

# Year-end Maintenance Report

(Complete one form for each previous year in the program)

Safety Group Name	WSIB Firm No.
Firm Name	Date (dd/mm/yyyy)
WSIB Account No.	Telephone
Completed By	

Year this set of elements completed in

	Step 1 Set Standards	Step 2 Communicate	Step 3 Train	Step 4 Evaluate	Step 5 Acknowledge success & make improvements
<b>1. Element Name:</b> <input type="checkbox"/> Standard has been reviewed Date: ..... <input type="checkbox"/> Changes were implemented <input type="checkbox"/> Not complete	<input type="checkbox"/> Ongoing communication of element completed as needed <input type="checkbox"/> Communication repeated as needed	<input type="checkbox"/> Training programs are up-to-date <input type="checkbox"/> Re-training complete <input type="checkbox"/> Training records up-to-date	<input type="checkbox"/> Element is still current <input type="checkbox"/> Standard is being followed Date of evaluation: .....	<input type="checkbox"/> Acknowledged contributions to success of element <input type="checkbox"/> Made necessary improvements	
<b>2. Element Name:</b> <input type="checkbox"/> Standard has been reviewed Date: ..... <input type="checkbox"/> Changes were implemented <input type="checkbox"/> Not complete	<input type="checkbox"/> Ongoing communication of element completed as needed <input type="checkbox"/> Communication repeated as needed	<input type="checkbox"/> Training programs are up-to-date <input type="checkbox"/> Re-training complete <input type="checkbox"/> Training records up-to-date	<input type="checkbox"/> Element is still current <input type="checkbox"/> Standard is being followed Date of evaluation: .....	<input type="checkbox"/> Acknowledged contributions to success of element <input type="checkbox"/> Made necessary improvements	
<b>3. Element Name:</b> <input type="checkbox"/> Standard has been reviewed Date: ..... <input type="checkbox"/> Changes were implemented <input type="checkbox"/> Not complete	<input type="checkbox"/> Ongoing communication of element completed as needed <input type="checkbox"/> Communication repeated as needed	<input type="checkbox"/> Training programs are up-to-date <input type="checkbox"/> Re-training complete <input type="checkbox"/> Training records up-to-date	<input type="checkbox"/> Element is still current <input type="checkbox"/> Standard is being followed Date of evaluation: .....	<input type="checkbox"/> Acknowledged contributions to success of element <input type="checkbox"/> Made necessary improvements	
<b>4. Element Name:</b> <input type="checkbox"/> Standard has been reviewed Date: ..... <input type="checkbox"/> Changes were implemented <input type="checkbox"/> Not complete	<input type="checkbox"/> Ongoing communication of element completed as needed <input type="checkbox"/> Communication repeated as needed	<input type="checkbox"/> Training programs are up-to-date <input type="checkbox"/> Re-training complete <input type="checkbox"/> Training records up-to-date	<input type="checkbox"/> Element is still current <input type="checkbox"/> Standard is being followed Date of evaluation: .....	<input type="checkbox"/> Acknowledged contributions to success of element <input type="checkbox"/> Made necessary improvements	
<b>5. Element Name:</b> <input type="checkbox"/> Standard has been reviewed Date: ..... <input type="checkbox"/> Changes were implemented <input type="checkbox"/> Not complete	<input type="checkbox"/> Ongoing communication of element completed as needed <input type="checkbox"/> Communication repeated as needed	<input type="checkbox"/> Training programs are up-to-date <input type="checkbox"/> Re-training complete <input type="checkbox"/> Training records up-to-date	<input type="checkbox"/> Element is still current <input type="checkbox"/> Standard is being followed Date of evaluation: .....	<input type="checkbox"/> Acknowledged contributions to success of element <input type="checkbox"/> Made necessary improvements	

**Signature:** Senior Management \_\_\_\_\_ Telephone \_\_\_\_\_