



# SAFETY MEETING AGENDA

DEPARTMENT/JOB SITE: \_\_\_\_\_ MEETING DATE: \_\_\_\_\_

1. **Open Meeting & Present safety topic:** \_\_\_\_\_
2. Read minutes from previous meeting.
3. **Persons present:**

|       |       |
|-------|-------|
| _____ | _____ |
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4. **Old Business** – Status of previous recommendations. Discuss pending old business if any.
5. **Accidents** – Discuss accidents and near misses that have occurred since the last meeting. Brief summary of accidents to date by number and type. Note any trends. Discuss corrective action taken, or needed. Concentrate on accident causes to make everyone more aware.
6. **Inspection Reports** – Report on findings and recommendations of any inspection reports made since last meeting.
7. **New Business** – Solicit employee suggestions. Discuss new procedures, changes to company safety policy, etc.

TIME MEETING STARTED: \_\_\_\_\_ TIME FINISHED: \_\_\_\_\_

MEETING CHAIRED BY: \_\_\_\_\_ TITLE: \_\_\_\_\_