

Standard No	Objective to remedy	Action Planned	Completion Date	Person responsible	Cost and Resources	Success Criteria	Monitoring	Evaluation
Part 3 Paragraphs 7 (a) (b) 8 (a) (b) NMS1	2.17 All staff to complete reading the latest statutory reading on safeguarding in KCSIE.	All staff had been issued the latest reading before the inspection. Not all had returned the signed form to confirm they had read it. Form reissued to those staff and pursued to read, sign and return.	19.2.2016	Deputy Pastoral	Reissue of form. Admin time	All staff files contain the form confirming latest statutory reading has been read.	Headmaster and Governors	Measure outcome against standards
Part 3 Paragraphs 11 & 16 (a) and (b) NMS 6	2.21 Health & Safety, and Risk Assessment Policies are not implemented effectively and record keeping is weak. 2.22 Training for the management of fire arrangements has been insufficient.	All Risk Assessments will be reviewed immediately, dated and signed by appropriate line manager. Training is scheduled to take place 15 <sup>th</sup> February for relevant staff in the management of fire arrangements to be run by external provider who will also audit our policies, procedures and record keeping.	29.2.2016  15.2.2016	Director of Operations	Financial & Staff time	Improved skills in record keeping and Implementation of policies with regard to management of fire arrangements	Headmaster and Governors	Measure outcome against standards

**School Name: Ellesmere College**

**School Number 893/6001**

**January 2016** Compliance Inspection Action Plan

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Part 4 Para 18-21 NMS 14.1	2.30 Some entries on the Central Register are undated or inappropriately recorded.	SCR checked to ensure all entries are dated with immediate effect. Inspection feedback referred to the need for greater use of the notes column to give further explanation as some items were noted in other locations on the SCR.	1.2.2016	Deputy Head Academic	Labour time	All entries dated. Enhanced use of notes column in SCR.	Headmaster and Governors	Measure outcome against standards
Part 5 Para 23 & 28	2.32 Not all washing facilities have a hot water supply.  2.32 Lack of recent risk assessment records re water quality.	Plumbers tasked to fit hot water supply in areas lacking a hot water supply. Testing of water supply completed on 4.12.2015 by local authority and reported as all clear. Most recent checks for 'The Control of Legionella Bacteria in Water Systems' conducted on 19 <sup>th</sup> January, 2016 and reported as all clear.	22.2.2016  19.1.2016	Director of Operations	Financial and labour hours	Hot water supply in place for all wash facilities Current RA completed and actioned re water quality	Headmaster and Governors	Measure outcome against standards

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Part 8 Para 34 NMS 13.1 & 13.4	2.43 In many cases policies have not been implemented as intended, impacting on leadership and management ability to ensure they fulfil their responsibilities.	Review of monitoring and reporting by Senior Management. Adoption of proposal for a Governor to take a specific interest in compliance monitoring. Compliance Governor appointed.	18.1.2016	Headmaster	Time	Improved reporting to SMT and Governor meetings on compliance issues.	Governing Body	Measure outcome against standards