

Workshop Activity Risk Assessment Checklist

U3A Name	
Interest Group	
Date	Location/Postcode
Description of Activity	

Hazard	Yes	No	N/A	Comments
---------------	------------	-----------	------------	-----------------

Use of Hand Tools

1	Are tools sharp and in good condition? (e.g. no damage, splitting of handles etc)				
---	---	--	--	--	--

Electrical Power Tools

1	Portable Appliance tested?				
2	Double insulated?				
3	Visual inspection of leads and connections made?				

Fixed Machinery (lathes etc.)

1	Are electrical connections & wiring in good condition?				
2	Is the equipment suitably earthed?				
3	Are appropriate guards fitted and in good condition?				

Personal Protective Equipment (PPE)

1	Does the activity require the following: a. Eye Protection b. Hearing Protection c. Dust Mask d. Gloves e. Safety shoes				
---	--	--	--	--	--

Hazardous Materials

1	Are the materials used hazardous? (e.g. toxic, harmful, irritant, dusty etc. see container label)				
2	Does the material require special precautions in use? (e.g. the wearing of PPE)				

Workplace Hazards

1	Are the floors free from trip hazards & escape routes clear?				
2	Are precautions in place to prevent or respond to fire?				
3	Does the activity require special precautions? (e.g. removal of jewellery, tying back long hair)				

Signed	Dated
---------------	--------------