

BRIGHTER FUTURES

COMMUNITY FACILITY

General Health & Safety Risk Assessment

FINAL DRAFT FOR SITE VERIFICATION AND APPROVAL

August 2026

Important status note

This document consolidates the August 2026 general review with the Kitchen, Workshop and Kids/Youth Club review drafts, together with the public Fire Risk Assessment effective 22 July 2024 and internally reviewed 21 July 2025, and the 2019 Flood Consequence Assessment. It is a final draft, not evidence that physical controls have been checked. Critical fire and workshop controls must be verified before approval and before any affected activity continues.



34 Wellington Road, Rhyl, Denbighshire, LL18 1BN

1. Document control and scope

Organisation	Brighter Futures
Premises	Brighter Futures Community Facility, 34 Wellington Road, Rhyl, Denbighshire, LL18 1BN
Overall health & safety responsibility	Shane Owen (as stated in the supplied assessment); governance/oversight through trustees and HSC arrangements
Day-to-day implementation	Employees, volunteers and activity leads, coordinated through HSC / facilities arrangements
Previous general review	19 February 2026
Consolidated draft date	August 2026
Approval status	FINAL DRAFT - site verification and management/trustee approval required
Next formal review	By 16 August 2027, or sooner after significant change, incident/near miss, new equipment/substances, changed users or evidence that controls are ineffective

1.1 Scope and linked assessments

This assessment covers facility-wide premises, common activities and interfaces between specialist activities. Detailed task/activity controls are managed in linked assessments and should not be duplicated where the linked assessment is more specific.

- Kitchen Health & Safety Risk Assessment - review draft dated 16 August 2026.
- Workshop Health & Safety Risk Assessment - review draft dated 16 August 2026.
- Kids and Youth Club Health & Safety Risk Assessment - review draft dated 16 August 2026.
- Vehicle/minibus assessment - stated to be in place; current controlled document reference and review date must be inserted in the risk-assessment index.
- Fire Risk Assessment - public copy effective 22 July 2024 and 2025 Internal; competent review and closure evidence require verification before this general assessment is approved.
- Flood Consequence Assessment - Ambient Environmental Assessment, reference 4447 FCA, April 2019; use alongside current NRW warnings and local emergency arrangements.

Document hierarchy

The latest approved controlled internal copy takes precedence over public website copies. If a linked assessment identifies a stricter control than this general assessment, the stricter control applies.

2. Assessment method

Recommended general-assessment scores use a 5 x 5 matrix: Risk = Likelihood x Severity. The ratings below are management recommendations based on the evidence reviewed and must be confirmed during site verification. Linked assessments may use a different approved matrix; their scores should not be mechanically converted.

Likelihood	1 Rare	2 Unlikely	3 Possible	4 Likely / 5 Almost certain
Severity	1 Minor	2 Moderate	3 Serious	4 Major / 5 Fatal or multiple serious injury
Risk bands	1-4 Low	5-9 Medium	10-16 High	17-25 Very High

3. Priority action register

Actions below are the controls that should be resolved, verified or retained before this document becomes the approved controlled assessment. "Open" does not mean the activity is automatically prohibited; however, any critical control identified as missing or unsafe requires the activity/area to be stopped or restricted until adequately controlled.

Priority	Issue	Required action / evidence	Owner	Target	Status
Immediate	Fire Risk Assessment and 2024 action closure	Arrange/confirm a competent current FRA review. The public FRA is effective 22/07/2024 and itself requires annual competent review. Verify closure evidence for its significant findings, including the three immediate first-floor-related actions. If closure of those critical actions cannot be evidenced, restrict first-floor occupation pending competent fire-safety advice.	Responsible Person / HSC	Before approval / immediately	OPEN
Immediate	Workshop machine safety and welding controls	Before relevant equipment is used, verify machine-specific PUWER checks, guards/interlocks/emergency stops/isolation and user competence. Do not permit indoor welding unless effective source-capture/LEV is operating; provide suitable RPE where LEV is insufficient and face-fit test tight-fitting RPE.	Workshop lead / HSC	Before use	OPEN
High	Youth/Kids session critical controls	Verify fire capacity and evacuation arrangements, emergency release of controlled/magnetic doors, arrival/departure traffic plan, yard climbing controls, first-aid/medical arrangements, safeguarding contacts/training and safe staffing before the linked assessment is approved.	Session Lead / HSC / Safeguarding	Before sessions / sign-off	OPEN
High	Kitchen priority controls	Verify kitchen step marking, fire blanket/firefighting records and FRA coverage for cooking-oil/fryer hazards, knife storage/guards, oven and bain-marie defects, electrical records, COSHH/wet-work controls and extraction maintenance. Stop defective equipment where safe operation is affected.	Catering coordinator / HSC	Before affected use / within 30 days	OPEN
Medium	Legionella / water hygiene	The recorded six-monthly water-dispenser cleaning is useful but does not by itself establish the whole-building water-system risk position. Record a proportionate Legionella/water-system risk assessment/control scheme with a named responsible person and monitoring records.	Facilities coordinator	Within 30 days	OPEN
Medium	First-aid needs assessment	Complete/refresh a documented first-aid needs assessment covering employees, volunteers, public users and youth sessions; confirm kits, trained cover, appointed persons and emergency-medical arrangements.	HSC / Facilities / Session Lead	Within 30 days	OPEN
Medium	Lone working / violence	Confirm opening/closing, patrol, incident-response and other lone-working situations; define minimum staffing, check-in/escalation, alarm/radio testing, safe retreat and post-incident learning/support.	Management / HSC	Within 30 days	OPEN
Medium	DSE workstation assessments	Identify workers who meet DSE-user criteria and complete/review workstation assessments; act on discomfort and changes.	Facilities coordinator	Within 60 days	OPEN
Medium	Controlled assessment index	Record document reference, version/review date and owner for General, Fire, Flood, Kitchen, Workshop, Kids/Youth, vehicle/minibus and other activity assessments. Replace vague cross-references with controlled references.	HSC / Facilities	Within 30 days	OPEN
Monitor	Asbestos management	Continue annual visual condition inspection of the external redundant flue against the JB Monitor 2019 survey; next recorded check due by November 2026. Provide asbestos information before intrusive work.	HSC	By Nov 2026 / before intrusive work	MONITOR
Closed / monitor	Electrical remedial works	Retain latest EICR, Roberts Electrical and Wynne Edwards Electrical remedial records and annual in-house PAT records. Clarify that any current EICR quotations relate to periodic reinspection/new work, not an unresolved 2023 action.	HSC / competent electrician	Ongoing	CLOSED / MONITOR
Closed / monitor	Work at height / ladders	February 2025 review recorded complete. Maintain competent users, pre-use checks, periodic inspection and task-specific assessment; manage lifting equipment separately under LOLER where relevant.	HSC / Facilities	Ongoing	CLOSED / MONITOR
Closed	Gas supply	Former mains gas supply capped by British Gas / Energy Networks in 2024. Retain evidence and reassess before any future gas supply/appliance is introduced.	HSC	Completed 2024	CLOSED
Closed / monitor	Yard ball-stop netting	Installation recorded complete January 2024. Remove historic "confirm action" wording and include netting/fencing condition in routine yard inspections.	Facilities / Session Lead	Routine checks	CLOSED / MONITOR

4. General premises risk assessment

Hazard / who may be harmed	Existing controls / evidence	Initial risk L x S = R	Further action / decision	Residual risk L x S = R	Owner / review
Slips and trips - staff, volunteers, visitors and users may suffer sprains, fractures or other injury.	Housekeeping; walkways and stairs kept clear; adequate lighting; spillages cleaned promptly; floors/carpets maintained; daily/pre-opening checks used by activities.	3 x 3 = 9 Medium	Maintain a documented defect/repair log; allocate check ownership; escalate unresolved defects and review slip/trip/near-miss trends.	2 x 3 = 6 Medium	All staff / Facilities Daily; monthly audit; annual review
Fire and evacuation - burns, smoke inhalation, fatal injury or delayed evacuation.	Alarm/emergency-lighting/firefighting checks; drills; signed escape routes; staff training; separate FRA. Public FRA effective 22/07/2024 reviewed for this draft.	3 x 5 = 15 High	Interim High residual risk until competent FRA review and closure evidence are verified. Confirm all significant findings, first-floor restrictions/actions, fire doors/partitioning, alarm changes, PV/battery/ASHP issues and assisted evacuation. Do not rely on secondary equipment unless maintained and users trained.	2 x 5 = 10 High	Responsible Person / HSC Immediate; per FRA
Flooding - injury, entrapment, loss of safe access/egress and secondary hazards.	2019 Flood Consequence Assessment; site flood-warning awareness; evacuation/recovery arrangements; drainage and external-area checks.	2 x 4 = 8 Medium	Keep NRW warning contacts and flood response plan current; test communication/recovery arrangements; review after flood event, major drainage/building change or updated flood information.	2 x 4 = 8 Medium	Management / Facilities Seasonal; after warnings/events
Asbestos - inhalation of fibres if suspected ACM is damaged or disturbed.	JB Monitor 2019 building survey retained; external redundant flue monitored annually; November 2025 check recorded no change/damage.	2 x 5 = 10 High	Record annual visual checks; next by Nov 2026. Keep survey/register accessible and provide information before maintenance/intrusive work; competent reassessment if deterioration is found.	1 x 5 = 5 Medium	HSC Annual / before intrusive work
Manual handling - musculoskeletal injury from lifting, carrying, pushing or pulling.	Trolleys/lift available; staff/volunteer training; loads can be split or team-lifted.	3 x 3 = 9 Medium	Avoid hazardous handling where reasonably practicable; assess higher-risk/repetitive tasks considering task/load/environment/individual; maintain aids and review after injuries or task changes.	2 x 3 = 6 Medium	HSC / activity leads On change; annual review
Stored equipment / falling objects - crush, impact or trip injury.	Heavy items stored low; stable storage and safe removal expected.	2 x 3 = 6 Medium	Inspect shelving/storage; secure tall/heavy items where needed; prohibit climbing on furniture; remove damaged shelving promptly and mark load limits where required.	1 x 3 = 3 Low	Facilities Monthly / after change
Cleaning chemicals / hazardous substances - skin/eye injury, inhalation, dermatitis or accidental mixing.	Products labelled and securely stored; SDS/dilution information; PPE where required; lower-hazard products considered.	3 x 3 = 9 Medium	Maintain current inventory and COSHH assessments; control exposure using substitution/engineering/administrative measures before PPE; prevent incompatible mixing; define spill/eye response; include contractor substances and wet-work skin controls.	2 x 3 = 6 Medium	HSC / Facilities Monthly / product change
Electricity - shock, burns or fire from faulty equipment, wiring or sockets.	Qualified electricians for installation/repairs; EICR remedial actions reported complete by Roberts Electrical and Wynne Edwards Electrical; user checks; annual in-house PAT programme by trained staff/volunteers; PAT training May 2026.	3 x 5 = 15 High	Retain EICR/remedial/PAT evidence; remove defective equipment; maintain tester competence; refer fixed-wiring/protection issues to competent electrician. Clarify next EICR/reinspection schedule in the controlled register.	1 x 5 = 5 Medium	HSC / competent electrician Ongoing; per inspection regime
Work at height - falls while changing lamps, inspecting gutters or reaching elevated areas.	Suitable stepladders; instruction/training; pre-use checks; external contractors for higher-risk work; arrangements reviewed Feb 2025.	3 x 4 = 12 High	Maintain ladder register/periodic inspections; competent users only; task-specific assessment where needed; use safer access/contractors for unsuitable work; review after defects/incidents/change.	2 x 4 = 8 Medium	HSC / Facilities Before task; periodic inspection
Violence, aggression and lone working - assault, abuse, stress, injury or delayed help.	Controlled entry; booking/contact details; personal alarms/radios; incident logging; de-escalation expectations; police contact when appropriate.	3 x 4 = 12 High	Complete lone-working/violence review; define minimum staffing and check-in/escalation; test alarms/radios; safe-retreat arrangements; consult staff and review incident trends; provide post-incident support.	2 x 4 = 8 Medium	Management / all staff Within 30 days; after incidents
DSE / office work - discomfort, upper-limb or back/neck problems.	Ergonomic awareness/training and normal office equipment.	3 x 2 = 6 Medium	Identify DSE users and complete individual workstation assessments; provide adjustments and review after change, new user or discomfort.	2 x 2 = 4 Low	Facilities Within 60 days; on change
Legionella / water systems - serious respiratory illness from contaminated aerosols.	Six-monthly inspection/cleaning of water dispensers is recorded; general cleaning/maintenance arrangements in place.	2 x 5 = 10 High	Record a proportionate building water-system risk assessment/control scheme, named responsible person and monitoring records. Dispenser hygiene should sit within, not replace, the wider water-risk assessment.	1 x 5 = 5 Medium	Facilities Within 30 days; review on system change

5. Specialist activity and area interfaces

Hazard / who may be harmed	Existing controls / evidence	Initial risk L x S = R	Further action / decision	Residual risk L x S = R	Owner / review
Kitchen activities - burns/scalds, sharps, powered equipment, slips, chemicals and heat.	Separate Kitchen Health & Safety Risk Assessment review draft dated 16/08/2026; supervision, safe storage, equipment checks, COSHH and kitchen-specific procedures described there.	4 x 4 = 16 High	Approve the Kitchen assessment only after its priority site checks are verified: step marking, cooking-fire controls, knife storage/guards, oven/bain-marie defects, electrical evidence, COSHH/wet-work controls, extraction and powered-equipment inventory. Fire controls remain subject to the current FRA.	2 x 4 = 8 Medium	Catering coordinator / HSC Before affected use; linked RA cycle
Workshop machinery, welding, dust/fume, lifting and hazardous substances - amputation, fatal injury, respiratory disease, fire/explosion.	Separate Workshop Health & Safety Risk Assessment review draft dated 16/08/2026; authorised users, maximum occupancy 8, THINK PINK rule, machine guarding and training expectations.	4 x 5 = 20 Very High	Interim High residual risk until priority controls are verified. No machine use with missing/defective guarding, interlocks, stops or isolation. No indoor welding without effective source capture/LEV; add suitable RPE where required. Complete/confirm PUWER, LEV examination, COSHH/DSEAR, noise/HAV and LOLER records.	2 x 5 = 10 High	Workshop lead / HSC Before use; linked RA cycle
Kids/Youth Club sessions - behaviour, safeguarding, missing young person, traffic, climbing, medical needs and fire.	Separate Kids and Youth Club Health & Safety Risk Assessment review draft dated 16/08/2026; pre-session checklist, staffing/supervision, controlled access, safeguarding and activity-specific controls.	4 x 5 = 20 Very High	Before approval, verify maximum attendance against fire capacity, emergency release of controlled doors, traffic/arrival plan, climbing restrictions, first-aid/medical procedures, safeguarding/DBS/training and no-lone-working arrangements. Apply Kitchen RA to youth cooking/sharp activities.	2 x 5 = 10 High	Session Lead / HSC / Safeguarding Before sessions; linked RA cycle
Yard/external surfaces and weather - slips, trips, falls and unsafe conditions.	Housekeeping; ramps/rails; non-slip measures; drainage; ice-melt salt; session leaders check conditions; ball-stop netting installed Jan 2024.	3 x 3 = 9 Medium	Record pre-session checks; inspect drainage, ramps, rails, surfaces, fencing/netting; restrict use in ice, standing water, severe weather or where defects make the area unsafe.	2 x 3 = 6 Medium	All staff / Session Lead Before sessions; seasonal
Vehicle movement / deliveries - pedestrian collision, crushing or blocked emergency access.	Separate vehicle risk assessment stated to be in place; activity arrangements refer to pedestrian segregation, reversing/deliveries, speed, lighting and emergency access.	3 x 5 = 15 High	Insert current vehicle/minibus assessment reference and review date; align yard and youth arrival/departure controls with it; minimise reversing and vehicle movements when young people/public are present.	2 x 5 = 10 High	HSC / Facilities Per linked vehicle RA
First-floor and loft access - falls on stairs, unsafe storage/access.	Handrails, stair nosing, loft stairs/safety rails and lighting; housekeeping and access control.	3 x 4 = 12 High	Authorised access only; inspect stairs/lighting/rails/loft access; keep landings clear; separately assess carrying loads on stairs and prohibit improvised access.	2 x 4 = 8 Medium	Facilities Monthly; before loft access
First-floor/loft fire and evacuation - fatal/serious harm if escape is compromised.	Fire alarm/emergency lighting/firefighting arrangements, doors, evacuation equipment and training are described in current records and the 2024 FRA.	3 x 5 = 15 High	Treat as Interim High until the competent FRA review confirms current occupancy, compartmentation/fire-door arrangements, alarm/detection, secondary escape/evacuation measures and closure of 2024 first-floor-related actions. If critical closure evidence is absent, restrict first-floor occupation pending competent advice.	2 x 5 = 10 High	Responsible Person / HSC Immediate; per FRA

6. Evidence and controlled-record checklist

- Current competent Fire Risk Assessment, action plan/closure evidence, fire log, alarm/emergency-lighting/extinguisher service records and drill records.
- Latest EICR plus Roberts Electrical and Wynne Edwards Electrical remedial completion records/logs; annual PAT records and in-house tester competence/training records (latest training recorded May 2026).
- JB Monitor 2019 asbestos survey/report, asbestos register/management information and annual inspection log for the external redundant flue (last recorded Nov 2025; next by Nov 2026).
- Legionella/water-system risk assessment/control scheme and monitoring records; six-monthly water-dispenser hygiene records.
- COSHH inventories/assessments, current Safety Data Sheets, cleaner/staff training and wet-work/dermatitis controls.
- Ladder/stepladder register, inspections and work-at-height competence records, including the February 2025 review evidence.
- First-aid needs assessment, kit inspection records, trained first-aid/appointed-person cover and youth emergency-medical/medication arrangements.
- Incident, near-miss, violence/aggression, safeguarding-related safety and maintenance defect logs with evidence of action taken.
- 2024 British Gas / Energy Networks gas-capping/decommissioning evidence.
- Controlled copies/references and approval dates for Kitchen, Workshop, Kids/Youth, vehicle/minibus and any event/activity risk assessments.
- Workshop equipment inventory and PUWER records; LEV inspection/examination records; welding RPE/face-fit records where applicable; COSHH/DSEAR, noise/HAV and LOLER records.
- Kitchen equipment inventory/maintenance records, extraction service/cleaning records, knife/sharp controls and evidence that identified equipment defects are closed.

7. Review triggers and management arrangements

- Review this assessment at least annually and sooner after a significant accident/near miss, fire/flood event, change to the building/layout, new equipment/substances, changed staffing or user needs, or evidence that controls are ineffective.
- Activity leads must stop or restrict an activity where a safety-critical control is absent, defective or overdue until the risk is adequately controlled.
- Employees and volunteers should be consulted on practical controls, incidents and changes; significant findings and relevant instructions must be communicated to people affected.
- Contractors must receive relevant site hazard information (including asbestos, fire, electrical isolation and access restrictions) and provide suitable competence/evidence for higher-risk work.

Approval condition

This draft should not be marked "Approved" until the Responsible Person/HSC has checked the critical fire controls and the priority linked-assessment actions on site, and recorded any changes to the recommended scores or wording.

8. Approval

Assessor / reviewer	_____
Site controls verified by	_____
Competent fire-safety review / reference	_____
Trustee / management approval	_____
Approval date	____ / ____ / 2026
Next review date	By August 2027, or earlier if a review trigger applies

Appendix A - Reference basis for this consolidation

Documents reviewed for this final draft:

- Brighter Futures - General Risk Assessment Review, updated 16 August 2026.
- Brighter Futures - Kitchen Health & Safety Risk Assessment review draft, 16 August 2026.
- Brighter Futures - Workshop Health & Safety Risk Assessment review draft, 16 August 2026.
- Brighter Futures - Kids and Youth Club Health & Safety Risk Assessment review draft, 16 August 2026.
- QTS UK Ltd - Fire Risk Assessment for Brighter Futures, effective 22 July 2024 (public copy checked via Brighter Futures Stakeholder Hub on 19 August 2026).
- Ambiantal Environmental Assessment - Flood Consequence Assessment, Ref. 4447 FCA, April 2019 (public copy checked via Brighter Futures Stakeholder Hub).
- HSE guidance on managing risk, COSHH, Legionella, welding fume/LEV/RPE, violence/lone working, work equipment, electrical equipment, ladders, DSE and first aid; Welsh Government fire-safety guidance. Site-specific competent assessment and current controlled records take precedence.

Appendix B - Consolidation decisions

- The historic 2023 electrical action has been treated as closed/monitor because Brighter Futures confirmed completion by Roberts Electrical and Wynne Edwards Electrical; the next EICR/reinspection is kept as a separate maintenance item.
- The 2024 gas hazard has been treated as eliminated/closed because the former supply was reported capped by British Gas / Energy Networks; reassessment is required before any reinstatement.
- The January 2024 ball-stop-netting installation is recorded as closed and converted to a routine inspection control rather than an outstanding action.
- Fire remains an open priority because the public FRA is dated 22 July 2024, required annual competent review, and contains significant first-floor and building-fire actions whose closure has not been evidenced in the material reviewed.
- Kitchen, Workshop and Kids/Youth detail is controlled through the linked assessments. The General Assessment records only the interface risks and approval-critical actions to avoid conflicting duplicate controls.
- Recommended 5 x 5 risk scores are management recommendations for verification, not retrospective claims about conditions that were not physically inspected.

Appendix C - Status definitions

Status	Meaning
OPEN	Action/evidence remains to be completed or verified.
MONITOR	Control is in place but requires scheduled checks or evidence retention.
CLOSED / MONITOR	Historic action is closed; ongoing routine control remains.
CLOSED	Action is complete; retain evidence and reassess only if conditions change.

PREVIOUS ASSESMENT:

General Assessment - last check/review: 19/02/2026

This is the statement of general policy and arrangements for:	Brighter Futures Community Facility
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Overall and final responsibility for health and safety is that of:	Shane Owen
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Day-to-day responsibility for ensuring this policy is put into practice is delegated to:	Employees
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Statement of general policy	Responsibility of	Action / Arrangements
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As detailed within the Health & Safety Policy	HSE and all employees on duty.	Relevant risk assessments completed and actions arising out of those assessments implemented. Risk assessments reviewed regularly by HSC and employees.
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To provide adequate training to ensure employees are competent to do their work.	HSC to ensure annual training and CPD. Training plan/matrix reviewed annually. Volunteer coordinator to provide induction, training and CPD to volunteers.	Staff and volunteers are given necessary health and safety induction and provided with appropriate training. Additional training on job specific roles is provided to all staff.
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To engage and consult with employees on day-to-day health and safety conditions and provide advice and supervision on occupational health	HSC	Staff routinely consulted on health and safety matters as they arise at regular team meetings and via reporting/review of near misses and accidents.
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To implement emergency procedures - evacuation in case of fire or other significant incident. See fire and flood risk assessments on our website.	Designated Fire Safety Officers/marshal's Checks recorded in the fire log by caretaker Fire Risk assessment by Adrian Townsend (QTS)	Escape routes well signed and kept clear at all times. Emergency lighting and fire warning system checked regularly. Evacuation plans are tested from time to time and updated as necessary, then recorded in fire log book.
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To maintain safe and healthy working conditions, provide and maintain plant, equipment and machinery, and ensure safe storage / use of substances	HSC with partnership from employees for each activity	Toilets, washing facilities and drinking water provided. System in place for routine inspections and testing of equipment and machinery and for ensuring that action is promptly taken to address any defects. Staff trained in various topics under H&S. All policies and guidance available both on-site and on-line
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Health and safety law posters are displayed:	Office, Kitchen & Workshop
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First-aid box's and accident books are located: Accidents and ill health at work reported under RIDDOR: (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) (see note 2 below)	Main room (bar), kitchen, office and workshop
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Signed:	SA Owen	Date:	14 - 02 - 2026
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Subject to review, monitoring and revision by:	HSC and Trustees	Every:	12	months or sooner if work activity changes
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Brighter Futures: General Assessment

What are the hazards?	Who might be harmed and how?	What are you already doing?	Do you need to do anything else to manage this risk?	Action by whom?	Action by when?	Score
Slips and trips	Staff, volunteers and visitors may be injured if they trip over objects or slip on spillages	General good housekeeping. All areas are well lit including stairs. There are no trailing leads or cables. Areas kept clear (e.g. no boxes left in walkways). Spillages cleaned promptly, wet floor signs utilised. Floors and carpets maintained in good condition. Daily checks are completed and recorded by employees prior to opening.	Ensure all are aware of their responsibilities for pre session checks and completion of session plans. Ensure building caretaker undertakes daily checks and records findings. Ensure the building repair schedule is monitored on a regular basis at Trustee meetings.		Every 12 months for policy review and monthly internal audits.	4
Fire & Flood	Staff, volunteers and visitors/. Potential fatal injuries from burns and/or smoke inhalation.	Regular checks of emergency lighting, alarm system and firefighting equipment. Practice evacuations. Fire risk assessment, management and recovery plan in place. Text and email flood warnings received on works devices from NRW. Flood plan and flood	Staff training courses are currently up to date with CPD planned. Ensure actions highlighted in Fire and Flood assessments are adhered to. Continue to work with QTS on ensuring the Fire Risk Assessment recommendations are completed.	HSC to monitor and review training annually. HSC to work through action points within the FRA and consult with Andrian if required.	Every 12 months for policy review and monthly internal audits.	4

		consequences assessment completed				
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Asbestos	Staff, volunteers and visitors through inhaling fibers.	Checked during refurbishment of building and Risk Report completed by J B Monitor.	No further action required, refer to Asbestos report as required. (report is online and in the office.	HSC to review and/or inform workers on the report contents.	Review prior to any external works being completed to the rear of the property	2
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Manual handling	Staff, volunteers and visitors.	Trolleys and lifts are available to move heavy objects. Staff and volunteers trained in correct lifting techniques. Ergonomics training provided for IT users.	No further action required.		Review annually	4
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Stored equipment / Falling objects	Staff, volunteers and visitors.	All aware of correct techniques for storage and removal to minimize toppling hazard. Heavy objects stored at low levels.	No further action required.		Review annually	2
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Hazardous substances	Anybody cleaning may risk skin irritation or eye damage. Vapors may cause respiratory issues.	Cleaning equipment clearly labelled, including irritant information and correct dilution strengths. COSHH paperwork/data sheets available PPE equipment available to minimise contact. Products stored securely in cleaning cupboard. paint kept in locked COSHH cupboard.	Monitoring of cleaners, encouraging them to report issues (e.g. skin irritations). Ensuring correct POE equipment is always available. Updating of policy if change of products. Replacement of 'irritant' products as much as possible.	Cleaner to ensure items are stored in lockable cupboards each morning and data sheets kept for any items that are new to be filed on OneDrive.	Review Monthly (report from Cleaner to Trustees).	4
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Electricity	Staff, volunteers and visitors. Risk of electric shocks and burns from faulty equipment and sockets.	Original installation and ongoing repairs completed by qualified electrician. Recent EICR inspection completed and works to address issues are being undertaken as funds allow. Portable equipment checked prior to any usage. Regular checks completed by staff and volunteers. PAT testing completed on an annual basis and items marked accordingly. Staff and volunteers aware of location of fuse box and cut off. DC power is clearly labelled (Solar install). Electrical Safety Training provided to key staff.	Continual monitoring of equipment, sockets and cables to ensure in good repair by staff. Contact details of emergency electrician made available to all who may require it. EICR recommendations to all be completed by December 2023	HSC to source funding to complete all recommendations from the EIRC and progress to be reported to Trustees on a monthly basis.		6
Working at height (e.g. changing lightbulbs)	Staff, volunteers and visitors may cause themselves injury through falling from height through use of incorrect equipment or misuse of ladder.	Appropriate stepladder available. Staff and volunteers made aware of correct usage, including pre-use checks. Instructions for safe usage available on side of ladder. Working at height training provided to staff. Where possible external contractors used for WAH	No further action required.	Ladder and LOLER safety training to be updated with Caretaker before winter. (HSC research possible drone purchase for gutter inspections)	Review in Nov 2023	6

Violence and threatening behaviour	Staff, volunteers may suffer assault, threats and abuse from members of the public entering the building.	Staff trained to provide a polite, non-confrontational service. Use of entry system and self-locking front door to minimise risk. Contact details retained from all bookings/visitors and organisation who use the facilities. Personal alarms provided to staff Group contracts and rules displayed at sessions.	Report any incidents to the police and keep a log on-site. Conflict and de-escalation training should be renewed at next staff training event.	HSC to review with staff at team meetings.		4
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Kitchen Risk Assessment

What are the hazards?	Who might be harmed and how?	What are you already doing?	Do you need to do anything else to manage this risk?	Action by whom?	Action by when?	Score
Slips and trips	Kitchen users may be injured if they trip over objects or slip on spillages	General good housekeeping – goods and equipment stored safely. There are no trailing leads or cables. Spillages cleaned promptly, wet floor signs utilised. Floor maintained in good condition. Kitchen equipment maintained to minimise leaks. Suitable cleaning materials available. Appropriate footwear worn by users.	Ensure all are aware of their responsibilities. Continue regular inspections and record findings.			4

Fire	Kitchen users may suffer from fatal injuries from burns and/or smoke inhalation.	Regular checks of emergency lighting, alarm system and fire fighting equipment. Practice evacuations. Fire risk assessment, management and recovery plan in place. Fire blankets in place and serviced regularly	Staff fire safety training courses provided. Ensure actions highlighted in separate fire risk assessment are adhered to. Ensure all equipment unplugged when not in use.			4
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Knives / other sharp kitchen equipment	Kitchen users may suffer from cuts	All trained to use equipment properly. Equipment stored safely when not in use. First aid box available. Access to knives restricted to staff and approved volunteers only.	No further action required.			6
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Manual handling of heavy or bulky items	Kitchen users may injure back through poor lifting technique.	Trolleys and lift available to move heavy objects. Staff and volunteers trained on correct lifting techniques.	No further action required.			2
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Stored equipment / goods	All kitchen users	All aware of correct techniques for storage and removal to minimise toppling hazard. Heavy objects stored at low levels. Stock rotation is monitored by Catering staff weekly. 2 step ladder located in the store room.	No further action required.			2
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Hazardous substances	Anybody cleaning may risk skin irritation or eye damage. Vapours may cause respiratory issues.	Cleaning equipment clearly labelled, including irritant information and correct dilution strengths. COSHH paperwork / Data Sheets available. All equipment available to minimise contact. Products stored securely.	Monitoring of cleaners, encouraging them to report issues (e.g. skin irritations). Ensuring correct equipment always available. Updating of policy if change of products. Replacement of 'irritant' products as much as possible.			4
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Electricity	All kitchen users at risk of electric shocks and burns from faulty equipment and sockets.	Original installation and ongoing repairs completed by qualified electrician. Portable equipment checked prior to any usage. Regular checks completed by staff and volunteers. PAT	Continual monitoring of equipment, sockets and cables to ensure in good repair by staff. Contact details of emergency electrician made available to all who			4
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		testing completed on an annual basis and items marked accordingly. Staff and volunteers aware of location of fuse box and how to switch off electricity supply in case of emergency. All equipment and sockets checked to ensure they are compatible with a kitchen environment.	may require it.			
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Working at height (e.g. changing lightbulbs, reaching high shelves)	Staff, volunteers and visitors may cause themselves injury through falling from height through use of incorrect equipment or misuse of ladder.	Appropriate stepladder available. Staff and volunteers made aware of correct usage, including pre-use checks. Instructions for safe usage available on side of ladder.	No further action required.			2
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Contact with hot oil, hot surfaces or steam	Kitchen users may suffer from scalding or burn-related injuries.	All trained in risks of release of steam and hot oil usage, emptying and storage. Heat-resistant gloves and first aid burns kit provided. Potential hot water risks highlighted by taps. Use of long-sleeved attire	Ensure equipment is well-maintained (e.g. pan handles). Potential sources of heat clearly marked (e.g. water boiler, hot taps).			4
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		encouraged.				
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Workplace temperature	Kitchen users may suffer from ill health if they overheat in hot working conditions	Extractors in use to control air temperature. Chilled Drinking water available. Air fans available as required. Various work clothing provided following PPE audits every six months.	No further action required.			2
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Gas appliances	Kitchen users at risk of serious/fatal injuries caused by explosion or release of harmful gas.	Appliances checked prior to use, and monitored during. All users made aware of location of gas isolation tap and how to switch supply off in case of emergency. Equipment inspections carried out on an annual basis	No further action required.	NOTE: All gas items now removed, Gas supply to be capped in August/Sept 2023 by British Gas.		
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Food preparation	Kitchen users at risk of poisoning themselves or others	Good practice is followed using SFBB. All equipment and surfaces thoroughly cleaned after use with appropriate products. Food is stored safely, with particular attention paid to high-risk products (meat and dairy stored appropriately in fridge). Food heated to sufficient temperature and stored out of the 'danger zone'. All users are informed of standards and safety requirements prior to	Maintenance of standards and regular monitoring. Denbighshire Food Hygiene team asked to attend and support BF with advice and guidance.			2
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		commencement.				
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Yard Risk Assessment

What are the hazards?	Who might be harmed and how?	What are you already doing?	Do you need to do anything else to manage this risk?	Action by whom?	Action by when?	Score
Slips and trips	Staff and users	General good housekeeping – goods and equipment stored safely. There are no trailing leads or cables. Spillages cleaned promptly, wet floor signs utilised. Ice melting salts onsite, Floor maintained in good condition. Ramps in place for steps Rails installed where required None slip following installed on potentially slipper surfaces. Step and ramp to multiport area has none slip added. Weather check prior to use by group leaders. Water drainage installed	Ensure all are aware of their responsibilities. Leaders to check prior to all sessions	Staff to check prior to all sessions. Ball stop netting to be purchased and installed	Dec 2023	4

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Manual handling of heavy or bulky items	Users may injure back through poor lifting technique.	Trolleys and lift available to move heavy objects. Staff and volunteers trained on correct lifting techniques.	No further action required.			2
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First floor and Loft Risk Assessment

What are the hazards?	Who might be harmed and how?	What are you already doing?	Do you need to do anything else to manage this risk?	Action by whom?	Action by when?	Score
Slips and trips	users may be injured if they trip over objects or slip on spillages	General good housekeeping Stair nosing fitted Handrail installed to stairs Loft stairs fitted with safety rails Lighting fitted into loft	Ensure all are aware of their responsibilities.			2

Fire (all areas) – also see FRA	Users may suffer from fatal injuries from burns and/or smoke inhalation if they can not evacuate the facility.	Regular checks of emergency lighting, alarm system and fire fighting equipment. Practice evacuations. Fire risk assessment, management and recovery plan in place.	Staff fire safety training courses provided. Fire rated doors fitted. Evacuation Chair located upstairs. Windows open outwards to flat roof Emergency ladder in office. Automatic extinguisher located under stairs. Fire extinguishers located throughout. Fire Blankets in Kitchen. Regular checks for combustibles.	FRA to be renewed	As funds allow (Ideal summer 2026)	4
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