General U3A Activity Risk Assessment Checklist during Covid-19

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| **NEW MILLS AND DISTRICT U3A** |
| **Interest Group**  |
| Date: | Location/Postcode: |
| Time: |
| Nature and Description of Activity     |

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| **GROUP ORGANISER CHECKLIST** |
| Item | ACTION | Satisfactory? Y/N |
| Before activity | After activity |
| 1 | Consider the current Government and Public Health advice in relation to your location and the feasibility of carrying out this activity safely adhering to present social distancing requirements and permissible indoor and outdoor group sizes. |  |  |
| 2 | Consider whether your activity involves the sharing of any equipment or shared spaces and make suitable arrangements to have antiviral cleaning products available. |  |  |
| 3 | Advise all wishing to take part that they should allow group leaders take a register with contact details of participants to share with NHS Contact and Trace service if required; **this register to be retained for 21 days.** |  |  |
| 4 | Where necessary inspect area prior to starting activity to ensure adequate social distancing can be maintained throughout and to remove/isolate any hazards.  |  |  |
| 5 | Ensure travel arrangements also meet the necessary requirements.  |  |  |
| 6 | Consider the general hazards related to this type of activity, the impact accommodating Covid19 requirements may have on the way it is organised. |  |  |
| 7 | Record outcome of these considerations in writing prior to the activity and share with participants so they can complete their personal checklist in line with the information in your checklist.  |  |  |

A register of attendees has been taken and will be retained for 21 days TICK TICK

 GROUP ORGANISER SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*THIS RISK ASSESSMENT TO BE RETAINED BY THE GROUP ORGANISER.*

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| **PARTICIPANT PERSONAL CHECKLIST** |
| **Interest Group:** |
| DATE: | TIME: |
| Item | ACTION | Satisfactory? Y/N |
| Before activity | After activity |
| 1 | All participants to review their own personal health and circumstances and refer to current Government guidance for different risk categories in Covid19 and what measures are recommended for people over 70 and/or with various medical conditions. |  |  |
| 2 | Consider the health risk category of anyone else you are isolating with in your household.  |  |  |
| 3  | Review the risk check list for the activity as completed by the group organiser and consider if you can take part without adverse risk to yourself or household.   |  |  |

*PARTICIPANTS TO RETAIN THIS CHECKLIST FOR THEIR OWN INFORMATION*