Health & Safety Training & Competency Matrix

**Name of School/Service: …………………………………………………………………………………………**

| **Type of development** | **Induction (local)** | **Induction** | **Fire safety / evacuation** | **Workstation / hand held devices** | **Stress awareness** | **Risk Assessment** | **Manual Handling** | **COSHH** | **Home working (hybrid working)** | **Driving EN leased /hired vehicles** | **Risk Assessment** | **Manual Handling** | **IOSH Working Safely** | **IOSH Managing Safely** | **IOSH Leading Safely** | **First aid / defib / EpiPen** | **Mental health first aid** | **Fire warden** | **DSEAR** | **Radiation Supervisor** | **COSHH** | **Evacuation Chair** | **Food Hygiene** | **Other specialist (appropriate to job role)** |
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|  |  | **On-line eLearning (Essential Skillz)** | **Face to Face Training** |
| **Staff Name** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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**Key:**

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| **Local Induction** | **On-line eLearning (Essential Skillz)** | **Instructor- led training** |

**M = Mandatory R = Recommended**