WSIB ONTARIO CSPAAT

Safety Groups
There's Safety in Numbers

Year-end Maintenance Report
(Complete one form for each previous year in the program)

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

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
1. Element Name: ☐ Not complete	☐ Standard has been reviewed Date: _____ ☐ Changes were implemented	☐ Ongoing communication of element completed as needed ☐ Communication repeated as needed	☐ Training programs are up-to-date ☐ Re-training complete ☐ Training records up-to-date	☐ Element is still current ☐ Standard is being followed Date of evaluation: _____	☐ Acknowledged contributions to success of element ☐ Made necessary improvements
2. Element Name: ☐ Not complete	☐ Standard has been reviewed Date: _____ ☐ Changes were implemented	☐ Ongoing communication of element completed as needed ☐ Communication repeated as needed	☐ Training programs are up-to-date ☐ Re-training complete ☐ Training records up-to-date	☐ Element is still current ☐ Standard is being followed Date of evaluation: _____	☐ Acknowledged contributions to success of element ☐ Made necessary improvements
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Signature: Senior Management | Telephone