

DINNING AREA:	Monday	Tuesday	Wednesday	Thursday	Friday

CONSERVATORY:	Monday	Tuesday	Wednesday	Thursday	Friday
OUTSIDE PLAY SPACE:	Monday	Tuesday	Wednesday	Thursday	Friday

Have any actions been identified from the daily check list? YES / NO

Please give details

Have you reviewed your fixed risk assessment regarding the actions identified from the daily check list YES/ NO

Please give details

Signed (Childminder): Print name:

Date