# **COMMUNITY COUNCIL**

Statistics and Records Policy

The community council will maintain records and statistics relating to health and safety. This will enable community council to monitor and evaluate the health and safety performance of the community, specific jobsites, supervisors and workers.

Below is a list of records that will be used to assess the safety program. The following list will include, but is not limited to:

* training and orientation records
* hazard assessments
* inspections
* incident reports
* tool box talks
* health and safety committee minutes
* investigations
* near misses
* maintenance records
* medical or first aid reports
* discipline records

Summaries of safety and health related records provide community council with an overview of the program’s success or deficiencies. Examining the summaries will help in determining trends and setting priorities for future safety and health program measures.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Community Council Date

For the Period Ending:

 Month/Year

**🞎 Monthly 🞎 Quarterly 🞎 Yearly**

1. Number of Workers Hired:

 Number Completed Orientation:

2. Number of Tool Box Meetings Scheduled:

 Number Conducted:

 Percentage Attendance:

3. Number of Formal Inspections Scheduled:

 Number Completed:

 Total Unsafe Acts/Conditions Identified:

 Number Corrected:

 Number Outstanding: \_\_\_\_\_\_

4. Number of Incidents

 Damage Only:

 Injury Only:

 Injury and Damage:

 No-loss: \_\_\_\_\_\_

 Number of Investigations

 Completed:

 Outstanding:

 Number of Recommendations Made:

 Completed:

 Outstanding:

Comments:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Community Council Date

# **COMMUNITY COUNCIL**

FIRST AID RECORD

|  |  |  |  |
| --- | --- | --- | --- |
| LOCATION OF KIT | NAME | WHAT WAS USED | DATE |
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**IF YOU HAVE USED THE LAST OF ANYTHING IN THIS KIT ADVISE COUNCIL OFFICE IMMEDIATELY.**

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| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
|  | **Personal Injury Cases** |  |  |  |  |
| **Month** | **Lost Time Cases** | **Medical Referrals** | **Days Lost** | **Frequency** | **Severity** | **Totals** |
|  |   |   |   |   |   |   |
| **January** |   |   |   |   |   |   |
| **February** |   |   |   |   |   |   |
| **March** |   |   |   |   |   |   |
| **April** |   |   |   |   |   |   |
| **May** |   |   |   |   |   |   |
| **June** |   |   |   |   |   |   |
| **July** |   |   |   |   |   |   |
| **August** |   |   |   |   |   |   |
| **September** |   |   |   |   |   |   |
| **October** |   |   |   |   |   |   |
| **November** |   |   |   |   |   |   |
| **December** |   |   |   |   |   |   |
|  |   |   |   |   |   |   |
| **Totals** |   |   |   |   |   |   |
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| **Management \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |  |
|  |  |  |  |  |  |  |
| **Date Reviewed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |  |

COMMUNITY COUNCIL

The **Injury Frequency Rate** is calculated as follows:

 No. of recordable cases x 200,000

 No. of employee hours of exposure

The **Injury Severity Rate** is calculated as follows:

 No. of work days lost x 200,000

 No. of employee hours of exposure