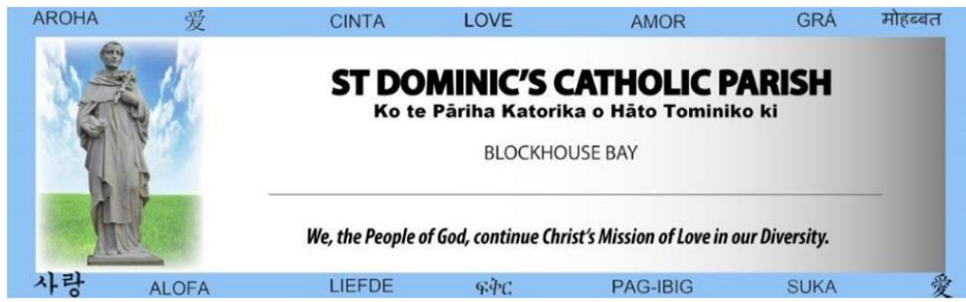


HEALTH & SAFETY AGENDA & MINUTES



Chairperson:

Meeting Date: ____/____/____

Attendees:

Accidents and Incidents in the Workplace (Employees, Volunteers, Visitors, Contractors)	Resp.	Due Date
Discussion/Action		
Hazards (New, Reviewed, Closed Out)	Resp.	Due Date
Site Assessments (Carried out, Corrective/Preventative Actions)	Resp.	Due Date

HEALTH & SAFETY AGENDA & MINUTES

Training (New, Updated)	Resp.	Due Date
Emergency Procedures (Results of Trial Evacuations or Actual Events)	Resp.	Due Date
Employee/Contractor Issues Raised (e.g. revised work processes)	Resp.	Due Date
Contractor Management (Contractors used and their performance)	Resp.	Due Date
General Business	Resp.	Due Date

Meeting Closed: _____ Date of Next Meeting: ____/____/____