|  |  |
| --- | --- |
| **EVENTS SAFETY MANAGEMENT : DEBRIEF** | **APPENDIX D** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of** **Event** |  | **Date** | / / |
| **Debrief****Attendees** |  |
| **Name of Event** **Co-ordinator** |  | **Contact Number :**  |

**Record suggestions for improvement if this event is likely to be held again and attach to the Safety Management Plan (Appendix A) or file with Event documents.**

|  |  |
| --- | --- |
| **Issue raised** | **Recommendations for improvement** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |