

# SCOUTS CANADA

## MEETING SPACE RISK ASSESSMENT CHECKLIST

### NOTE TO GROUP COMMISSIONERS:

Under BP&P, Section 2003.4 (v) 5

It is the responsibility of the Sponsor/Partner Organization, **"to ensure adequate meeting facilities are provided for the Group"**.

A Group Commissioner should conduct a Meeting Space Risk Assessment twice each year. Findings should be shared with the head of the Building/Facility/Institution, and plans should be made to correct hazards if any are found.

### GROUP INFORMATION (Please print clearly)

Group: \_\_\_\_\_ Area: \_\_\_\_\_ Council: \_\_\_\_\_  
Group Number and Name

### BUILDING/FACILITY INFORMATION (Please print clearly)

Name of Building/Facility: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Telephone Location: \_\_\_\_\_ Accessible YES NO Emergency # YES NO

### THE MEETING ROOM (Check those that apply)

- |   |            |                                |  |     |     |               |     |     |              |     |     |                  |     |     |      |     |     |        |     |     |                            |     |     |                          |   |            |           |  |     |     |                    |     |     |                        |     |     |                        |     |     |                             |     |     |                                |     |     |                         |
|---|------------|--------------------------------|--|-----|-----|---------------|-----|-----|--------------|-----|-----|------------------|-----|-----|------|-----|-----|--------|-----|-----|----------------------------|-----|-----|--------------------------|---|------------|-----------|--|-----|-----|--------------------|-----|-----|------------------------|-----|-----|------------------------|-----|-----|-----------------------------|-----|-----|--------------------------------|-----|-----|-------------------------|
| <table border="0"> <tr><td><b>YES</b></td><td><b>NO</b></td><td></td></tr> <tr><td>___</td><td>___</td><td>Large Enough?</td></tr> <tr><td>___</td><td>___</td><td>Well Heated?</td></tr> <tr><td>___</td><td>___</td><td>Well Ventilated?</td></tr> <tr><td>___</td><td>___</td><td>Dry?</td></tr> <tr><td>___</td><td>___</td><td>Clean?</td></tr> <tr><td>___</td><td>___</td><td>Windows in Good Condition?</td></tr> <tr><td>___</td><td>___</td><td>Floor in Good Condition?</td></tr> </table> | <b>YES</b> | <b>NO</b>                      |  | ___ | ___ | Large Enough? | ___ | ___ | Well Heated? | ___ | ___ | Well Ventilated? | ___ | ___ | Dry? | ___ | ___ | Clean? | ___ | ___ | Windows in Good Condition? | ___ | ___ | Floor in Good Condition? | <table border="0"> <tr><td><b>YES</b></td><td><b>NO</b></td><td></td></tr> <tr><td>___</td><td>___</td><td>Adequate Lighting?</td></tr> <tr><td>___</td><td>___</td><td>Hand Washing Facility?</td></tr> <tr><td>___</td><td>___</td><td>Clean Toilet Facility?</td></tr> <tr><td>___</td><td>___</td><td>Sanitary Drinking Facility?</td></tr> <tr><td>___</td><td>___</td><td>Emergency Flashlights on Hand?</td></tr> <tr><td>___</td><td>___</td><td>First Aid Kits on Hand?</td></tr> </table> | <b>YES</b> | <b>NO</b> |  | ___ | ___ | Adequate Lighting? | ___ | ___ | Hand Washing Facility? | ___ | ___ | Clean Toilet Facility? | ___ | ___ | Sanitary Drinking Facility? | ___ | ___ | Emergency Flashlights on Hand? | ___ | ___ | First Aid Kits on Hand? |
| <b>YES</b>  | <b>NO</b>  |                                |  |     |     |               |     |     |              |     |     |                  |     |     |      |     |     |        |     |     |                            |     |     |                          |   |            |           |  |     |     |                    |     |     |                        |     |     |                        |     |     |                             |     |     |                                |     |     |                         |
| ___   | ___        | Large Enough?                  |  |     |     |               |     |     |              |     |     |                  |     |     |      |     |     |        |     |     |                            |     |     |                          |   |            |           |  |     |     |                    |     |     |                        |     |     |                        |     |     |                             |     |     |                                |     |     |                         |
| ___   | ___        | Well Heated?                   |  |     |     |               |     |     |              |     |     |                  |     |     |      |     |     |        |     |     |                            |     |     |                          |   |            |           |  |     |     |                    |     |     |                        |     |     |                        |     |     |                             |     |     |                                |     |     |                         |
| ___   | ___        | Well Ventilated?               |  |     |     |               |     |     |              |     |     |                  |     |     |      |     |     |        |     |     |                            |     |     |                          |   |            |           |  |     |     |                    |     |     |                        |     |     |                        |     |     |                             |     |     |                                |     |     |                         |
| ___   | ___        | Dry?                           |  |     |     |               |     |     |              |     |     |                  |     |     |      |     |     |        |     |     |                            |     |     |                          |   |            |           |  |     |     |                    |     |     |                        |     |     |                        |     |     |                             |     |     |                                |     |     |                         |
| ___   | ___        | Clean?                         |  |     |     |               |     |     |              |     |     |                  |     |     |      |     |     |        |     |     |                            |     |     |                          |   |            |           |  |     |     |                    |     |     |                        |     |     |                        |     |     |                             |     |     |                                |     |     |                         |
| ___   | ___        | Windows in Good Condition?     |  |     |     |               |     |     |              |     |     |                  |     |     |      |     |     |        |     |     |                            |     |     |                          |   |            |           |  |     |     |                    |     |     |                        |     |     |                        |     |     |                             |     |     |                                |     |     |                         |
| ___   | ___        | Floor in Good Condition?       |  |     |     |               |     |     |              |     |     |                  |     |     |      |     |     |        |     |     |                            |     |     |                          |   |            |           |  |     |     |                    |     |     |                        |     |     |                        |     |     |                             |     |     |                                |     |     |                         |
| <b>YES</b>  | <b>NO</b>  |                                |  |     |     |               |     |     |              |     |     |                  |     |     |      |     |     |        |     |     |                            |     |     |                          |   |            |           |  |     |     |                    |     |     |                        |     |     |                        |     |     |                             |     |     |                                |     |     |                         |
| ___   | ___        | Adequate Lighting?             |  |     |     |               |     |     |              |     |     |                  |     |     |      |     |     |        |     |     |                            |     |     |                          |   |            |           |  |     |     |                    |     |     |                        |     |     |                        |     |     |                             |     |     |                                |     |     |                         |
| ___   | ___        | Hand Washing Facility?         |  |     |     |               |     |     |              |     |     |                  |     |     |      |     |     |        |     |     |                            |     |     |                          |   |            |           |  |     |     |                    |     |     |                        |     |     |                        |     |     |                             |     |     |                                |     |     |                         |
| ___   | ___        | Clean Toilet Facility?         |  |     |     |               |     |     |              |     |     |                  |     |     |      |     |     |        |     |     |                            |     |     |                          |   |            |           |  |     |     |                    |     |     |                        |     |     |                        |     |     |                             |     |     |                                |     |     |                         |
| ___   | ___        | Sanitary Drinking Facility?    |  |     |     |               |     |     |              |     |     |                  |     |     |      |     |     |        |     |     |                            |     |     |                          |   |            |           |  |     |     |                    |     |     |                        |     |     |                        |     |     |                             |     |     |                                |     |     |                         |
| ___   | ___        | Emergency Flashlights on Hand? |  |     |     |               |     |     |              |     |     |                  |     |     |      |     |     |        |     |     |                            |     |     |                          |   |            |           |  |     |     |                    |     |     |                        |     |     |                        |     |     |                             |     |     |                                |     |     |                         |
| ___   | ___        | First Aid Kits on Hand?        |  |     |     |               |     |     |              |     |     |                  |     |     |      |     |     |        |     |     |                            |     |     |                          |   |            |           |  |     |     |                    |     |     |                        |     |     |                        |     |     |                             |     |     |                                |     |     |                         |

### THE EXITS (Check those that apply)

- |  |            |  |  |     |     |  |     |     |                                 |     |     |                         |     |     |                     |  |            |           |  |     |     |                       |     |     |                     |     |     |                      |
|--|------------|--|--|-----|-----|--|-----|-----|---------------------------------|-----|-----|-------------------------|-----|-----|---------------------|--|------------|-----------|--|-----|-----|-----------------------|-----|-----|---------------------|-----|-----|----------------------|
| <table border="0"> <tr><td><b>YES</b></td><td><b>NO</b></td><td></td></tr> <tr><td>___</td><td>___</td><td>Two or more emergency exits available?</td></tr> <tr><td>___</td><td>___</td><td>Unlocked and easily accessible?</td></tr> <tr><td>___</td><td>___</td><td>Sufficiently far apart?</td></tr> <tr><td>___</td><td>___</td><td>Crash bar on doors?</td></tr> </table> | <b>YES</b> | <b>NO</b>                              |  | ___ | ___ | Two or more emergency exits available? | ___ | ___ | Unlocked and easily accessible? | ___ | ___ | Sufficiently far apart? | ___ | ___ | Crash bar on doors? | <table border="0"> <tr><td><b>YES</b></td><td><b>NO</b></td><td></td></tr> <tr><td>___</td><td>___</td><td>Exit signs installed?</td></tr> <tr><td>___</td><td>___</td><td>Exit signs lighted?</td></tr> <tr><td>___</td><td>___</td><td>All doors swing out?</td></tr> </table> | <b>YES</b> | <b>NO</b> |  | ___ | ___ | Exit signs installed? | ___ | ___ | Exit signs lighted? | ___ | ___ | All doors swing out? |
| <b>YES</b>   | <b>NO</b>  |  |  |     |     |  |     |     |                                 |     |     |                         |     |     |                     |  |            |           |  |     |     |                       |     |     |                     |     |     |                      |
| ___  | ___        | Two or more emergency exits available? |  |     |     |  |     |     |                                 |     |     |                         |     |     |                     |  |            |           |  |     |     |                       |     |     |                     |     |     |                      |
| ___  | ___        | Unlocked and easily accessible?        |  |     |     |  |     |     |                                 |     |     |                         |     |     |                     |  |            |           |  |     |     |                       |     |     |                     |     |     |                      |
| ___  | ___        | Sufficiently far apart?                |  |     |     |  |     |     |                                 |     |     |                         |     |     |                     |  |            |           |  |     |     |                       |     |     |                     |     |     |                      |
| ___  | ___        | Crash bar on doors?                    |  |     |     |  |     |     |                                 |     |     |                         |     |     |                     |  |            |           |  |     |     |                       |     |     |                     |     |     |                      |
| <b>YES</b>   | <b>NO</b>  |  |  |     |     |  |     |     |                                 |     |     |                         |     |     |                     |  |            |           |  |     |     |                       |     |     |                     |     |     |                      |
| ___  | ___        | Exit signs installed?                  |  |     |     |  |     |     |                                 |     |     |                         |     |     |                     |  |            |           |  |     |     |                       |     |     |                     |     |     |                      |
| ___  | ___        | Exit signs lighted?                    |  |     |     |  |     |     |                                 |     |     |                         |     |     |                     |  |            |           |  |     |     |                       |     |     |                     |     |     |                      |
| ___  | ___        | All doors swing out?                   |  |     |     |  |     |     |                                 |     |     |                         |     |     |                     |  |            |           |  |     |     |                       |     |     |                     |     |     |                      |

### IF ROOM IS ABOVE FIRST FLOOR (Check those that apply)

- |  |            |   |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |
|--|------------|---|--|-----|-----|---|-----|-----|---|-----|-----|------------------------|-----|-----|--------------------------|-----|-----|-------------------|-----|-----|-------------------------------------|-----|-----|--------------------------|--|------------|-----------|--|-----|-----|--------------------------|-----|-----|--------------------|-----|-----|------------------------------------|-----|-----|--------------------------------|-----|-----|-----------------------------|-----|-----|-----------------------------------|-----|-----|------------------------|
| <table border="0"> <tr><td><b>YES</b></td><td><b>NO</b></td><td></td></tr> <tr><td>___</td><td>___</td><td>Close to stairs (less than 100 feet/30m)?</td></tr> <tr><td>___</td><td>___</td><td>Doors and stairs unobstructed, litter free?</td></tr> <tr><td>___</td><td>___</td><td>Stairs in good repair?</td></tr> <tr><td>___</td><td>___</td><td>Stair handrail provided?</td></tr> <tr><td>___</td><td>___</td><td>Stairway lighted?</td></tr> <tr><td>___</td><td>___</td><td>Stairs wide enough for two persons?</td></tr> <tr><td>___</td><td>___</td><td>Floor in Good Condition?</td></tr> </table> | <b>YES</b> | <b>NO</b>                                   |  | ___ | ___ | Close to stairs (less than 100 feet/30m)? | ___ | ___ | Doors and stairs unobstructed, litter free? | ___ | ___ | Stairs in good repair? | ___ | ___ | Stair handrail provided? | ___ | ___ | Stairway lighted? | ___ | ___ | Stairs wide enough for two persons? | ___ | ___ | Floor in Good Condition? | <table border="0"> <tr><td><b>YES</b></td><td><b>NO</b></td><td></td></tr> <tr><td>___</td><td>___</td><td>Carpet or treads secure?</td></tr> <tr><td>___</td><td>___</td><td>Stairway enclosed?</td></tr> <tr><td>___</td><td>___</td><td>Enclosures fitted with fire doors?</td></tr> <tr><td>___</td><td>___</td><td>Outside fire escape installed?</td></tr> <tr><td>___</td><td>___</td><td>Fire escape in good repair?</td></tr> <tr><td>___</td><td>___</td><td>Fire escape used for fire drills?</td></tr> <tr><td>___</td><td>___</td><td>Wheel Chair Accessible</td></tr> </table> | <b>YES</b> | <b>NO</b> |  | ___ | ___ | Carpet or treads secure? | ___ | ___ | Stairway enclosed? | ___ | ___ | Enclosures fitted with fire doors? | ___ | ___ | Outside fire escape installed? | ___ | ___ | Fire escape in good repair? | ___ | ___ | Fire escape used for fire drills? | ___ | ___ | Wheel Chair Accessible |
| <b>YES</b>   | <b>NO</b>  |   |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |
| ___  | ___        | Close to stairs (less than 100 feet/30m)?   |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |
| ___  | ___        | Doors and stairs unobstructed, litter free? |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |
| ___  | ___        | Stairs in good repair?                      |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |
| ___  | ___        | Stair handrail provided?                    |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |
| ___  | ___        | Stairway lighted?                           |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |
| ___  | ___        | Stairs wide enough for two persons?         |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |
| ___  | ___        | Floor in Good Condition?                    |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |
| <b>YES</b>   | <b>NO</b>  |   |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |
| ___  | ___        | Carpet or treads secure?                    |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |
| ___  | ___        | Stairway enclosed?                          |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |
| ___  | ___        | Enclosures fitted with fire doors?          |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |
| ___  | ___        | Outside fire escape installed?              |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |
| ___  | ___        | Fire escape in good repair?                 |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |
| ___  | ___        | Fire escape used for fire drills?           |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |
| ___  | ___        | Wheel Chair Accessible                      |  |     |     |   |     |     |   |     |     |                        |     |     |                          |     |     |                   |     |     |                                     |     |     |                          |  |            |           |  |     |     |                          |     |     |                    |     |     |                                    |     |     |                                |     |     |                             |     |     |                                   |     |     |                        |



# SCOUTS CANADA MEETING SPACE RISK ASSESSMENT CHECKLIST

## FIRE PROTECTION (Check those that apply)

YES NO

- Portable extinguisher available and properly located
- Extinguisher is suitable for the following types of fires:  
A. Ordinary combustibles  
B. Flammable liquids  
C. Electrical equipment
- Extinguisher ready for use? (should be tagged to show inspection within one year)
- Any hazard from rubbish or flammable material?
- Any hazard from oily rags or mops? (spontaneous combustion)
- Smoke alarm system installed and tested?

YES NO

- Heating system inspected within a year?
- Walls, ceilings, floors protected from stoves or pipes overheating?
- Open fireplaces protected by screens?
- Electric wiring, switches, extension cords in good repair?
- Accessible telephone in building?
- Fire department number posted?
- Location of nearest fire alarm known to all members?
- Alarm procedure taught to members?

## FIRE DRILL (Check those that apply)

YES NO

- Has the Section a plan for conducting fire drills?
- Is a fire plan posted?
- Are fire evacuation drills practiced frequently?
- Was a drill demonstrated or taught to members beginning of every season?

YES NO

- Are members able to evacuate building if filled with smoke or if lights go out?
- Do training drills include use of alternate exits?
- Are members trained in home fire safety plan and exit drill?
- Are members aware of evacuation procedures?

## BUILDING EVACUATION (Check those that apply)

YES NO

- Does the Group have plans for likely natural disasters?
- Does the Group have emergency plans/drills for likely extreme weather conditions?
- Does the Section Lead have an Emergency Go Bag which should include a Registration list?
- Does the Section Lead have a phone tree in order to contact the parents?

YES NO

- Are members aware of evacuation procedures?
- Do members know of the 4 Evacuation Rules: Don't Talk! Don't Push! Don't run! Don't turn back!
- Do members know where the Emergency Assembly Area (EAA) is?
- Have members practiced going to the Emergency Assembly Area (EAA)?

## RECOMMENDATIONS (Please print clearly)

Write your detailed recommendations below (or on a separate sheet attached to this report.) Please note any other conditions which are hazardous to health, personal safety, or fire safety.



**SIGNATURES** (Please print clearly)

**RISK ASSESSORS** Name \_\_\_\_\_ Signature \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_

**SECTION SCOUTER  
IN ATTENDANCE**

Name \_\_\_\_\_ Date of Risk Assessment \_\_\_\_\_

**SPONSOR/PARTNER RECORD** (Please print clearly)

Did the chartered organization representative participate in the Meeting Space Risk Assessment?  YES  NO

Report Reviewed by:

\_\_\_\_\_  
Name of Sponsor/Partner Representative

\_\_\_\_\_  
Name of Sponsor/Partner Organization

\_\_\_\_\_  
Group Commissioner

**ACTION TAKEN** (Please print clearly)

[Large empty box for recording action taken]

