

Camp Risk Assessment Form

Name of camp:	Activity/Area being assessed: Food hygiene	Camp leader's name:
Name(s) of risk assessors 1) 2) 3)	Date risk assessment undertaken:	Time period risk assessment is valid for:

What are the hazards?	Who could be harmed and how?	What controls do you have in place?	Are further controls needed? Yes/No if yes please outline below	Date action completed
Woodpile- poor housekeeping and debris in area	Injury to users by falls, trips,	Medium	Work area is kept clear and tidy when in use. Tidy area before starting work Ensure gate is kept closed	On-going
Snakes hiding in woodpile	Snake bites on users feet	Low	Ensure sturdy foot wear is worn Keep gate at entrance closed	On-going

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What are the hazards?	Who could be harmed and how?	What controls do you have in place?	Are further controls needed? Yes/No if yes please outline below	Date action completed
Woodpile being used as play area, tripping, injury from trying to lift wood	Children and vulnerable adults	Medium	Ensure children and vulnerable people are accompanied at all times-keep gate closed	On-going

Signature of Risk Assessor:..... Print name..... Date:.....

Signature Camp Leader: Print name Date:.....

Send for comment to Woodlarks H&S Advisor at cisafetysolutions@gmail.com