**Bristal Hauling Inc. Safety Program
Statistics and Records – Policy and Forms**

Bristal Hauling Inc. will maintain records to keep provide ready reference of the safety program’s activities and results. These records provide the foundation necessary to assess the program, make necessary modifications, and plan for future activities.

The purpose of these safety records will be to:

* Monitor and evaluate the safety performance of the safety program and our employees;
* Identify common factors and trends in incidents;
* Monitor and evaluate the effectiveness of the corrective actions.

Reports that will be kept on file include:

* Orientation and training records;
* First aid reports;
* Company workplace inspections
* Workplace Safety and Health inspections;
* Incident investigation reports;
* Near miss investigation reports;
* Safety and Health Committee minutes;
* Safety meeting minutes (tool box talks);
* Maintenance records;
* Hearing conservation testing and monitoring records;
* TDG/Hazardous waste records.

The reports generated will be complied monthly to provide management and the safety committee with an overview of their program’s activities and results. Examining these summaries will help in determining trends and setting priorities for future safety program measures and assist in identifying areas of training deficiency.

**Policy Implemented: June 1, 2016**



**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Review Date: June 1, 2016**

**Willy Toews – Company Owner**

**Bristal Hauling Inc. – Year End Injury Summary**

**Starting: Ending:**

|  |  |  |
| --- | --- | --- |
|  | **Personal Injury Cases** |  |
| **Month** | **Lost Time Cases** | **Medical Referrals** | **Days Lost** | **Frequency** | **Severity** |
| 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
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| 10. |  |  |  |  |  |
| 11. |  |  |  |  |  |
| 12. |  |  |  |  |  |
| **Total** |  |  |  |  |  |
| **Average** |  |  |

**Signed: Date:**

**Bristal Hauling Inc. – Monthly Safety Summary**

**Month:**

 This Month Last Month

1. Number Workers Hired:

Number Completed Orientation:

1. Safety Meetings Conducted:

Percentage Attendance:

1. Number Formal Inspections Conducted:

Total Unsafe Acts/Conditions Identified:

Number Corrected:

Number Requiring Action:

1. Total Number of Incidents

Number of Damage Only:

Number of Injury Only:

Number of Injury and Damage:

Number of Near Miss:

1. Number of Investigations Conducted:

Number Outstanding Investigations:

Number of Recommendations Made:

Number Completed Recommendations:

Number Requiring Action:

**Signed: Date:**

 Management Rep.

**Signed: Date:**

Safety Committee Member

**Bristal Hauling Inc. – Monthly Injury Summary**

**Month of: Page: of**

|  |
| --- |
| **Personal Injury Cases** |
|  | **Lost Time Cases** | **Medical Referrals** | **Days Lost** | **Frequency** | **Severity** |
| **Job Location** | **Month** | **Year to Date** | **Month** | **Year to Date** | **Month** | **Year to Date** | **Month** | **Year to Date** | **Month** | **Year to Date** |
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| **Total** |  |  |  |  |  |  |  |  |  |  |
| **Average** |  |  |  |  |

**Signed: Date:**

 Management Rep.

**Signed: Date:**

Safety Committee Member