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| **Management Meeting Agenda & Minutes** |  **ACTION Minutes** |
| **Date of Meeting:** |  |
| **Attendees:** |  |
| **For info/context:** | Management (Review) Meeting |

| **No** | **Agenda** | **Action / Minutes** | **Actionee** | **Tgt Date** | **Status** |
| --- | --- | --- | --- | --- | --- |
| 1 | **Previous Minutes and Actions:** |  |  |  |  |
| 2 | **Implementation of the QHSE Management System:** |  |  |  |  |
| 3 | **Issues or changes required to the Management System:** |  |  |  |  |
| 4 | **Client Feedback:**1. Complaints
2. Satisfaction
3. Lessons Learned
 |  |  |  |  |
| 5 | **Results of Audits:**1. Internal
2. External
 |  |  |  |  |
| 6 | **Fire and Emergency Situations:**1. Checks
2. Drills
 |  |  |  |  |
| 7 | **Resource Needs:** |  |  |  |  |
| 8 | **Personnel: concerns/ training/ performance reviews**1. Management
2. Staff
3. Agency
 |  |  |  |  |
| 9 | **Accidents and Incidents:** |  |  |  |  |
| 10 | **Monitoring and Measurement:**1. Objectives
2. Environment
3. Health and Safety
 |  |  |  |  |
| 11 | **Standards & Legislation Changes:** |  |  |  |  |
| 12 | **Objectives:****-****-****-****-****-****-****-****-** |  |  |  |  |
| 13 | **AOCB:** |  |  |  |  |