|  |  |  |  |
| --- | --- | --- | --- |
| Dept/Lab Inspected |  | Date of Inspection |  |
| PI |  | Laboratory supervisor |  |
| Inspection team |  | | |
| Type of Research / Work |  | | |

**University inspection ratings explained:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Blue | Exemplary | No issues raised, ‘best practice’ observed |
|  | **Green** | **Very Good** | No Issues raised |
|  | **Green/Amber** | **Generally Good** | Issues raised, technical issues – not serious |
|  | **Amber** | **Areas for Improvement** | Issues raised, areas for improvement |
| **E** | Red/Amber | Unsatisfactory | Serious issue(s) raised, no immediate risk of harm/damage |
|  | **Red** | **Unacceptable** | Issue(s) of imminent danger, immediate rectification required or suspension of use of facility/equipment/procedure |

|  | **Question** | **Score** | | | | | | | | | | | | | | **Comments** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **General Safety and Housekeeping** | | | | | | | | | | | | | | | |
| GS1 | General first impression of the lab; consider tidiness, smells etc. | A | | B | | C | | D | | E | | F | | NA | |  |
| GS2 | General risk assessments relevant and up to date | A | | B | | C | | D | | E | | F | | NA | |  |
| GS3 | Local rules disseminated to all workers? | A | | B | | C | | D | | E | | F | | NA | |  |
| GS4 | Laboratory work undertaken subject to standard local rules / procedures | A | | B | | C | | D | | E | | F | | NA | |  |
| GS5 | Risk assessments carried for each experiment and updated as necessary | A | | B | | C | | D | | E | | F | | NA | |  |
| GS6 | Safety signs and notices appropriate and legible (inc radiation and biological) | A | | B | | C | | D | | E | | F | | NA | |  |
| GS7 | Floor areas and walkways clear of trip hazards and uncluttered | A | | B | | C | | D | | E | | F | | NA | |  |
| GS8 | Bench tops free of excess materials not in use | A | | B | | C | | D | | E | | F | | NA | |  |
| GS9 | Balance areas clean | A | | B | | C | | D | | E | | F | | NA | |  |
| GS10 | Sinks clear of materials | A | | B | | C | | D | | E | | F | | NA | |  |
| GS11 | Heat sources isolated when not in use | A | | B | | C | | D | | E | | F | | NA | |  |
| GS12 | Pressure systems documented and checked | A | | B | | C | | D | | E | | F | | NA | |  |
| GS13 | All waste appropriately segregated and labelled | A | | B | | C | | D | | E | | F | | NA | |  |
| GS14 | Evidence of eating or storage of food and drink within the lab | A | | B | | C | | D | | E | | F | | NA | |  |
|  | **Facilities and Equipment** | | | | | | | | | | | | | | | |
| F1 | Dedicated hand washing facilities available and clean | A | | B | | C | | D | | E | | F | | NA | |  |
| F2 | Is an appropriate hand soap and moisturiser available? | A | | B | | C | | D | | E | | F | | NA | |  |
| F3 | Are paper towels available for drying hands? | A | | B | | C | | D | | E | | F | | NA | |  |
| F4 | Are floors coved, impervious and made from chemical resistant materials? | A | | B | | C | | D | | E | | F | | NA | |  |
| F5 | Are benches impervious and chemical resistant? | A | | B | | C | | D | | E | | F | | NA | |  |
| F6 | Are benches free from gaps and cracks, can infectious materials become trapped? | A | | B | | C | | D | | E | | F | | NA | |  |
| F7 | Shelving secure and correctly loaded | A | | B | | C | | D | | E | | F | | NA | |  |
| F8 | All portable electrical equipment PAT tested and in date | A | | B | | C | | D | | E | | F | | NA | |  |
| F9 | Overloading of sockets and trailing cables | A | | B | | C | | D | | E | | F | | NA | |  |
| F10 | Are incubators clean? | A | | B | | C | | D | | E | | F | | NA | |  |
| F11 | Are computer workstations set up appropriately? Have DSE assessment been carried out? | A | | B | | C | | D | | E | | F | | NA | |  |
| F12 | Are chairs adjustable and safe? Are they appropriate and cleanable? (non-fabric) | A | | B | | C | | D | | E | | F | | NA | |  |
| F13 | Are guards on machines in place and working? | A | | B | | C | | D | | E | | F | | NA | |  |
| F14 | Is all equipment in good working order? | A | | B | | C | | D | | E | | F | | NA | |  |
| F15 | Are centrifuges clean and in good working order | A | | B | | C | | D | | E | | F | | NA | |  |
| F16 | Fridges and freezers had ignition sources removed and appropriately labelled | A | | B | | C | | D | | E | | F | | NA | |  |
| F17 | Fridge boxes used and labelled | A | | B | | C | | D | | E | | F | | NA | |  |
| F18 | Fridges / freezers fit for purpose and well organised | A | | B | | C | | D | | E | | F | | NA | |  |
|  | **Emergency** | | | | | | | | | | | | | | | |
| E1 | Emergency contact details displayed near entrance to laboratory – up to date contact names and numbers | A | | B | | C | | D | | E | | F | | NA | |  |
| E2 | Fire and first aid information on display | A | | B | | C | | D | | E | | F | | NA | |  |
| E3 | Fire doors maintained and kept clear | A | | B | | C | | D | | E | | F | | NA | |  |
| E4 | Fire extinguishers available and clearly visible and unobstructed | A | | B | | C | | D | | E | | F | | NA | |  |
| E5 | Fire extinguishers appropriate to risk | A | | B | | C | | D | | E | | F | | NA | |  |
| E6 | Fire extinguishers maintained within last 12 months | A | | B | | C | | D | | E | | F | | NA | |  |
| E7 | Fire Extinguisher training provided where necessary | A | | B | | C | | D | | E | | F | | NA | |  |
| E8 | First aid kits appropriate and stocked | A | | B | | C | | D | | E | | F | | NA | |  |
| E9 | Safety showers and eyewash station available, unobstructed and regularly tested | A | | B | | C | | D | | E | | F | | NA | |  |
| E10 | Spill control measures available and adequate | A | | B | | C | | D | | E | | F | | NA | |  |
| E11 | Mercury spill kit available | A | | B | | C | | D | | E | | F | | NA | |  |
| E12 | Special first aid identified for high hazard activities (eg HF, cyanides) | A | | B | | C | | D | | E | | F | | NA | |  |
|  | **Chemicals** | | | | | | | | | | | | | | | |
| C1 | Are there local arrangements for chemical safety management | A | | B | | C | | D | | E | | F | | NA | |  |
| C2 | Is there an up to date inventory for all chemicals / hazardous materials? | A | | B | | C | | D | | E | | F | | NA | |  |
| C3 | Evidence of Opera system being followed for the high hazard chemicals | A | | B | | C | | D | | E | | F | | NA | |  |
| C4 | Are the storage areas suitable, clean and tidy? | A | | B | | C | | D | | E | | F | | NA | |  |
| C5 | Are containers clearly marked, chemical names, CAS number, mixture composition and hazard warnings (symbols) | A | | B | | C | | D | | E | | F | | NA | |  |
| C6 | Date of receipt clearly visible | A | | B | | C | | D | | E | | F | | NA | |  |
| C7 | Are chemicals segregated according to chemical compatibilities? {Flammables away from oxidisers, acids separate from bases, incompatible acids separated (eg nitric and sulphuric acid not with acetic) etc.} | A | | B | | C | | D | | E | | F | | NA | |  |
| C8 | Are chemical storage cabinets appropriate, bundled, spill trays used | A | | B | | C | | D | | E | | F | | NA | |  |
| C9 | Cabinet for corrosive material available and used | A | | B | | C | | D | | E | | F | | NA | |  |
| C10 | Flammable liquids stored in approved fire resistant cabinets – max quantity 50 litres | A | | B | | C | | D | | E | | F | | NA | |  |
| C11 | Working flammable liquid quantity bottles not to exceed 500 ml? | A | | B | | C | | D | | E | | F | | NA | |  |
| C12 | Ignition sources avoided when using / storing flammables | A | | B | | C | | D | | E | | F | | NA | |  |
| C13 | High level storage avoided | A | | B | | C | | D | | E | | F | | NA | |  |
| C14 | Containers closed unless actually in use | A | | B | | C | | D | | E | | F | | NA | |  |
| C15 | Winchesters carriers available and used | A | | B | | C | | D | | E | | F | | NA | |  |
| C16 | Winchesters stored in cabinets | A | | B | | C | | D | | E | | F | | NA | |  |
| C17 | Water and air reactive compounds sealed against exposure to water | A | | B | | C | | D | | E | | F | | NA | |  |
| C18 | Chemicals wastes segregated and labelled appropriately | A | | B | | C | | D | | E | | F | | NA | |  |
| C19 | Minimal quantities of waste accumulation | A | | B | | C | | D | | E | | F | | NA | |  |
|  | **Gases** | | | | | | | | | | | | | | | |
| G1 | Are the appropriate cylinders tags displayed at the entrance to the lab | A | | B | | C | | D | | E | | F | | NA | |  |
| G2 | Are cylinders secure and upright | A | | B | | C | | D | | E | | F | | NA | |  |
| G3 | Correct regulators for the type of gases | A | | B | | C | | D | | E | | F | | NA | |  |
| G4 | Regulators regularly checked and records kept | A | | B | | C | | D | | E | | F | | NA | |  |
| G5 | Are pipe connections secure (push fit / clips) | A | | B | | C | | D | | E | | F | | NA | |  |
| G6 | Is the pipework in good condition | A | | B | | C | | D | | E | | F | | NA | |  |
| G7 | Cylinders in good condition and clearly marked | A | | B | | C | | D | | E | | F | | NA | |  |
| G8 | Are empty cylinders removed from the lab | A | | B | | C | | D | | E | | F | | NA | |  |
| G9 | Flammable gases kept away from oxidising gases | A | | B | | C | | D | | E | | F | | NA | |  |
|  | **Fume Cabinets and Safety Cabinets** | | | | | | | | | | | | | | | |
| CA1 | All - Are cabinets free from clutter | A | | B | | C | | D | | E | | F | | NA | |  |
| CA2 | All - Large equipment raised to allow for air flow | A | | B | | C | | D | | E | | F | | NA | |  |
| CA3 | All - Processes conducted away from front edge of cupboard (at least 150mm) | A | | B | | C | | D | | E | | F | | NA | |  |
| CA4 | All - Sash lowered to optimal position and closed when left unattended | A | | B | | C | | D | | E | | F | | NA | |  |
| CA5 | All - Cabinets operating correctly and inspected annually, (14 months max) and records maintained | A | | B | | C | | D | | E | | F | | NA | |  |
| CA6 | MSCs - Safety cabinets have regular airflow checks using anemometer | A | | B | | C | | D | | E | | F | | NA | |  |
| CA7 | MSCs - Evidence of daily visual check of airflow indicator | A | | B | | C | | D | | E | | F | | NA | |  |
|  | **Personal Protective Equipment** | | | | | | | | | | | | | | | |
| PE1 | Has the risk assessment covered PPE | A | | B | | C | | D | | E | | F | | NA | |  |
| PE2 | Staff wearing correct PPE for area and work being carried out.(eg labcoat, eye protection | A | | B | | C | | D | | E | | F | | NA | |  |
| PE3 | Are the gloves in use compatible with the materials being handled | A | | B | | C | | D | | E | | F | | NA | |  |
| PE4 | Is there adequate storage for the PPE | A | | B | | C | | D | | E | | F | | NA | |  |
| PE5 | Where RPE is identified, have the users been trained in face fit. | A | | B | | C | | D | | E | | F | | NA | |  |
|  | **Biosafety (CL1 and CL2)** | | | | | | | | | | | | | | | |
| B1 | Has facility approved by GMBSC? | A | | B | | C | | D | | E | | F | | NA | |  |
| B2 | Has all relevant work been notified to GMBSC | A | | B | | C | | D | | E | | F | | NA | |  |
| B3 | Are their suitable controls in place within the laboratory for the pathogen/GM handling carried within it | A | | B | | C | | D | | E | | F | | NA | |  |
| B4 | Are different types of waste being segregated correctly | A | | B | | C | | D | | E | | F | | NA | |  |
| B5 | Appropriate disinfectant in use | A | | B | | C | | D | | E | | F | | NA | |  |
| B6 | Are disinfectants labelled and in date? | A | | B | | C | | D | | E | | F | | NA | |  |
| B7 | Is there evidence of regular disinfection of surfaces? | A | | B | | C | | D | | E | | F | | NA | |  |
| B8 | Biological spill kit available and appropriate to risks | A | | B | | C | | D | | E | | F | | NA | |  |
| B9 | Staff aware of spillage procedures | A | | B | | C | | D | | E | | F | | NA | |  |
| B10 | Appropriate biohazard warning sign displayed | A | | B | | C | | D | | E | | F | | NA | |  |
| B11 | Is there restricted access to authorised staff | A | | B | | C | | D | | E | | F | | NA | |  |
| B12 | Is there safe storage of infectious materials | A | | B | | C | | D | | E | | F | | NA | |  |
| B13 | Autoclaves have undergone annual testing to BS 2646 | A | | B | | C | | D | | E | | F | | NA | |  |
|  | **Laser Safety** | | | | | | | | | | | | | | | |
| L1 | Have risk assessments been carried out / are they available ? | A | | B | | C | | D | | E | | F | | NA | |  |
| L2 | Are written standard operating, maintenance, and alignment procedures kept with laser equipment? | A | | B | | C | | D | | E | | F | | NA | |  |
| L3 | Are all authorized users and training dates listed in SOP’s? | A | | B | | C | | D | | E | | F | | NA | |  |
| L4 | Are laser rooms and areas posted and equipment labelled with approved warning signs and labels? | A | | B | | C | | D | | E | | F | | NA | |  |
| L5 | Is access to laser rooms and areas controlled to prevent unauthorised entry? | A | | B | | C | | D | | E | | F | | NA | |  |
| L6 | Is protective housing including beam shielding in place? | A | | B | | C | | D | | E | | F | | NA | |  |
| L7 | Are protective housing interlocks present and are they tested as part of a maintenance schedule? | A | | B | | C | | D | | E | | F | | NA | |  |
| L8 | Are windows and ports, which could allow a laser beam to stray into uncontrolled areas covered or protected during laser operation? | A | | B | | C | | D | | E | | F | | NA | |  |
| L9 | Are beam stops present at end of all beam paths & are they non-combustible? | A | | B | | C | | D | | E | | F | | NA | |  |
| L10 | Are barriers and screens (if present) non-combustible? | A | | B | | C | | D | | E | | F | | NA | |  |
| L11 | Does electrical supply, wiring and circuitry meet safety standards? | A | | B | | C | | D | | E | | F | | NA | |  |
| L12 | Are trip hazards controlled properly? | A | | B | | C | | D | | E | | F | | NA | |  |
| L13 | Is the optical bench well organised with no clutter and secure fixings? | A | | B | | C | | D | | E | | F | | NA | |  |
| L14 | Are beam paths horizontal to the optical table and below normal eye level? | A | | B | | C | | D | | E | | F | | NA | |  |
| L15 | Are there measures to eliminate sources of specular and diffuse reflection? | A | | B | | C | | D | | E | | F | | NA | |  |
| 16 | Laser eye protection; if present is it suitable for the laser activity? | A | | B | | C | | D | | E | | F | | NA | |  |
| L17 | Laser eye protection; if present is it scratch-free and in free of damage? | A | | B | | C | | D | | E | | F | | NA | |  |
| L18 | Are potential flood risks controlled? e.g. laser water cooling systems | A | | B | | C | | D | | E | | F | | NA | |  |
| L19 | Are potential gas supply risks controlled? e.g. gas cylinder storage / gas supply pipework | A | | B | | C | | D | | E | | F | | NA | |  |
| L20 | Are potential harmful substances risks controlled? e.g. fumes produce from laser reaction with target. | A | | B | | C | | D | | E | | F | | NA | |  |
|  | **Radioactive Substances (open sources)** | | | | | | | | | | | | | | | |
| R1 | Have risk assessments been carried out / are they available ? | A | | B | | C | | D | | E | | F | | NA | |  |
| R2 | Are written standard operating procedures available ? | A | | B | | C | | D | | E | | F | | NA | |  |
| R3 | Are rooms and areas posted and equipment labelled with approved warning signs and labels? | A | | B | | C | | D | | E | | F | | NA | |  |
| R4 | Is the name and contact details of the area RPS available? | A | | B | | C | | D | | E | | F | | NA | |  |
| R5 | Where necessary is access to rooms and areas controlled to prevent unauthorised entry? | A | | B | | C | | D | | E | | F | | NA | |  |
| R6 | Are work areas demarcated, orderly and free of clutter? | A | | B | | C | | D | | E | | F | | NA | |  |
| R7 | Is LEV e.g. a fume hood available for controlling potentially airborne radioactive substances e.g. dusts, powders, volatiles.? | A | | B | | C | | D | | E | | F | | NA | |  |
| R8 | Is a designated hand-wash sink available? | A | | B | | C | | D | | E | | F | | NA | |  |
| R9 | Is PPE available and used appropriately? | A | | B | | C | | D | | E | | F | | NA | |  |
| R10 | Is personal dosimetry used on a risk-assessed basis? | A | | B | | C | | D | | E | | F | | NA | |  |
| R11 | Are contamination or dose-rate monitors available? | A | | B | | C | | D | | E | | F | | NA | |  |
| R12 | Are monitors in good working order (e.g. charged batteries) and calibrated within 1 yr? | A | | B | | C | | D | | E | | F | | NA | |  |
| R13 | Are there up-to-date local contamination monitoring records? | A | | B | | C | | D | | E | | F | | NA | |  |
| R14 | Are radiochemical stores labelled and locked? | A | | B | | C | | D | | E | | F | | NA | |  |
| R15 | Are radiochemicals and flammable solvents stored separately? | A | | B | | C | | D | | E | | F | | NA | |  |
| R16 | Are the store contents individually labelled and traceable? | A | | B | | C | | D | | E | | F | | NA | |  |
| R17 | Do store contents tally with source inventory lists (e.g. IsoStock) and vice-versa? | A | | B | | C | | D | | E | | F | | NA | |  |
| R18 | Is radioactive waste properly labelled and stored prior to disposal? | A | | B | | C | | D | | E | | F | | NA | |  |
| R19 | Is radioactive waste removed within the required time frame? | A | | B | | C | | D | | E | | F | | NA | |  |
| R20 | If present, is the sink designated for drain disposals clearly labelled as such? | A | | B | | C | | D | | E | | F | | NA | |  |
|  | **Radiation (X-rays and sealed radioactive sources)** | | | | | | | | | | | | | | | |
| RX1 | Have risk assessments been carried out / are they available ? | A | | B | | C | | D | | E | | F | | NA | |  |
| RX 2 | Are written standard operating procedures available ? | A | | B | | C | | D | | E | | F | | NA | |  |
| RX3 | Are rooms and areas posted and equipment labelled with approved warning signs and labels? | A | | B | | C | | D | | E | | F | | NA | |  |
| RX4 | Is the name and contact details of the area RPS available? | A | | B | | C | | D | | E | | F | | NA | |  |
| RX5 | Where necessary is access to rooms and areas controlled to prevent unauthorised entry? | A | | B | | C | | D | | E | | F | | NA | |  |
| RX6 | Is ionising equipment contained in appropriate enclosures? | A | | B | | C | | D | | E | | F | | NA | |  |
| RX7 | Are visible and audible signals provided inside and outside enclosures to provide warning before and during irradiation? | A | | B | | C | | D | | E | | F | | NA | |  |
| RX8 | Does the enclosure have interlocks preventing staff from being within the confines of the enclosure? | A | | B | | C | | D | | E | | F | | NA | |  |
| RX9 | Are "fail-safe" mechanisms provided to prevent generation of X-rays when: | A | | B | | C | | D | | E | | F | | NA | |  |
| * the shutter is open without analysing components & beam stops in position, | A | | B | | C | | D | | E | | F | | NA | |  |
| * the housing is removed from the X-ray tube or vice-versa | A | | B | | C | | D | | E | | F | | NA | |  |
| * an enclosure is detached from the housing | A | | B | | C | | D | | E | | F | | NA | |  |
| • the beam stop is removed | A | | B | | C | | D | | E | | F | | NA | |  |
| RX10 | Is PPE available and used appropriately? | A | | B | | C | | D | | E | | F | | NA | |  |
| RX11 | Is personal dosimetry used on a risk-assessed basis? | A | | B | | C | | D | | E | | F | | NA | |  |
| RX12 | Are radiation or dose-rate monitors available? | A | | B | | C | | D | | E | | F | | NA | |  |
| RX13 | Are monitors in good working order (e.g. charged batteries) and calibrated within 1 yr? | A | | B | | C | | D | | E | | F | | NA | |  |
| RX14 | Are sealed source stores labelled and locked? | A | | B | | C | | D | | E | | F | | NA | |  |
| RX15 | Are sealed sources individually labelled and traceable? | A | | B | | C | | D | | E | | F | | NA | |  |
| RX16 | Are unwanted (waste) sealed sources disposed of within an appropriate time-scale? | A | | B | | C | | D | | E | | F | | NA | |  |
| RX17 | Is financial provision made for eventual disposal of sealed sources? | A | | B | | C | | D | | E | | F | | NA | |  |
|  | **Cryogenic Gases** | | | | | | | | | | | | | | | |
| CG1 | Are users trained to perform transfer operations with cryogenic gases? | A | | B | | C | | D | | E | | F | | NA | |  |
| CG2 | Is there a list of competent users readily visible adjacent to the dispensing points? | A | | B | | C | | D | | E | | F | | NA | |  |
| CG3 | Is appropriate PPE available and used?  Cryogenic gloves, face shield / goggles | A | | B | | C | | D | | E | | F | | NA | |  |
| CG4 | Are the pressurised Dewar’s subject to annual statutory inspections and records maintained? | A | | B | | C | | D | | E | | F | | NA | |  |
| CG5 | Is there means to inform and restrict people from entering a lift which is carrying Dewar’s? | A | | B | | C | | D | | E | | F | | NA | |  |
| CG6 | Is there oxygen depletion monitoring for spaces which use cryogenic gases? | A | | B | | C | | D | | E | | F | | NA | |  |
| CG7 | When the cryogenic vessel is used to store samples, is there adequate equipment to handle the items safely? | A | | B | | C | | D | | E | | F | | NA | |  |
|  | **Nano Materials** | | | | | | | | | | | | | | | |
| N1 | Are there risk assessments for activities involving nano material research? | A | | B | | C | | D | | E | | F | | NA | |  |
| N2 | Have strict controls been implemented and maintained for work with nano materials? | A | | B | | C | | D | | E | | F | | NA | |  |
| N3 | Are the uses of nano materials restricted to <1 gram in a cabinet? (precautionary principle) | A | | B | | C | | D | | E | | F | | NA | |  |
|  | **Magnetic Field e.g. NMR, MRI,** | | | | | | | | | | | | | | | |
|  | Are there risk assessments for work in areas of high magnetic field? | A | | B | | C | | D | | E | | F | | NA | |  |
|  | Are hazard warning signs visible at the entrance to the area? | A | | B | | C | | D | | E | | F | | NA | |  |
|  | Are there access restriction warnings at the entrance for workers at particular risk? i.e.   * persons with passive implants * persons with active implants * persons with body worn medical devices * pregnant workers | A | | B | | C | | D | | E | | F | | NA | |  |
|  | Is there warning alerting to risk of potentially dangerous movement of ferromagnetic objects? | A | | B | | C | | D | | E | | F | | NA | |  |
|  | Has the magnetic field strength been mapped and displayed? e.g. by lines marked around the instrument indicating:   * 200mT access restriction, whole-body Tw * 2T access restriction, instantaneous whole body * 5T access restriction limbs | A | | B | | C | | D | | E | | F | | NA | |  |
|  | Is there induction information for the space including the action to take in the event of a magnet quench? | A | | B | | C | | D | | E | | F | | NA | |  |
|  | **Premises** | | | | | | | | | | | | | | | |
| P1 | Are lights all working and suitable? | A | | B | | C | | D | | E | | F | | NA | |  |
| P2 | Are ceilings free from leaks and loose materials and all ceiling tiles in place? | A | | B | | C | | D | | E | | F | | NA | |  |
| P3 | Are floors and walkways in good condition? | A | | B | | C | | D | | E | | F | | NA | |  |
| P4 | Is there adequate space for the number of staff occupying the area? | A | | B | | C | | D | | E | | F | | NA | |  |
| P5 | Is the temperature within an acceptable range? | A | | B | | C | | D | | E | | F | | NA | |  |
|  | **Department Specific** | | | | | | | | | | | | | | | |
| DS1 |  | |  | |  | |  | |  | |  | |  | |  |  |
| DS2 |  | |  | |  | |  | |  | |  | |  | |  |  |
| DS3 |  | |  | |  | |  | |  | |  | |  | |  |  |
| DS4 |  | |  | |  | |  | |  | |  | |  | |  |  |

**Findings Action Log**

Use this section to list actions from items above. Please note any rating below 3 (Areas for Improvement) requires remedial action

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| --- | --- | --- | --- |
| **Reference** | **Action** | **Action to** | **Management response / Date completed** |
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**Examples of exemplary practice to report to group**

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| --- | --- | --- |
| **Reference** | **Notes** | **Management response** |
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