	Is there a record of where the asbestos is				
	Is the asbestos in good condition				
Are arrange	ements in place to provide this information to anyone who may carry out work on the building Are there warning signs in place to ensure the asbestos is not disturbed		-		
	Are regular checks made to ensure it remains undisturbed and in good condition				
If damaged asbestos has been ident	ified seen made to ensure it is either repaired, encapsulated or removed by a licensed contractor		T		
nave arrangement	Have records been kept of any asbestos related work		\dashv	+	
FIRE				•	

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Have records been kept of any asbestos related work				
FIRE				
Are adequate fire safety measures in place				
Has an evacuation plan been implemented and tested				
Is the fire alarm tested regularly				
Are regular checks made to ensure escape routes and fire doors are				
unobstructed				
adequate and effective for the number of people using the clubhouse including the disabled and vulnerable				
Are combustable substances stored safely				
Is fire fighting equipment in place and tested regularly in line with the manufactures guidance				
Are staff and others trained in how to use it				
LEGIONNAIRES DISEASE				
Is there a plan for dealing with this risk from showers in the changing room				
RESPONSIBILITY				
Do users of the facility have all the information needed to operate safely				
Name: Position:		Cian	ature:	Date:
Nama		Sign	ature:	Date: