DESCRIPTION OF REPORTABLE ACCIDENTS

Appendix A

Chief Executives

October 2004

| No. of reportable accidents for month:- | 0 |
|--|---|
| Total number of all injury accidents for month:- | 3 |
| Total number of accidents for month:- | 3 |
| November 2004 | |
| No. of reportable accidents for month:- | 0 |
| Total number of all injury accidents for month:- | 3 |
| Total number of accidents for month:- | 3 |
| December 2004 | |
| No. of reportable accidents for month:- | 0 |
| Total number of all injury accidents for month:- | 2 |
| Total number of accidents for month:- | 2 |

DESCRIPTION OF REPORTABLE ACCIDENTS

Appendix

Directorate of the Environment

A

3

October 2004

No. of reportable accidents for month:-

These were:-

Whilst a Labourer was carrying a slate snooker table top to the vehicle with three other workmen, it was decided to turn it upright. As it was being turned, it twisted and fell onto the Labourer's foot.

A Refuse Operative, whilst carrying out his duties moving refuse from a farm, walked around the open cage door at the rear of the vehicle, hitting his head, resulting in a cut above his left eye which required stitches.

A Bricklayer was pulling duck-board off the back of the van, when the wind caught it and twisted his chest, pulling his chest muscles on the right-hand side.

| Total number of all injury accidents for month:- | 10 |
|--|----|
| Total number of accidents for month:- | 13 |
| November 2004 | |
| No. of reportable accidents for month:- | 1 |

This was:-

A Carpenter was measuring the timber surround to a ceiling, when the steps slipped and folded, causing him to fall an approximate height of five feet, resulting in bruising to knee and hand. He was taken to hospital for x rays.

| Total number of all injury accidents for month:- | 8 |
|--|---|
| Total number of accidents for month:- | 9 |
| December 2004 | |
| No. of reportable accidents for month:- | 2 |

These were:-

A Dog Warden, whilst carrying out her duties, was attacked by a dog which she was trying to restrain. The dog mauled her left hand, possibly requiring surgery.

A Carpenter whilst walking down the stairs, slipped on some polythene which was on the floor, and pulled muscles in the middle of his back.

| Total number of all injury accidents for month:- | 8 |
|--|----|
| Total number of accidents for month:- | 10 |

DESCRIPTION OF REPORTABLE ACCIDENTS

Appendix A

Education and Leisure

October 2004

| No. of reportable accidents for month:- | 1 |
|---|----|
| A Chargehand Gardener, whilst planting flower beds, put his foot into the causing his footing to twist, and immediately felt pain in lower back area, discomfort. | • |
| Total number of all injury accidents for month:- | 10 |
| Total number of accidents for month:- | 11 |
| November 2004 | |
| No. of reportable accidents for month:- | 0 |
| Total number of all injury accidents for month:- | 12 |
| Total number of accidents for month:- | 12 |
| December 2004 | |
| No. of reportable accidents for month:- | 0 |
| Total number of all injury accidents for month:- | 8 |
| Total number of accidents for month:- | 8 |

DESCRIPTION OF REPORTABLE ACCIDENTS Appendix A

Social Services

October 2004

| No. of reportable accidents for month:- | 0 |
|--|----|
| Total number of all injury accidents for month:- | 24 |
| Total number of accidents for month:- | 24 |
| November 2004 | |
| No. of reportable accidents for month:- | 0 |
| Total number of all injury accidents for month:- | 14 |
| Total number of accidents for month:- | 14 |
| December 2004 | |
| No. of reportable accidents for month:- | 0 |
| Total number of all injury accidents for month:- | 13 |
| Total number of accidents for month:- | 13 |

Appendix B

ACCIDENT ANALYSIS FORM ACCIDENT TYPE - CHIEF EXECUTIVES - QUARTERLY STATISTICS – OCTOBER-DECEMBER 2004

| | - | 700 | | | Chief Executive Quarterer Chanched Cotober December 2004 | | | | | | | | | | | | 1 |
|---------------|-------|-----------|-------------|------------|--|-----------|-------------|------------|-------|-----------|-------------|------------|-------|---------|--------------|------------|-------|
| | | Oct | ober | | | No | vember | | | Dece | ember | | | Total f | or Quarter | • | |
| | | Employee | e Accidents | | | Employ | ee Accident | s | | Employee | e Accidents | | | Employ | ee Accidents | - | |
| Accident type | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Total |
| A | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| 8 | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| 2 | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
|) | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| | | | | 3 | | | | 2 | | | | 1 | 0 | 0 | 0 | 6 | 6 |
| 1 | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Ì | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| I | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| ζ | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| , | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| 4 | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| 1 | | | | | | | | | | | | 1 | 0 | 0 | 0 | 1 | 1 |
|) | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| , | | | | | | | | 1 | | | | | 0 | 0 | 0 | 1 | 1 |
| Total | 0 | 0 | 0 | 3 | 0 | 0 | 0 | 3 | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 8 | 8 |
| | - | accidents | - | 3 | Total | accidents | for Nov | 3 | | accidents | for Dec | 2 | | | | | - |

A Contact with moving machinery,or material being machined

B Hit by a moving, falling or flying object

- C Hit by a moving vehicle
- D Hit something fixed or stationary
- E Injured while lifting, handling or carrying
- F Slipped Tripped or fell on same level
- G Fell from height (estimate height)
- H Trapped by something collapsing
- I Drowned or asphyxiated
- J Exposure to, or contact with, a harmful substance
- K Exposure to fire
- L Affected by explosion
- M Contact with electricity, or electrical discharge
- N Injured by an animal
- O Physically assaulted by another person
- P Another kind of accident not classified in A to O, including threats of violence

NATURE OF INJURY CHIEF EXECUTIVES - QUARTERLY STATISTICS – October-December 2004

| tober e Accidents Lost Time | All Injury | Fatal | | mber Accidents Lost Time | All Injury | Fatal | Emplo | December Dyee Accide Lost Time | nts All Injury | Fatal 0 0 | Employ Major 0 0 | for Quarter ree Accident Lost Time 0 0 | is . | Total 0 0 |
|-----------------------------------|---|--|---|---|--|---|---|--|--|--|---|--|---|---|
| Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | 0 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | | 0 | 0 | 0 | Ŭ | ÷ |
| | | | | | | | | | | | | | 0 | 0 |
| | | | | | | | | | | 0 | 0 | | | 0 |
| | 1 | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| | 1 | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| | 1 | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| | 1 | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| | 1 | | | | 1 | | | | | 0 | 0 | 0 | 2 | 2 |
| | 1 | | | | | | | | 1 | 0 | 0 | 0 | 2 | 2 |
| | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| | | | | | 2 | | | | 1 | 0 | 0 | 0 | 3 | 3 |
| | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| | 1 | | | | | | | | | 0 | 0 | 0 | 1 | 1 |
| | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| 0 | 3 | 0 | 0 | 0 | 3 | 0 | 0 | | 2 | 0 | 0 | 0 | 8 | 8 |
| for Oct | 3 | Total a | ccidents for 1 | November | 3 | Total | accide | nts for Dec | 2 | | | | | |
| loss of part/w | hole, digit e | tc. Include | es severance o | of torso, ear o | or nose but o | exclude | s loss o | f tooth or na | 1 | | | | | |
| ajor whether | permanent o | or temporat | ry) | | | | | | | | | | | |
| on, chipped of | r cracked bo | ne; hairlin | e fracture. (n | ajor - other t | han to the f | inger, t | humbs | or toes | | | | | | |
| | | | | cludes disc le | sion and he | rnia an | d exclud | les injuries t | o limbs (ma | jor if conc | ussion le | eads to | | |
| oundo noo-14!- | in | d tan dar | aamia blacii- | vacaala (in -1 | dina dan | a to | a) and - | nto no quini | atitahan (| oion if a 1- | aittan a - | to hospits! f | on mono th | 24hma) |
| i a | for Oct loss of part/w najor whether on, chipped or acture (major ut fracture to | for Oct 3 loss of part/whole, digit e aajor whether permanent of on, chipped or cracked bo acture (major - if shoulder ut fracture to skull, chest, | for Oct 3 Total a loss of part/whole, digit etc. Include aajor whether permanent or tempora on, chipped or cracked bone; hairlin acture (major - if shoulder, hip knee ut fracture to skull, chest, pelvis, ab | for Oct 3 Total accidents for 1 loss of part/whole, digit etc. Includes severance of agior whether permanent or temporary) on, chipped or cracked bone; hairline fracture. (macture (major - if shoulder, hip knee or spine) ut fracture to skull, chest, pelvis, abdomen etc ind | for Oct 3 Total accidents for November loss of part/whole, digit etc. Includes severance of torso, ear of agior whether permanent or temporary) on, chipped or cracked bone; hairline fracture. (major - other tacture (major - if shoulder, hip knee or spine) ut fracture to skull, chest, pelvis, abdomen etc includes disc let | 0 3 0 0 3 for Oct 3 Total accidents for November 3 loss of part/whole, digit etc. Includes severance of torso, ear or nose but or agior whether permanent or temporary) 3 on, chipped or cracked bone; hairline fracture. (major - other than to the fracture (major - if shoulder, hip knee or spine) 4 ut fracture to skull, chest, pelvis, abdomen etc includes disc lesion and he 5 | 0 3 0 0 3 0 for Oct 3 Total accidents for November 3 Total loss of part/whole, digit etc. Includes severance of torso, ear or nose but exclude ajor whether permanent or temporary) on, chipped or cracked bone; hairline fracture. (major - other than to the finger, the acture (major - if shoulder, hip knee or spine) ut fracture to skull, chest, pelvis, abdomen etc includes disc lesion and hernia and the shoulder of the skull, chest, pelvis, abdomen etc includes disc lesion and hernia and the shoulder of the skull, chest, pelvis, abdomen etc includes disc lesion and hernia and the shoulder of the skull, chest, pelvis, abdomen etc includes disc lesion and hernia and the shoulder of the skull, chest, pelvis, abdomen etc includes disc lesion and hernia and the shoulder of the skull, chest, pelvis, abdomen etc includes disc lesion and hernia and the skull of the skull of the skull, chest, pelvis, abdomen etc includes disc lesion and hernia and the skull of | 0 3 0 0 3 0 0 for Oct 3 Total accidents for November 3 Total accidents for November 3 Total accidents for November on, chipped or cracked bone; hairline fracture. (major - other than to the finger, thumbs of acture (major - if shoulder, hip knee or spine) other than to the finger, thumbs of acture to skull, chest, pelvis, abdomen etc includes disc lesion and hernia and excludes dis | 0 3 0 0 3 0 0 for Oct 3 Total accidents for November 3 Total accidents for Dec loss of part/whole, digit etc. Includes severance of torso, ear or nose but excludes loss of tooth or nainajor whether permanent or temporary) Total accidents for Context of the properties of | 0 3 0 0 3 0 0 2 for Oct 3 Total accidents for November 3 Total accidents for Dec 2 loss of part/whole, digit etc. Includes severance of torso, ear or nose but excludes loss of tooth or nail agior whether permanent or temporary) on, chipped or cracked bone; hairline fracture. (major - other than to the finger, thumbs or toes acture (major - if shoulder, hip knee or spine) ut fracture to skull, chest, pelvis, abdomen etc includes disc lesion and hernia and excludes injuries to limbs (maging the state of the skull, chest, pelvis, abdomen etc includes disc lesion and hernia and excludes injuries to limbs (maging the skull) | Image: Constraint of the second se | Image: Construction of the second | Image: | Image: Constraint of the several consequal consequal constraint of the several constraint o |

Contusion injuries which do not break the skin surface, bruises and crushing associated with superficial injuries. Includes damage to eyes.

Burn burns from electrical heating appliances, electricity, flame, hot or cold object, external chemical burns, welders eye flash.

Asphysia / Poison oxygen deficiency and acute ill health effects of the ingestion, absorption or inhalation of toxic corrosive or caustic substances and asphysiation by gases, smoke fumes etc.

Strain strains and sprains inc back pain and torn ligaments

Superficial Abrasions, scratches, blisters, bites or non-venomous insects, foreign body in the eyes causing superficial injury, cuts not requiring stitches, puncture wounds, loss of tooth / nail, graze.

Multiple Injuries of more than one type and where no one injury is more severe

Electricity Loss of consciousness, shock etc from electricity or electrical appliances

Natural Cause Natural causes including heart attack

Other Known Other known nature where the injury can be identified but is not included in another category, includes traumatic shock.

Other Not Known Unknown nature where no information is available to identify the nature of the injury

PART OF THE BODY INJURED

CHIEF EXECUTIVES – QUARTERLY STATISTICS – OCTOBER-DEC 2004

| | | 0 | ctober | | | Nov | ember | | | Dece | ember | | | | | | |
|-----------------------|-------|--------------|--------------|------------|-------|-----------|-------------|------------|---------|-------------|-----------|------------|-------|--------|------------|------------|-------|
| | | Employ | ee Accidents | 5 | | Employe | e Accidents | 5 | 1 | Employee | Accidents | _ | | Employ | ee Accider | nts | |
| Part of the body | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Total |
| Eye | | | | | | | | 1 | | | | | 0 | 0 | 0 | 1 | 1 |
| Ear | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Face -other parts | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Head | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Several Head | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Neck | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Back | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Trunk | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Several Torso | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Finger | | | | 2 | | | | 1 | | | | | 0 | 0 | 0 | 3 | 3 |
| Hand | | | | | | | | 1 | | | | | 0 | 0 | 0 | 1 | 1 |
| Wrist | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Upper Limb | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Several Upper Limb | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Тое | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Foot | | | | | | | | | | | | 1 | 0 | 0 | 0 | 1 | 1 |
| Ankle | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Lower Limb | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Several Lower Limb | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Several Locations | | | | 1 | | | | | | | | | 0 | 0 | 0 | 1 | 1 |
| General Location | | | | | | | | | | | | 1 | 0 | 0 | 0 | 1 | 1 |
| Unspecified Locations | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Total | 0 | 0 | 0 | 3 | 0 | 0 | 0 | 3 | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 8 | 8 |
| | Tota | al accidents | for Oct | 3 | Total | accidents | for Nov | 3 | Total a | accidents f | for Dec | 2 | | | | | |

ACCIDENT ANALYSIS FORM Appendix B ACCIDENT TYPE - DIRECTORATE OF THE ENVIRONMENT - QUARTERLY STATISTICS – OCTOBER-DECEMBER 2004

| | | 0 | ctober | | | Noven | ıber | | | Dec | ember | | | Total for Quarter | | | | | |
|--------------|-------|---------------|--------------|------------|-------|----------------|-----------|---------------|-------|-------------|-------------|------------|-------|-------------------|--------------|------------|-------|--|--|
| | | Employ | ee Accidents | | | Employee A | Accidents | | | Employe | e Accidents | | | Employ | yee Accident | ts | | | |
| ccident Type | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Total | | |
| | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | | |
| | | | | 1 | | | | 1 | | | | | 0 | 0 | 0 | 2 | 2 | | |
| | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | | |
| | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | | |
| | | | 3 | 7 | | | 1 | 7 | | | | 7 | 0 | 0 | 4 | 21 | 25 | | |
| | | | | | | | | | | | 1 | | 0 | 0 | 1 | 0 | 1 | | |
| | | | | | | | | | | | | 1 | 0 | 0 | 0 | 1 | 1 | | |
| | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | | |
| | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | | |
| | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | | |
| | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | | |
| | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | | |
| [| | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | | |
| | | | | | | | | | | 1 | | | 0 | 1 | 0 | 0 | 1 | | |
| | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | | |
| | | | | 2 | | | | | | | | | 0 | 0 | 0 | 2 | 2 | | |
| Total | 0 | 0 | 3 | 10 | 0 | 0 | 1 | 8 | 0 | 1 | 1 | 8 | 0 | 1 | 5 | 26 | 32 | | |
| | Тс | otal accident | s for Oct | 13 | Tot | al accidents f | or Nov | 9 | Tota | l accidents | for Dec | 10 | | | | | | | |

A Contact with moving machinery, or material being machined

B Hit by a moving, falling or flying object

C Hit by a moving vehicle

D Hit something fixed or stationary

E Injured while lifting, handling or carrying

F Slipped Tripped or fell on same level

G Fell from height (estimate height)

H Trapped by something collapsing

I Drowned or asphyxiated

J Exposure to, or contact with, a harmful substance

K Exposure to fire

L Affected by explosion

M Contact with electricity, or electrical discharge

N Injured by an animal

O Physically assaulted by another person

P Another kind of accident not classified in A to O, including threats of violence

NATURE OF INJURY DIRECTORATE OF THE ENVIRONMENT - QUARTERLY STATISTICS – OCTOBER-DECEMBER 2004

| | | | | OF THE I | | | | | AIISI | | | | | | | | |
|--------------------|--------------------|----------------|---------------|------------------|--------------|--------------|----------------|----------------|--------------|---------------|----------------|--------------|------------|-----------|----------------|--------------|-------|
| | | | ctober | | | | ember | | | | ember | | | | l for Quarte | | |
| | | Employ | ee Accidents | | | Employe | e Accidents | | | Employe | e Accidents | | | Emple | oyee Accide | nts | |
| Nature of injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Total |
| Amputation | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Loss of Sight | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Fracture | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Dislocation | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Concuss / Internal | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Laceration | | | 1 | | | | | | | 1 | | | 0 | 1 | 1 | 0 | 2 |
| Contusion | | | 1 | 1 | | | 1 | 4 | | | | 2 | 0 | 0 | 2 | 7 | 9 |
| Burn | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Asphyxia / Poison | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Strain | | | 1 | 3 | | | | 3 | | | 1 | 3 | 0 | 0 | 2 | 9 | 11 |
| Superficial | | | | 4 | | | | | | | | 1 | 0 | 0 | 0 | 5 | 5 |
| Multiple | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Electricity | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Natural Cause | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Other Known | | | | 2 | | | | 1 | | | | | 0 | 0 | 0 | 3 | 3 |
| Other Not Known | | | | | | | | | | | | 2 | 0 | 0 | 0 | 2 | 2 |
| Total | 0 | 0 | 3 | 10 | 0 | 0 | 1 | 8 | 0 | 1 | 1 | 8 | 0 | 1 | 5 | 26 | 32 |
| | Tota | l accidents | for Oct | 13 | Total | accidents | for Nov | 9 | Tota | l accidents | for Dec | 10 | | | | | |
| Amputation | Amputation | n involving | loss of part | /whole, digit | etc. Includ | es severar | ice of torso, | ear or nos | e but exc | ludes loss | of tooth or r | nail | | | | | |
| Loss of Sight | loss of sight | t of eye (m | ajor whether | permanent or | temporary) | | | | | | | | | | | | |
| Fracture | Fracture with | th dislocation | on, chipped o | r cracked bone | ; hairline f | racture. (ma | jor – other th | nan to the fir | nger, thum | bs or toes | | | | | | | |
| Dislocation | Dislocation | without fra | cture (major | - if shoulder, l | nip knee or | spine) | | | | | | | | | | | |
| Concuss / Internal | | | | skull, chest, po | | | | | | | | | | | | | |
| Laceration | Lacerations 24hrs) | and open v | vounds result | ing in severed | tendon, nei | rve, blood v | essels (inclu | ding damag | e to eye) ai | nd cuts requ | iring stitches | (major if a | dmittanc | e to hos | pital for mor | e than | |
| Contusion | , | ch do not h | reak the skin | surface, bruis | es and crust | ning associa | ted with sun | erficial iniu | ries Inclué | les damage i | to eves | | | | | | |
| Burn | - | | | nces, electricit | | - | - | - | | - | - | | | | | | |
| Asphyxia / Poison | | | | th effects of th | | | - | | | - | | sphyxiation | by gase | s, smok | e fumes etc. | | |
| Strain | | - | | l torn ligamen | - | , r | | | | | | 1 / | <i>J</i> 8 | , | | | |
| Superficial | | | | or non-venome | | foreign bod | lv in the eves | s causing sur | perficial in | iury, cuts no | ot requiring s | titches, pun | cture wo | ounds, lo | oss of tooth / | nail. graze. | |
| Multiple | | | | where no one in | | - | ,e eye. | | | J | | , pun | | | | , 8.4.20. | |

Multiple Injuries of more than one type and where no one injury is more severe

Electricity Loss of consciousness, shock etc from electricity or electrical appliances

Natural Cause Natural causes including heart attack

Other Known Other known nature where the injury can be identified but is not included in another category, includes traumatic shock.

Other Not Known Unknown nature where no information is available to identify the nature of the injury

PART OF THE BODY INJURED DIRECTORATE OF THE ENVIRONMENT - QUARTERLY STATISTICS – OCTOBER-DEC 2004

| | | O | ctober | | | Nov | ember | | | Dec | ember | | Total for Quarter | | | | | |
|-----------------------|-------|-------------|-------------|------------|-------|--------------|-------------|------------|-------|-----------|------------|------------|-------------------|---------|-------------|------------|-------|--|
| | | Employ | ee Accident | s | | Employe | e Accidents | | | Employe | e Accident | s | | Employe | e Accidents | | | |
| Part of body | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Total | |
| Eye | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Ear | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Face -other parts | | | 1 | | | | | | | | | | 0 | 0 | 1 | 0 | 1 | |
| Head | | | | 2 | | | | | | | | | 0 | 0 | 0 | 2 | 2 | |
| Several Head | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Neck | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Back | | | | | | | | 1 | | | 1 | 2 | 0 | 0 | 1 | 3 | 4 | |
| Trunk | | | | | | | | 2 | | | | 1 | 0 | 0 | 0 | 3 | 3 | |
| Several Torso | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Finger | | | | 1 | | | | | | | | 1 | 0 | 0 | 0 | 2 | 2 | |
| Hand | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Wrist | | | | | | | | 1 | | 1 | | | 0 | 1 | 0 | 1 | 2 | |
| Upper Limb | | | | 1 | | | | 1 | | | | | 0 | 0 | 0 | 2 | 2 | |
| Several Upper Limb | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Тое | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Foot | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Ankle | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Lower Limb | | | 1 | 3 | | | | 3 | | | | 1 | 0 | 0 | 1 | 7 | 8 | |
| Several Lower Limb | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Several Locations | | | | 1 | | | 1 | | | | | 3 | 0 | 0 | 1 | 4 | 5 | |
| General Location | | | 1 | | | | | | | | | | 0 | 0 | 1 | 0 | 1 | |
| Unspecified Locations | | | | 2 | | | | | | | | | 0 | 0 | 0 | 2 | 2 | |
| Total | 0 | 0 | 3 | 10 | 0 | 0 | 1 | 8 | 0 | 1 | 1 | 8 | 0 | 1 | 5 | 26 | 32 | |
| | Tota | l accidents | for Oct | 13 | Tota | al accidents | for Nov | 9 | Total | accidents | for Dec | 10 | | | | | | |

ACCIDENT ANALYSIS FORM Appendix B ACCIDENT TYPE - EDUCATION & LEISURE - QUARTERLY STATISTICS- OCTOBER-DECEMBER 2004

| | | Oc | tober | | | Nov | ember | | | Dece | mber | | Total for Quarter | | | | | |
|---------------|-------|----------------------------|------------|------------|----------------------------|---------|------------|------------|-------|---------------|-----------|---|--------------------|-------|-----------|------------|-------|--|
| | | Employe | e Accident | s | | Employe | e Accident | <u>s</u> | | Employee | Accidents | ۱ <u>ــــــــــــــــــــــــــــــــــــ</u> | Employee Accidents | | | | | |
| Accident type | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Total | |
| А | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| В | | | | 1 | | | | | | | | 1 | 0 | 0 | 0 | 2 | 2 | |
| С | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| D | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Е | | | 1 | 3 | | | | 8 | | | | 3 | 0 | 0 | 1 | 14 | 15 | |
| F | | | | 2 | | | | 1 | | | | 2 | 0 | 0 | 0 | 5 | 5 | |
| G | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| н | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| I | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| J | | | | 1 | | | | | | | | | 0 | 0 | 0 | 1 | 1 | |
| К | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| L | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| М | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| N | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| 0 | | | | 2 | | | | 1 | | | | | 0 | 0 | 0 | 3 | 3 | |
| Р | | | | 1 | | | | 2 | | | | 2 | 0 | 0 | 0 | 5 | 5 | |
| Total | 0 | 0 | 1 | 10 | 0 | 0 | 0 | 12 | 0 | 0 | 0 | 8 | 0 | 0 | 1 | 30 | 31 | |
| | Tota | Total accidents for Oct 11 | | | Total accidents for Nov 12 | | | | | l accidents f | for Dec | 8 | | | | | | |

A Contact with moving machinery, or material being machined

B Hit by a moving, falling or flying object

- C Hit by a moving vehicle
- D Hit something fixed or stationary
- E Injured while lifting, handling or carrying
- F Slipped Tripped or fell on same level
- G Fell from height (estimate height)
- H Trapped by something collapsing
- I Drowned or asphyxiated
- J Exposure to, or contact with, a harmful substance
- K Exposure to fire
- L Affected by explosion
- M Contact with electricity, or electrical discharge
- N Injured by an animal
- O Physically assaulted by another person
- P Another kind of accident not classified in A to O, including threats of violence

NATURE OF INJURY

| | EDUCAT | TION & L | EISURE · | · QUART | EKLYS | STATIS | 100 - 00 | TOBER-D | ECEMB | EK 2004 | | | | | | | _ |
|--------------------|------------|-------------|-------------|------------|-------|---------------|----------------|-------------|---------------|---------|-------------|------------|-------|-------|-----------|------------|-------|
| | | Oct | ober | | | No | ovember | | | Dec | ember | | | | | | |
| | | Employee | Accidents | - | | Employ | yee Acciden | ts | | Employe | e Accidents | |] | | | | |
| Nature of injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Total |
| Amputation | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Loss of Sight | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Fracture | | | | | | | | | | | | 1 | 0 | 0 | 0 | 1 | 1 |
| Dislocation | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Concuss / Internal | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Laceration | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Contusion | | | | 3 | | | | 5 | | | | 3 | 0 | 0 | 0 | 11 | 11 |
| Burn | | | | | | | | | | | | 1 | 0 | 0 | 0 | 1 | 1 |
| Asphyxia / Poison | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Strain | | | 1 | 2 | | | | 3 | | | | 1 | 0 | 0 | 1 | 6 | 7 |
| Superficial | | | | 2 | | | | 4 | | | | | 0 | 0 | 0 | 6 | 6 |
| Multiple | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Electricity | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Natural Cause | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Other Known | | | | 2 | | | | | | | | 1 | 0 | 0 | 0 | 3 | 3 |
| Other Not Known | | | | 1 | | | | | | | | 1 | 0 | 0 | 0 | 2 | 2 |
| Total | 0 | 0 | 1 | 10 | 0 | 0 | 0 | 12 | 0 | 0 | 0 | 8 | 0 | 0 | 1 | 30 | 31 |
| | Tota | Tot | al accident | s for Nov | 12 | Tot | tal accidents | for Dec | 8 | | | | | | | | |
| Amoutation | Amoutation | of nort/who | la diaitata | Includes | | ftonco con on | noco hut orolu | dag lagg of | tooth on noil | | | | | | | | |

EDUCATION & LEISURE - QUARTERLY STATISTICS – OCTOBER-DECEMBER 2004

| Amputation | Amputation involving loss of part/whole, digit etc. Includes severance of torso, ear or nose but excludes loss of tooth or nail |
|--------------------|--|
| Loss of Sight | loss of sight of eye (major whether permanent or temporary) |
| Fracture | Fracture with dislocation, chipped or cracked bone; hairline fracture. (major - other than to the finger, thumbs or toes |
| Dislocation | Dislocation without fracture (major - if shoulder, hip knee or spine) |
| Concuss / Internal | Internal damage without fracture to skull, chest, pelvis, abdomen etc includes disc lesion and hernia and excludes injuries to limbs (major if concussion leads to unconsciousness) |
| Laceration | lacerations and open wounds resulting in severed tendon, nerve, blood vessels (including damage to eye) and cuts requiring stitches (major if admittance to hospital for more than 24hrs) |
| Contusion | injuries which do not break the skin surface, bruises and crushing associated with superficial injuries. Includes damage to eyes. |
| Burn | burns from electrical heating appliances, electricity, flame, hot or cold object, external chemical burns, welders eye flash. |
| Asphyxia / Poison | oxygen deficiency and acute ill health effects of the ingestion, absorption or inhalation of toxic corrosive or caustic substances and asphyxiation by gases, smoke fumes etc. |
| Strain | strains and sprains inc back pain and torn ligaments |
| Superficial | Abrasions, scratches, blisters, bites or non-venomous insects, foreign body in the eyes causing superficial injury, cuts not requiring stitches, puncture wounds, loss of tooth / nail, graze. |
| Multiple | Injuries of more than one type and where no one injury is more severe |
| Electricity | Loss of consciousness, shock etc from electricity or electrical appliances |
| Natural Cause | Natural causes including heart attack |
| Other Known | Other known nature where the injury can be identified but is not included in another category, includes traumatic shock. |
| Other Not Known | Unknown nature where no information is available to identify the nature of the injury |

PART OF THE BODY INJURED

EDUCATION & LEISURE - QUARTERLY STATISTICS – OCTOBER-DEC 2004

| | | Oc | tober | | | Nov | ember | | | Dec | ember | | Total for Quarter | | | | |
|-----------------------|-------------------------|---------|------------|------------|-------|-------------|-------------|------------|-------|--------------|------------|------------|-------------------|--------|-------------|------------|-------|
| | | Employe | e Accident | s | | Employe | e Accidents | 5 | | Employe | e Accident | s | | Employ | ee Accident | ts | |
| Part of body | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Total |
| Eye | | | | | | | | 2 | | | | 2 | 0 | 0 | 0 | 4 | 4 |
| Ear | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Face -other parts | | | | | | | | 1 | | | | | 0 | 0 | 0 | 1 | 1 |
| Head | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Several Head | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Neck | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Back | | | 1 | 1 | | | | 3 | | | | 1 | 0 | 0 | 1 | 5 | 6 |
| Trunk | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Several Torso | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Finger | | | | 2 | | | | | | | | | 0 | 0 | 0 | 2 | 2 |
| Hand | | | | | | | | 1 | | | | 1 | 0 | 0 | 0 | 2 | 2 |
| Wrist | | | | | | | | | | | | 1 | 0 | 0 | 0 | 1 | 1 |
| Upper Limb | | | | | | | | 1 | | | | | 0 | 0 | 0 | 1 | 1 |
| Several Upper Limb | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Тое | | | | | | | | | | | | 1 | 0 | 0 | 0 | 1 | 1 |
| Foot | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Ankle | | | | | | | | 1 | | | | | 0 | 0 | 0 | 1 | 1 |
| Lower Limb | | | | | | | | 2 | | | | 1 | 0 | 0 | 0 | 3 | 3 |
| Several Lower Limb | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Several Locations | | | | 6 | | | | 1 | | | | 1 | 0 | 0 | 0 | 8 | 8 |
| General Location | | | | 1 | | | | | | | | | 0 | 0 | 0 | 1 | 1 |
| Unspecified Locations | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Total | 0 | 0 | 1 | 10 | 0 | 0 | 0 | 12 | 0 | 0 | 0 | 8 | 0 | 0 | 1 | 30 | 31 |
| | Total accidents for Oct | | | 11 | Tota | l accidents | for Nov | 12 | Tota | al accidents | for Dec | 8 | | | | | |

Appendix B

ACCIDENT ANALYSIS FORM ACCIDENT TYPE - SOCIAL SERVICES - QUARTERLY STATISTICS –OCTOBER-DECEMBER 2004

| 1 | | Oct | ober | | | vember | | De | cember | | | | | | | | |
|---------------|----------------------------|----------|-----------|------------|------------------------------|--------|-----------|------------|--------|---------|------------|------------|-------|-------|-----------|------------|-------|
| | | Employee | Accidents | | Employee Accidents | | | | E | mploy | ee Acciden | nts | | | | | |
| Accident Type | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Total |
| A | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| В | | | | 1 | | | | | | | | 2 | 0 | 0 | 0 | 3 | 3 |
| С | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| D | | | | | | | | 2 | | | | | 0 | 0 | 0 | 2 | 2 |
| Е | | | | 4 | | | | 1 | | | | 4 | 0 | 0 | 0 | 9 | 9 |
| F | | | | 3 | | | | 4 | | | | | 0 | 0 | 0 | 7 | 7 |
| G | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| Н | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| I | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| J | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| К | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| L | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| М | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| N | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 |
| 0 | | | | 13 | | | | 5 | | | | 4 | 0 | 0 | 0 | 22 | 22 |
| P | | | | 3 | | | | 2 | | | | 3 | 0 | 0 | 0 | 8 | 8 |
| Total | 0 | 0 | 0 | 24 | 0 | 0 | 0 | 14 | 0 | 0 | 0 | 13 | 0 | 0 | 0 | 51 | 51 |
| | Total accidents for Oct 24 | | | 24 | 4 Total accidents for Nov 14 | | | | | ccident | s for Dec | 13 | | | | | |

A Contact with moving machinery, or material being machined

B Hit by a moving, falling or flying object

- C Hit by a moving vehicle
- D Hit something fixed or stationary
- E Injured while lifting, handling or carrying
- F Slipped Tripped or fell on same level
- G Fell from height (estimate height)
- H Trapped by something collapsing
- I Drowned or asphyxiated
- J Exposure to, or contact with, a harmful substance
- K Exposure to fire
- L Affected by explosion
- M Contact with electricity, or electrical discharge
- N Injured by an animal
- O Physically assaulted by another person
- P Another kind of accident not classified in A to O, including threats of violence

NATURE OF INJURY

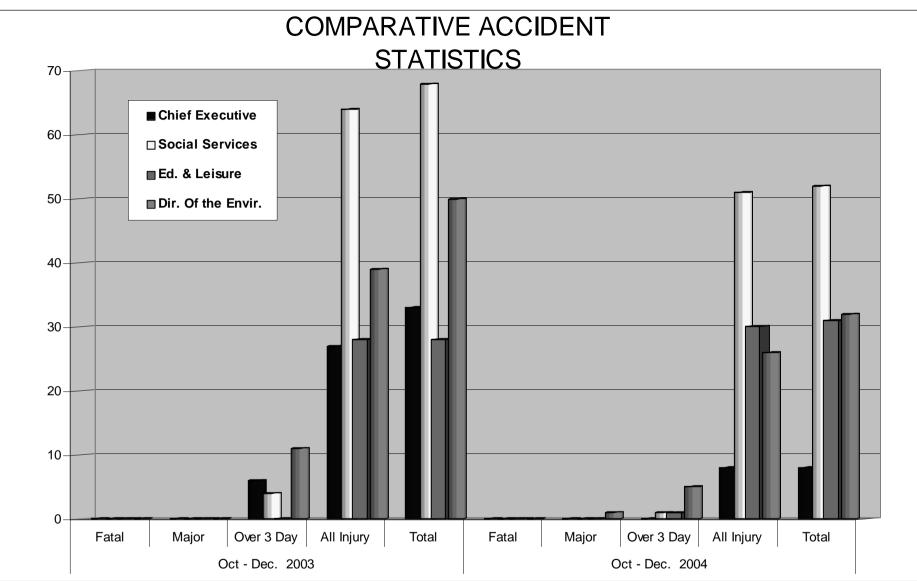
SOCIAL SERVICES - QUARTERLY STATISTICS OCTOBER-DECEMBER 2004

`

| | | Oc | ctober | | | Nov | ember | | | Dec | ember | | Total for Quarter | | | | | |
|--------------------|--------------|----------------|----------------|-------------------|---------------|---------------|-----------------|-----------------|--------------|----------------|-----------------|---------------|--------------------|-------------|------------------|------------|------|--|
| | | Employ | ee Accident | s | | Employe | e Accidents | | | Employe | e Accidents | 6 | Employee Accidents | | | | | |
| Nature of injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Tota | |
| Amputation | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Loss of Sight | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Fracture | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Dislocation | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Concuss / Internal | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Laceration | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Contusion | | | | 2 | | | | 2 | | | | 4 | 0 | 0 | 0 | 8 | 8 | |
| Burn | | | | 2 | | | | 1 | | | | 1 | 0 | 0 | 0 | 4 | 4 | |
| Asphyxia / Poison | | | | 1 | | | | | | | | | 0 | 0 | 0 | 1 | 1 | |
| Strain | | | | 1 | | | | 2 | | | | 1 | 0 | 0 | 0 | 4 | 4 | |
| Superficial | | | | 3 | | | | 2 | | | | 2 | 0 | 0 | 0 | 7 | 7 | |
| Multiple | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Electricity | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Natural Cause | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Other Known | | | | 5 | | | | | | | | | 0 | 0 | 0 | 5 | 5 | |
| Other Not Known | | | | 10 | | | | 7 | | | | 5 | 0 | 0 | 0 | 22 | 22 | |
| Total | 0 | 0 | 0 | 24 | 0 | 0 | 0 | 14 | 0 | 0 | 0 | 13 | 0 | 0 | 0 | 51 | 51 | |
| | Tota | l accidents | for Oct | 24 | Tota | al accidents | for Nov | 14 | Tota | al accidents | for Dec | 13 | | | | | | |
| Amputation | Amputation | n involving | loss of part/w | hole, digit etc | . Includes s | everance of | torso, ear or r | nose but excl | udes loss o | of tooth or na | ail | | - | | | | | |
| Loss of Sight | loss of sigh | t of eye (m | ajor whether | permanent or | temporary) | | | | | | | | | | | | | |
| Fracture | Fracture wi | th dislocation | on, chipped o | r cracked bon | e; hairline f | racture. (maj | jor - other tha | n to the fing | er, thumbs | or toes | | | | | | | | |
| Dislocation | Dislocation | n without fra | cture (major | - if shoulder, l | nip knee or | spine) | | | | | | | | | | | | |
| Concuss / Internal | Internal dar | mage withou | ut fracture to | skull, chest, p | elvis, abdor | nen etc inclu | ides disc lesio | on and hernia | and exclu | des injuries | to limbs (maj | or if concuss | sion lead | ls to uncor | sciousness) | | | |
| Laceration | lacerations | and open w | ounds resulti | ng in severed | endon, ner | ve, blood ves | ssels (includii | ng damage to | o eye) and o | cuts requirin | ng stitches (m | ajor if admit | tance to | hospital fo | or more than 2 | 4hrs) | | |
| Contusion | injuries wh | ich do not b | reak the skin | surface, bruis | es and crus | hing associat | ted with super | rficial injurie | es. Includes | damage to | eyes. | | | | | | | |
| Burn | burns from | electrical h | eating applia | nces, electricit | y, flame, ho | ot or cold ob | ject, external | chemical bu | rns, welder | s eye flash. | | | | | | | | |
| Asphyxia / Poison | oxygen def | iciency and | acute ill heal | th effects of th | e ingestion | , absorption | or inhalation | of toxic corr | osive or ca | ustic substa | nces and aspl | nyxiation by | gases, si | moke fum | es etc. | | | |
| Strain | strains and | sprains inc | back pain and | l torn ligamen | ts | | | | | | | | | | | | | |
| Superficial | Abrasions, | scratches, b | listers, bites | or non-venom | ous insects, | foreign bod | y in the eyes o | causing supe | rficial inju | ry, cuts not | requiring stite | hes, punctur | e wound | ds, loss of | tooth / nail, gr | aze. | | |
| Multiple | Injuries of | more than o | ne type and v | where no one i | njury is mo | re severe | | | | | | | | | | | | |
| Electricity | Loss of con | nsciousness, | shock etc fro | om electricity of | or electrical | appliances | | | | | | | | | | | | |
| Natural Cause | Natural cau | ises includir | ng heart attac | k | | | | | | | | | | | | | | |
| Other Known | Other know | vn nature wł | nere the injur | y can be identi | fied but is | not included | in another ca | tegory, inclu | ides trauma | tic shock. | | | | | | | | |
| Other Not Known | Unknown | nature wh | ere no infor | mation is av | ailable to i | identify the | nature of th | ne injury | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |

PART OF THE BODY INJURED SOCIAL SERVICES -QUARTERLY STATISTICS – OCTOBER-DEC 2004

| | Oc | tober | | November December Total for Qua | | | | | | | | or Quarter | • |] | | | | |
|-----------------------|-------|-------------|--------------|---|-------|----------------|-----------|---------------|-------|---------|--------------|------------|--------------------|-------|-----------|------------|-------|--|
| | | Employe | ee Accidents | S | | Employee | Accidents | | | Empl | oyee Accid | ents | Employee Accidents | | | | | |
| Part of Body | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Fatal | Major | Lost Time | All Injury | Total | |
| Eye | | | | | | | | 1 | | | | | 0 | 0 | 0 | 1 | 1 | |
| Ear | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Face -other parts | | | | 2 | | | | | | | | | 0 | 0 | 0 | 2 | 2 | |
| Head | | | | | | | | | | | | 2 | 0 | 0 | 0 | 2 | 2 | |
| Several Head | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Neck | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Back | | | | 1 | | | | | | | | 1 | 0 | 0 | 0 | 2 | 2 | |
| Trunk | | | | 1 | | | | | | | | | 0 | 0 | 0 | 1 | 1 | |
| Several Torso | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Finger | | | | 2 | | | | | | | | 1 | 0 | 0 | 0 | 3 | 3 | |
| Hand | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Wrist | | | | 1 | | | | 1 | | | | 1 | 0 | 0 | 0 | 3 | 3 | |
| Upper Limb | | | | 3 | | | | 3 | | | | 1 | 0 | 0 | 0 | 7 | 7 | |
| Several Upper Limb | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Тое | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Foot | | | | 1 | | | | | | | | | 0 | 0 | 0 | 1 | 1 | |
| Ankle | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Lower Limb | | | | | | | | 2 | | | | | 0 | 0 | 0 | 2 | 2 | |
| Several Lower Limb | | | | | | | | | | | | | 0 | 0 | 0 | 0 | 0 | |
| Several Locations | | | | 5 | | | | 3 | | | | 1 | 0 | 0 | 0 | 9 | 9 | |
| General Location | | | | 1 | | | | | | | | | 0 | 0 | 0 | 1 | 1 | |
| Unspecified Locations | | | | 7 | | | | 4 | | | | 6 | 0 | 0 | 0 | 17 | 17 | |
| Total | 0 | 0 | 0 | 24 | 0 | 0 | 0 | 14 | 0 | 0 | 0 | 13 | 0 | 0 | 0 | 51 | 51 | |
| | Tota | l accidents | for Oct | 24 | Tot | al accidents f | or Nov | 14 | Tota | l accid | ents for Dec | 13 | | | | | | |



Appendix C