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| --- | --- |
| Group Name:  | Meeting Location:  |
| Leader:  | Date:  | Time: |
| Facilitator: | Actual Start Time: |
| Sponsor: | Actual End Time: |
| Next Meeting Date and Time: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Agenda** | **Presenter** | **Time** | **Action Item** | **Person Responsibleand Target Date** |
| 1. | WelcomeReview Meeting Objectives and Agenda |  |  |  |  |
| 2. | Safety Moment |  |  |  |  |
| ***3.*** | ***Review of Previous Minutes and Action Times*** |  |  |  |  |
| 4. | Review Data, Measures and Reports (as needed) |  |  |  |  |
| 5. | Emergent issues for discussion |  |  |  |  |
| 6. | Review of Agenda and Actions Items for Next Meeting |  |  |  |  |
| 7. |  |  |  |  |  |

***Items in blue italics denote an item requiring a vote***

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|  | **Agenda Items for Next Meeting** | **Presenter** | **Time Requested** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
| 5. |  |  |  |
| 6. |  |  |  |
| 7. |  |  |  |

Members

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Invited Guest

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**Meeting Agenda and Minutes submitted respectfully by**

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| Name: | Date: |