



## St Michael's Preschool

**Daily Risk Assessment of Premises**

**Week Starting:**

### INDOOR ENVIRONMENT

| Area  | M | T | W | T | F |
|---|---|---|---|---|---|
| Exits Clear                                       |   |   |   |   |   |
| Doors Secure                                      |   |   |   |   |   |
| Sockets Covered                                   |   |   |   |   |   |
| Clear of debris                                   |   |   |   |   |   |
| Toilets, sinks checked for cleanliness and debris |   |   |   |   |   |
| Temperature of heaters ok                         |   |   |   |   |   |
| Resources stored/ arranged safely                 |   |   |   |   |   |
| Broken toys removed                               |   |   |   |   |   |
| Personal belongings put in office                 |   |   |   |   |   |
| First aid box accessible                          |   |   |   |   |   |
| Hook on front door                                |   |   |   |   |   |
| Cleaning cupboard locked                          |   |   |   |   |   |
| Fridge temperature checked (record temp)          |   |   |   |   |   |
| Door stoppers on toilets                          |   |   |   |   |   |
| No cleaning or hazardous materials out            |   |   |   |   |   |

### OUTDOOR ENVIRONMENT

| Area                 | M | T | W | T | F |
|----------------------|---|---|---|---|---|
| Gates locked         |   |   |   |   |   |
| Clear of debris      |   |   |   |   |   |
| Toys/ equipment safe |   |   |   |   |   |



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No slipping hazards, e.g. steps free from ice

### DAILY RISK ASSESSMENT CONCERNS LOG

| Date | Concern | Action Taken | Manager Sign Off |
|------|---------|--------------|------------------|
|      |         |              |                  |



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