

Staff Meeting/Communication Record

Meeting Date: _____

Attendees: _____

| Item | | Issues Identified | Action Required | Person Responsible | Date for Completion |
|-----------------------------------|-----------------------------|-------------------|-----------------|--------------------|---------------------|
| 1. Matters Arising | | | | | |
| 2. Critical Incidents | No of incidents for period: | | | | |
| 3. Risk Register | | | | | |
| 4. Injury register | No of injuries for period: | | | | |
| 5. Vehicles/ routes/roster issues | | | | | |
| 6. Workplace inspection reports | | | | | |
| 7. Training issues | | | | | |
| 8. Security issues | | | | | |
| 9. Audit issues | | | | | |
| 10. Other issues | | | | | |

Signature of Manager: _____ **Date:** _____