

Management review meeting minutes

Date		<b>Review Number</b>
<input checked="" type="checkbox"/> Annual review (R)		R#01
<input type="checkbox"/> HACCP team meeting (M)		<b>Meeting Number</b>
		M#

**FSMS elements reviewed**

<input type="checkbox"/> Pending tasks and the results of any action items from the previous Management Review meeting.		<input checked="" type="checkbox"/> Suppliers / external contractors evaluation
<input checked="" type="checkbox"/> Processes’ risks and opportunities review		<input checked="" type="checkbox"/> Complaints
<input checked="" type="checkbox"/> Suitability, adequacy and effectiveness of the food safety policy		<input checked="" type="checkbox"/> Incidents preparedness and response
<input checked="" type="checkbox"/> Results of internal audits		<input checked="" type="checkbox"/> Evaluation and approval of changes
<input checked="" type="checkbox"/> Non conformities		<input checked="" type="checkbox"/> Legal & statutory requirements
<input checked="" type="checkbox"/> Corrective actions status		<input checked="" type="checkbox"/> Targets & objectives
<input checked="" type="checkbox"/> Training		<input checked="" type="checkbox"/> FSMS updating
<input checked="" type="checkbox"/> Resources		<input type="checkbox"/> Other....

**Participants**

NAME/SURNAME	POSITION	SIGNATURE

**Elements discussed – inputs**

<b>PROCESSES’ RISKS &amp; OPPORTUNITIES REVIEW</b>
Risks and opportunities have been identified per process. There is no need for additional measures. HACCP Plan (CCPs / OPRPs plan was also reviewed and it was concluded that there is no need to be updated)
<b>FOOD SAFETY POLICY</b>
Food Safety Policy was reviewed. No change at the Policy is required
<b>INTERNAL AUDITS</b>
Internal audit was conducted as per schedule. Results were recorded at FORM 12-02. Non conformities were not identified
<b>NON CONFORMITIES – CORRECTIVE ACTIONS</b>
No non conformities were identified either during internal audit or during operation. Also no deviation from CCPs or OPRPs was reported
<b>TRAINING</b>
Training needs were identified for 2020 and documented in the relevant document. Training schedule for 2020 is approved.

<b>SUPPLIERS / EXTERNAL CONTRACTORS</b>
All suppliers / external contractors are approved. Annual evaluation was performed on.... (DATE) and the list of approved suppliers / contractors was updated
<b>COMPLAINTS</b>
No complaint was recorded
<b>INCIDENTS PREPARDNESS AND RESPONSE</b>
No incident related to food safety was identified. Nevertheless, a dummy recall was conducted to check the response in a hypothetical incident. It was concluded that the system in place is operated and there is no need for changes
<b>EVALUATION &amp; APPROVAL OF CHANGES</b>
No change was required / proposed
<b>LEGAL &amp; STATUTORY REQUIREMENTS</b>
All legal & statutory requirements are followed. The relevant register (Form 03-01) was updated on .. (DATE)
<b>TARGETS &amp; OBJECTIVES</b>
All targets and objectives were accomplished (see attached Form 03-02)

### Conclusions – decisions – outputs

Item	Reference	Action	Responsibility to	Schedule
Next year's targets & objectives	Form 03-02	To be approved	Top management	One week after annual review
HACCP Plan review	HACCP Studied	Re-evaluation	HACCP team coordinator	In one year
Training gap assessment	Form 08-01	Re-assessment	HACCP team coordinator	In one year
Legal / statutory requirements update	Form 03-01	Check for updates	HACCP team coordinator	In one year