THE DOJO WOKING
Risk Action Plan

拳 真 会

Date of risk review……..

Compiled by…… Date…….

Function/activity…….

Reviewed by…… Date……

Risk (from risk assessment)	**Actions to treat risk**	**Person responsible**	**Timetable for implementation**	**Monitoring of risk**
e.g. Tripping and falling onto a hard surface	*e.g. Remove any object that can cause slip trip or fall. Make participants aware of dangers e.g. slipping, tripping*	*e.g. John Smith (coach)*	*e.g. remove objects before sessions. Make participants aware before and during*	*e.g. Needs to be assessed before every session.*