

DRIVER CPC VENUE/FACILITIES CHECKLIST

This form should be used to ensure training venues are to the required standard **prior to use**. This may not be suitable for all organisations/premises and members should ensure they adapt this form as necessary or create a version suitable for their purposes.

Consortium Member Name:

Date:

Venue Address:

Venue Postcode:

Venue Contact:

Venue Telephone:

Email:

General Requirements

Description	Yes	No	Comments
1. Insurance (displayed/available)			
2. HASAWA Abstract (displayed)			
3. Health & Safety Policy (available)			
4. Safe Systems of Operations (available)			
5. Emergency Evacuation (displayed)			
6. Fire Exits (marked & identified)			
7. First Aid & Emergency Notice (displayed)			
8. First Aiders' Names (displayed)			
9. Location of First Aid Box (identified)			
10. Refreshment Facilities			
11. Traffic Routes/Pedestrian Segregation			

Theory Training Facilities

Description	Yes	No	Comments
1. Exclusive use			
2. Location close to practical area			
3. Safe environment, access/egress			
4. Adequate, good natural lighting			
5. No disturbance to trainees/No noise			
6. Sufficient tables and chairs with room to manoeuvre, which provide drivers with a comfortable learning environment.			
7. Suitable training aids:			
8. Emergency exits unobstructed			
9. Adequate heating and ventilation			
10. Environment is professional and conducive to learning			
11. Recorded risk assessment completed satisfactorily			