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EDS Corrective Action Suggestions

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| **Your Title** |  | **Today’s date** |  |
| **EDS Director** |  | **EDS Plan date** |  |
| **Community** |  | **Have you exercised and updated your plan?** |  |

***Notes:***

* Corrective Action Plan should be submitted to the relevant leadership and remain on agenda until all matters are resolved.

| **Item** | **Recommendations**  (Identified Hazards /System Deficiencies) | **Proposed Corrective Action** | **Priority**  (Risk Rating) | **Person Responsible for follow-up** | **Nominated Completion Date** | **Status** |
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