

RISK ASSESSMENT

Session: _____

Please note that this document is for guidance only. Each session is risk-assessed accordingly.

Type of risk	Level of risk	Checks to make	Tick here on check	Measures taken If necessary and new level of risk upon check	Signature of person that took measures
Slips trips and falls	Medium	<ul style="list-style-type: none">• Clear, clean, dry, and well-lit space.• Correct clothing and footwear.• No obstacles in pathway.• No reading and walking simultaneously.		Low	
Physical Injury	High	<ul style="list-style-type: none">• Warm-ups performed before all physical activities.• All physical activities explained clearly with reference to performing them safely.• In workshops, participants told to work in a space away from others.• Participants asked to declare previous injuries and medical information that may affect their safety.		Low	

Vocal Injury	Medium	<ul style="list-style-type: none"> • Appropriate warm-ups to take place according to session. • Vocal safety techniques to be shared with participants/students. 		Low	
					Risk Assessment Completed (signature & date):

UNFORSEEN HAZARD DATE, PLACE & TIME	NATURE OF HAZARD	ACTION TAKEN