

HEALTH & SAFETY SELF EVALUATION FORM

Establishment Action Plan

Section of Self Evaluation, e.g. Policy	Shortcoming in arrangements identified	Action to be taken by establishments to rectify shortcoming	Who is to ensure action is to be taken	Priority for Action (H/M/L)	Date shortcoming to be rectified by
T 5	H&S training register not up to date	Update register	RO	M	01-03-20
A 5	Duty holder not completed training	RO to attend asbestos training	RO	H	31-12-19
PS 1/2/3	Clarification required on whether appropriate systems are in place for pressure systems	Ensure protocols and systems are up to date for pressure systems	RO	L	01-05-20
WAH 6	Clarification on working at height training	Ensure that all appropriate staff have completed appropriate working at height training	RO	M	01-05-19

WHEN COMPLETE, A COPY OF THIS ACTION PLAN MUST BE RETURNED TO: CAYA HEALTH & SAFETY SECTION, C BLOCK, CHATSWORTH HALL, MATLOCK DE4 3FW; Fax No. 01629 536435; email alexandra.whitehead@derbyshire.gov.uk / maggie.beck@derbyshire.gov.uk

Action Plan completed by: RICHARD ORMISTON

Action Plan Agreed by (Headteacher/ Manager/Safety Champion): RICHARD ORMISTON

Date: 24-10-19

Action Plan Signed off as completed by: _____

Date: _____