1. **[Company Name]** is committed to having an effective Plaster, Injury and Blood Spillage Procedure in place and all necessary precautions will be taken to ensure adherence to Plaster, Injury and Blood Spillage Procedure.

#  Responsible Person

1.1 [Name of Personal Responsible] is the responsible person for this programme on the premises.

|  |  |  |
| --- | --- | --- |
| **Executive Manager: [Name]** | **Date** | **Signature** |
|  | DD-MM-YYYY |  |