**APPENDIX B**

**Confidential Colleague Discussion**

**Member of staff - details:**

|  |  |
| --- | --- |
| Name |  |
| Job Title |  |
| Department |  |
| Location |  |
| Present at meeting |  |
| Date of discussion |  |

**Summary of Discussion:**

|  |
| --- |
|   |

**Agreed Actions/Adjustments:**

|  |
| --- |
|   |

**Date of next review meeting**:.……………..................................................................

**Signed (Member of staff):** ...................................................................................

**Signed (Manager):** ..............................................................................................