

Contractor Safety Pre-Qualification Form

HEALTH, SAFETY AND ENVIRONMENTAL PERFORMANCE

Provide the following data for your firm using your record keeping forms from the past three (3) years.
If the data is not available, please reply with Not Available - N/A.

Safety Performance Definitions and Guidance

- a. **Hours Worked** Employee hours worked last three years. Please report actual scheduled total hours worked and total overtime hours worked. If actual hours worked are not available for certain individuals' hours worked may be estimated. A default of 2000 hours per individual per year can be used as an estimate.
- b. **Recordable Incidents** Recordable cases are those that involve any work-related injury or illness, including death but excluding first-aid injuries.
- c. **Lost Workday Cases** A Lost Workday Case is a medical case that involves fatalities, days away from work cases or restricted work activity cases.
 - **Days Away from Work Case** Where the employee is away from scheduled workday one day or more after the day of a work-related injury or illness. The day of the incident does not count as lost workday. Stop count when total days away and restricted duty days reach 180 or employee leaves the firm.
 - **Restricted Work Activity Case** Where the employee as result of work-related injury or illness:
 - ◊ Assigned to another job on a temporary or permanent basis or
 - ◊ Worked at their permanent job but less than a full day
 - ◊ Could not perform routine functions associated with their permanent job
 The day of the incident is not counted as a Restricted Duty day. Stop count when total days away or restricted duty days reach 180 or if employee leaves the firm.
- d. **Motor Vehicle Incident** A motor vehicle is any mechanically or electrically powered devices (excluding one moved by human power), upon which or by which any person or property may be transported upon a land roadway.
 - **Motor Vehicle Incident** Includes any event involving a motor vehicle that is owned, leased or rented by the firm that results in death, injury or property damage unless the vehicle is properly parked.

Health and Safety Incidents	_____ (Year)	_____ (Year)	_____ (Year)
a. Total Hours Worked			
b. Total Recordable Incidents # Fatalities # Medical Aids # Days Away from Work Cases # Restricted Work Activity Cases			
c. Total Recordable Incident Rate (TRIR) <u>Total # Recordable Incidents x 200,000</u> Total # Hours worked			
d. Lost Workday Cases (LWC) # Fatalities # Days Away from Work Case # Restricted Work Activity Case			
e. Lost Workday Incident Rate (LWDR) <u>Total # Lost Workday Incidents x 200,000</u> Total # Hours Worked			
f. Motor Vehicle Incidents (MVI) # Motor Vehicles Incidents # Kilometers/Miles driven			
g. Motor Vehicle Incident Frequency Rate (MVIFR) <u>Total # of Firm's Motor Vehicle Incidents x 1,000,000</u> Total # Kilometers/Miles driven			