

# OPERATIONAL MAINTENANCE PROCEDURE



UNIVERSITY OF  
LINCOLN

<b>Subject:</b>  CONTRACTORS KPI DATA COLLECTION FOR HEALTH & SAFETY MONITORING	E&CS04a	Rev. 07
	Annex 1	Issue Date: 04/10/20
	Owner: T Tomlinson	

Project			
Company			
How many days work have been completed on site this week. (number of staff signed in x number of days worked on site)			
How many different sub contractors companies have been on site this week, please list the companies names on the reverse of this sheet.			
Dates From:		To	

In the below section please tick all types of work that have been carried out on your site this week for any duration longer than ½ a day (4 hours)

Construction		Excavation	
Alteration		Assembly of prefabricated elements	
Conversion		Electrical Services	
Fitting Out		Hydraulic services	
Commissioning		Compressed Air services	
Renovation		Gas (Natural or LPG) services	
Repair or Maintenance		Clean water services	
Demolition		Grey water services	
Site Clearance		Road or footpath works	
Exploratory Investigation			

How many of the following have occurred on your site this week

Near miss incidents	
Injuries requiring first aid	
Injuries requiring medical intervention	
RIDDOR reportable injuries	
Lost time incidents	

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ser.	Sub contractor Company name	Activity employed on
01		
02		
03		
04		
05		
06		
07		
08		
09		
10		
11		
12		
13		
14		
15		
16		
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19		
20		