

- **High Risks:** Identify any high-level risks that may require further attention or specific actions.
- **Example:** Injury from darts (high severity) and communication issues (high severity).
- **Medium Risks:** Risks that can be mitigated through control measures but still need attention.
- **Low Risks:** Risks that are unlikely to occur but should still be considered.

List any existing control measures or procedures that will minimize risks.

- Visual communication tools (e.g., signs, screens, flashing lights).
- Use of hearing-loop systems where necessary.
- First aid trained staff on-site.
- Safety protocols for handling and throwing darts.
- Regular safety inspections of the venue.

3. VENUE LAYOUT & ACCESSIBILITY

- **Entrances/Exits**
 - Are all exits clearly marked and accessible? Yes/No
 - Is the route clear of obstructions? Yes/No
 - Are exit doors easy to open? Yes/No
 - Are there accessible entrances for people with disabilities? Yes/No
 - Is there a need for ramps or elevators? Yes/No
- **Hallways & Pathways**
 - Are hallways free of trip hazards (e.g., cables, loose flooring)? Yes/No
 - Are pathways wide enough for wheelchair access? Yes/No
 - Are areas well-lit? Yes/No
- **Signage**
 - Are signs visible and understandable for those with hearing or vision impairments? Yes/No
 - Are emergency exits and procedures clearly displayed? Yes/No

4. HEALTH & SAFETY EQUIPMENT

- **First Aid Kit**
 - Is there a well-stocked first aid kit on-site? Yes/No
 - Is it easily accessible? Yes/No
- **Fire Safety**
 - Are fire extinguishers easily accessible and well-maintained? Yes/No
 - Are smoke detectors and alarms working? Yes/No
 - Are fire exits clearly marked and unblocked? Yes/No
 - Are evacuation procedures posted clearly? Yes/No
 - Are fire drills conducted regularly? Yes/No
- **Emergency Equipment**
 - Are defibrillators available on-site? Yes/No
 - Are there emergency lights in case of power failure? Yes/No

Emergency Contacts/Numbers:

- Ambulance: _____
- Fire Department: _____
- Police: _____

5. ELECTRICAL & LIGHTING

- **Electrical Equipment**
 - Are all electrical outlets and wires free from damage? Yes/No
 - Are cords secured to prevent tripping? Yes/No
 - Are electrical panels accessible to authorized personnel only? Yes/No
 - Are power strips used properly (not overloaded)? Yes/No
- **Lighting**
 - Is the lighting adequate for all areas (e.g., corridors, seating areas)? Yes/No
 - Are there emergency lights for evacuation routes? Yes/No
 - Are light fixtures securely mounted? Yes/No

6. FLOORING & GENERAL CONDITION

- **Floor Surfaces**
 - Are floors even and free from cracks or holes? Yes/No
 - Are there non-slip mats or coatings where necessary (e.g., bathrooms, kitchens)? Yes/No
 - Are wet areas marked (e.g., spills, rainwater)? Yes/No
 - Are carpets or rugs secured? Yes/No
- **General Condition**
 - Are walls, ceilings, and windows in good condition (e.g., no cracks or broken glass)? Yes/No
 - Are there any exposed sharp objects or other dangerous features? Yes/No
 - Are furniture and fixtures sturdy and well-maintained? Yes/No

7. OUTDOOR AREAS (IF APPLICABLE)

- **Parking Lot**
 - Are parking spaces well-marked and accessible? Yes/No
 - Are the pathways from parking areas to entrances well-lit and clear of obstacles? Yes/No
- **Exterior Lighting**
 - Are exterior lights functioning properly for safety? Yes/No
 - Are there adequate lights in the parking lot and walkways? Yes/No
- **Safety Barriers**
 - Are there guardrails or barriers around areas where falls could occur? Yes/No
 - Are outdoor stairs or ramps in good condition? Yes/No

8. RISK ASSESSMENT APPROVAL

By signing, you acknowledge that this risk assessment has been reviewed, and all identified risks are being managed and mitigated.

- **Assessor's Signature:** _____
 - **Date:** _____
 - **Reviewed By:** _____
 - **Date of Review:** _____
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