

General Outdoor Activity Risk Assessment Checklist

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| U3A Name | |
| Interest Group | |
| Date Location/Postcode | |
| Nature and Description of Activity | |

| Part 1: Before the activity Group Organiser Check list: | Yes (✓) |
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| <ul style="list-style-type: none"> A) 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 out-door activities. (for example currently outdoor activities are still restricted to work, shopping and exercise but this is changing and will need to be checked) B) Consider whether your activity involves the sharing of any equipment or shared spaces and make suitable arrangements to have antiviral cleaning products available. C) Where necessary inspect area prior to starting activity to ensure adequate social distancing can be maintained throughout and to remove/isolate any hazards. D) Ensure travel arrangements also meet the necessary requirements E) Consider the general hazards related to this type of activity, the impact accommodating Covid19 requirements may have on the way it is organised. These may relate to the numbers permitted to take part at any one time, location and potential congestion areas, obstacles, fitness levels required, appropriate dress, weather conditions etc F) 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. | |
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| Before Activity Personal Checklist: | Yes (✓) |
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| <ul style="list-style-type: none"> A) 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. B) Consider the health risk category of anyone else you are isolating with in your household. a) Review the risk check list for the activity above completed by the group organiser and consider if you can take part without adverse risk to yourself or household. | |

| Part 1. Activity Checklist outcomes: | | Yes (✓) |
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| Signed Group Organiser: | | Dated |

| Part 2. Personal Checklist Outcomes: | | Yes (✓) |
|---|--|--------------------|
| | | |
| Signed | | Dated |