

## Safety Intervention Grant Case Study

### One Year Case Study

#### 1. Company Information

Company Name	<input type="text"/>
Policy Number	<input type="text"/>
Application Number	<input type="text"/>
Employer Contact Name	<input type="text"/>
Total Number of Employees	<input type="text"/>
Number of Employees Affected by Intervention(s)	<input type="text"/>

#### 2. Please provide picture(s) in a word document of the intervention(s) being used.

No file chosen

#### 3. What intervention(s) were implemented?

#### 4. How did the intervention(s) improve safety?

#### 5. What feedback have affected employees of the intervention(s) given in regards to using the equipment?

#### 6. Provide productivity data for the intervention(s). (i.e. parts produced per hour, service time or task time improvements, etc.) The data should compare productivity before and after the intervention(s).

#### 7. Please provide quality data for the intervention(s). (i.e. missed deadlines, reduced work, etc.) The data should compare quality before and after the intervention(s).

8. Fill-in the cost/benefit analysis below. Some cells may contain "0". However if in the grant application productivity or other savings were anticipated, they would likely be expected below.

A. Intervention Cost	<input type="text"/>
B. Training Costs	<input type="text"/>
C. Maintenance and Other Costs	<input type="text"/>
D. Cost of claims related to the intervention for the two year baseline reporting period.	<input type="text"/>
E. Cost of claims related to the intervention for the one year follow-up reporting period.	<input type="text"/>
F. Number of hours saved in production time this year because of the intervention.	<input type="text"/>
G. Number of hours saved in less re-work this year because of the intervention.	<input type="text"/>
H. Number of hours saved in absenteeism this year because of the intervention.	<input type="text"/>
I. Average hourly wage of affected employees.	<input type="text"/>
J. Other cost savings because of the intervention	<input type="text"/>

9. If you had other cost savings as a result of the intervention(s) please describe them below.

10. Is there any other information you would like us to know regarding the intervention(s)?

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