

Continuous Improvement Item

Priority: _____ Issue: _____ Date: _____

Details of issue: _____

Owner: _____ Due date: _____

Result: _____

Name: _____

Signature: _____

<p style="text-align: center;">LEGEND</p> <p>Priority: High, medium, low</p> <p>Issue: Training manager, general, staff</p>
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