**Outdoor Safety Checklist**

**Week commencing:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday**  |
| **All Gates are locked**  |  |  |  |  |  |
| **Resources in working order/ clean including, toys, fences, bikes etc** |  |  |  |  |  |
| **Exits are clear**  |  |  |  |  |  |
| **Litter has been collected** |  |  |  |  |  |
| **Water puddles have been removed** |  |  |  |  |  |
| **Experiences are set up safely with soft fall mats being used**  |  |  |  |  |  |
| **Walking tracks are clear**  |  |  |  |  |  |
| **Drains are covered** |  |  |  |  |  |
| **Water is accessible**  |  |  |  |  |  |
| **Sandpit is free from animal droppings and debris / covers removed and stored safely** |  |  |  |  |  |
| **Outdoor spaces are free from harmful insects and vermin** |  |  |  |  |  |
| **Area is free from tripping hazards**  |  |  |  |  |  |
| **Nothing near fences that children can climb over**  |  |  |  |  |  |
| **Follow up / actions to be taken**  |  |  |  |  |  |
| **Signature**  |  |  |  |  |  |