

The Meeting Place (TMP) Risk Assessment Form



TMP Activity	Anna Chaplaincy
Locations	Eastwick Road Church (home base), Bookham Baptist Church, St Nicholas, Bookham Library & Liberham Lodge

What are the hazards?	Who might be harmed and how?	Current controls in place	Additional controls required	Action by who?	Action by when?	Date completed
Safeguarding	Staff, volunteers and clients	Anna Chaplain, Anna Coordinator and Anna Friends all know the process to follow in the event of a safeguarding issue. Safeguarding training must be updated every three years. Yvonne Delahunty is responsible for DBS checks/renewals.	Refer to Anna Chaplaincy lone working policy. Training records maintained by Designated Safeguarding Lead	Designated Lead	Annually	Annually in December
Steps Slips & trips Moving chairs or tables Pouring hot drinks Cleanliness	Staff, volunteers and clients	Refer to relevant venue Risk Assessment (RA). For events led by Anna Chaplaincy, volunteers set up safely in advance of the event and clear up once visitors have left to minimise the risk.	Ensure relevant venue RA's are current and are reviewed annually by Anna Chaplain. Ensure Anna Chaplain undertakes manual handling course	Anna Coordinator and Anna Chaplain	Annually	
Food, hygiene & dietary requirements / allergies	Staff, volunteers and clients	For events led by Anna Chaplaincy where a meal is provided, include a question in relation to dietary requirements / allergies on the booking form. Person leading the event ensures that relevant dietary requirements are met.	Adults (with mental capacity) to take responsibility for food eaten and advise if any issues. Leaders to be aware of clients who may not have mental capacity. Events leaders (where food is	Anna Coordinator and Anna Chaplain	Prior to any event involving the provision of food	

			provided) hold a valid food hygiene qualification.			
Fire safety	Staff, volunteers and clients	Refer to RA for specific venue.		Person leading event	ongoing	Ongoing

Important Notes to be completed:

1. Are the activities covered by The Meeting Place Insurance Policy?

Yes / No

2. Is a DBS check required for any aspect of the activities?

Yes / No

Signed: _____ **Risk Assessor**

Signed: _____ **Area Lead**

Print name: _____

Print name: _____

Date: _____

Date: _____ **Review Date:** _____