



Health And Safety Building Checklist And Risk Assessment – Off-site Venue

Most recent update: 15 May 2024

Venue name and address		
Learning Programme		
Time of day premises required	Day	Evening

DELETE or **PROVIDE DETAILS** as appropriate

1	Is the Public Liability certificate displayed? (send copy or provide insurer name, telephone number and policy expiry date)	<i>Attach copy/ provide details</i>	
1a	Is there a written health and safety policy for the venue?	YES	NO
2	Is there a fire certificate in operation for the building?	YES	NO
3	Are there written evacuation procedures for the venue?	YES	NO
4	Are evacuation notices displayed?	YES	NO
5	Are fire exits marked and kept clear?	YES	NO
6	If the premises are to be used in the evenings, are all fire exits adequately lit inside and outside the building to ensure safe exit from the building in the event of a fire?	YES	NO
7	State location of assembly point		
8	Are fire extinguishers available?	YES	NO
9	Have they been serviced within the last 12 months?	YES	NO
10	Is the Health and Safety law poster displayed?	YES	NO
11	Is there access to a first aid box (and is it adequately stocked in line with HSE guidelines)?	YES	NO
12	Is there a first aider available for staff and customers?	YES	NO
13	Do you have access to an alternative telephone in event of emergency?	YES	NO
14	Are incident/accident procedures known and report forms available?	YES	NO
15	Are there adequate welfare facilities (male/female toilets, washing facilities, eating facilities etc)?	YES	NO
16	Is the venue clean and hygienic?	YES	NO
17	Is there adequate ventilation?	YES	NO





18	Is there adequate lighting?	YES	NO
18a	Have adequate steps been taken to prevent slipping/tripping hazards?	YES	NO
19	Is heating adequate and all radiators working?		
20	Do learners have access to or use electrical equipment? If yes please provide date of last PAT test	YES	NO
		Date:	
20a	Do learners have access to or use machinery? If yes please provide details of last service: who carried it out and on what date?	YES	NO
		<i>Provide details</i>	
20b	Is the electrical installation regularly inspected by a competent electrician and records kept by the venue provider? (Provide date of last test)	YES	NO
		Date:	
21	Are there adequate plug sockets available for electrical equipment?	YES	NO
22	If extension leads must be used, are they approved type, PAT tested and regularly visually inspected for defects?	YES	NO
23	Is the gas installation/gas boiler regularly inspected by a competent engineer? Provide last date of inspection	YES	NO
		Date:	
24	Are there adequate arrangements in place with regard to personal security?	YES	NO
25	Will learners have access to hazardous substances during their learning programme? If yes, are relative COSHH procedures in place?	YES	NO
		YES	NO
26	Is there an annually reviewed Critical Incident Plan (see CW&C proforma) in place for the building?	YES	NO
27	In the arrangements and procedures are there clear instructions for learners and tutors to be followed in an emergency?	YES	NO
28	Is the furniture safe and arranged in a safe manner?	YES	NO
29	Does the venue provider have a completed risk assessment for hiring out premises to members of the public and any other relevant risk assessments eg Fire?	YES	NO
		<i>Attach copy/ provide details</i>	
30	Are you satisfied that the venue is suitable for the provision of learning to be provided and standards sufficient to ensure the health and safety of employees and learners?	YES	NO



Any actions to be taken as a result of the above assessment?	By whom?	By when?

Extend as required

Venue Accessibility

Symbol	Meaning	Available?	Symbol	Meaning	Available?
	Lift			Wheelchair accessible toilet	
Symbol	Meaning	Available?	Symbol	Meaning	Available?
	Hearing loop			Car parking	
Symbol	Meaning	Available?	Symbol	Meaning	Available?
	Sight friendly			On public transport route	
Symbol	Meaning	Available?	Symbol	Meaning	Available?
	Stairs			Wheelchair accessible	
Symbol	Meaning	Available?			
	Disabled car parking				



Is the venue suitable to host Adult Education sessions?	
YES	NO

Signed _____

Position _____

Date _____

