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| **Health, Safety and Environment Meeting** | | | |
| **Unit Name and Address** |  | | |
| **Meeting Date** | Date | **Meeting Time** |  |
| **Attendees** |  | | |
| **Apologies** |  | | |

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| **Agenda** |
| 1. See Care Share Moment 2. Outstanding matters from previous meeting 3. Health & Safety  * Incidents, hazard observations and near misses since last meeting * Report on findings of any Audits, Inspections and Risk Assessments * Changes to site equipment, services or work methods  1. Food safety issues 2. Environmental issues 3. Quality issues 4. Changes to Company Policy or Procedures 5. Training  * Training since last meeting * Training planned.  1. Any other HSE matters that team colleagues wish to discuss 2. Recognition/nominations for team members who should be recognised for their contribution to HSE 3. Action plan |

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| **1. See Care Share Moment** | | | | |
| **Topic discussed during See Care Share Moment**  *(topic from the monthly See Care Share Update, lessons learned from a recent incident etc)* |  | | | |
| **2. Outstanding matters from previous meeting** | | | | |
| Details | Actions required | | | |
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| **3. Health and Safety** | | | | |
| ***Incidents, hazard observations and near misses since last meeting***  (where a colleague was involved in an incident that resulted in injury, ask them if they would like to share their experience with the team) | | | | |
| Details and actions taken | Further actions required | | | |
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| ***Report on findings of any Audits, Inspections and Risk Assessments*** | | | | |
| Findings/outcomes | Any actions required | | | |
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| ***Changes to Site Equipment, Services or Work Methods*** | | | | |
| Details | Any actions required | | | |
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| **4. Food Safety Issues** | | | | |
| ***Including alleged food poisoning, foreign body, allergen incidents and evidence of pests*** | | | | |
| Details and actions taken | Further actions required | | | |
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| **5. Environmental issues** | | | | |
| ***Including waste segregation issues, excessive use of water/electricity/gas, chemical/oil spillage*** | | | | |
| Details and actions taken | Further actions required | | | |
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| **6. Quality issues** | | | | |
| ***Including customer comments, customer surveys, supplier issues, service delivery etc*** | | | | |
| Details and actions taken | Further actions required | | | |
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| **7. Changes to Company Policy or Procedures** | | | | |
| Details and actions taken | Further actions required | | | |
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| **8. Training** | | | | |
| Training since last meeting | Training planned | | | |
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| **9. Any other HSE matters that team colleagues wish to discuss** | | | | |
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| **10. Recognition/nominations for team members for their contribution to HSE** | | | | |
| Name | Recognised for | | | |
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| **11. Action Plan** | | | | |
| **Action Required** | | **By whom** | **By when** | **Date completed** |
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| **Manager signature** | **Date** |

These HSE Meeting Minutes should be displayed on the notice board.

A copy of HSE Meeting Minutes must be sent to the line manager.

HSE Minutes must be retained at the site for a period of 3 years.