



## Youth Protection Program Facility Risk Assessment

Program Directors/Coordinators shall review the appropriate items below to identify hazards, improvements, and corrections.

Name of Program: \_\_\_\_\_ Date(s) of Program: \_\_\_\_\_

Location of Program: \_\_\_\_\_

Facility evaluation (Section 1) should be completed by ALL program leaders. Note: Some programs may need to complete additional sections.

1. Facility Evaluation Date Completed: \_\_\_\_\_

- a. Identify all slip, trip and fall hazards.
- b. Identify electrical outlet hazards if pre-elementary age participating.
- c. Ensure proper heating, cooling and ventilation.
- d. Identify any low hanging sharp objects/edges.
- e. Verify cabinets are secured and locked.
- f. Verify egress ability to get in and out of the room.
- g. Verify bathroom facilities are available and age appropriate.
- h. Determine emergency evacuation procedures.

2. Mentoring/Instructing Minors: Date Completed: \_\_\_\_\_

Complete this section if your program requires one-on-one participation with a youth:

- a. Verify the room is in full view from outside.
- b. Verify a window opening must exist and allow full view into the room when there is only one adult present and/or the door is closed.

3. Laboratories: Date Completed: \_\_\_\_\_

- a. Contact Environmental Health & Safety (EHS) for approval of the program.
- b. Verify all Material Safety Data Sheet (MSDS).
- c. Verify all chemicals that are not in use are secured and locked in appropriate cabinets.
- d. Verify if rooms need to be de-contaminated after completion of the program.
- e. Insure appropriate Personal Protective Equipment (PPE) has been provided.

4. Athletics: Date Completed: \_\_\_\_\_

- a. All equipment is in good working order and age appropriate.

List hazards found and date of repairs, if applicable. Attach additional pages, if needed.

Hazard:		Date Completed:	
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