

GOVERNOR'S SAFETY AWARD OF EXCELLENCE – Eligibility Criteria

GOVERNOR'S SAFETY AWARD OF EXCELLENCE



The Governor's Safety Award of Excellence is presented to organizations demonstrating distinction in safety and health systems that protect their employees in the workplace and promote superior corporate citizenship. Large, small and project based organizations who have excelled in safety in health in 2016 are encouraged to apply. Organizations that have demonstrated their commitment to health and safety by the application of risk reduction techniques which contributed to the reduction of injuries are eligible to be considered for the award of excellence.

This recognition is awarded to a group that has demonstrated excellence in safety and health systems that protect employees.

A group may be defined as a company; corporation; government entity; non-profit; or other group. Groups may submit nominations for smaller business units such as an operating unit, a division, a regional office, a department, etc., or an organization-wide basis.

Persons submitting a nomination attest that all material submitted are correct to the best of their knowledge.

Eligibility Criteria

To be eligible for the various awards, specific eligibility criteria must be met as described in **Attachment A**. The highest ranking officer/manager of the applicant company is required to certify eligibility of the company to receive the award. If the information certified in the application proves to be incorrect, the company will be disqualified from receiving the award.

This award is open to all organizations and companies that are committed to demonstrating to their commitment and continuous improvement in the safety and health of their employees and/or other Alaskans.

Application Process

The Governors Safety and Health Awards Committee must receive your completed and signed application for the 2017 award year by Friday, March 10th, 2017 5pm AST. The award application process consists of completing Attachment A and B and attaching any relevant information with the attachments.

Apply for the awards via email or by mail. The application forms may be signed electronically or

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emailed with the signature as a pdf file sent to dol.asac@alaska.gov. If you do not get a response within a day or two, please contact dol.asac@alaska.gov or call 907-465-4855 to ensure that an application was received. To apply by mail, complete the attached forms and return to *Alaska Occupational Safety & Health, Labor, 1251 Muldoon Road, Suite 109 Anchorage, AK 99504*.

The application is located in **Attachment B**.

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Eligibility

Large and small companies, organizations, jobs, projects or groups must have **at least three years of data** to be eligible for this award.

Project based award - A small or large organization may submit nominations for smaller business units or projects, such as an operating unit, a division, a regional office, etc.) run by common management above a supervisory level, or on a group-wide basis. For instance, separate “jobs” run by the same business unit of a company must all be considered in the nominee’s submission. Separate offices of a business unit must all be considered in the nomination. The nomination must describe the nominee’s relationship to its holding company, or other related organizations.

Companies that perform work regulated by other government entities other than Alaska Occupational Safety and Health (AKOSH), such as MSHA, DOT, US Coast Guard, etc. are encouraged to apply. They must still provide all the relevant information as other companies but rather than OSH Logs, they are required to submit the relevant injury/illness information for their industry or as requested in section I and II of Attachment A.

Documentation

Except as described above for entities not governed by 29 CFR 1904, *Recordkeeping*; applications must include the 2014, 2015, 2016 OSHA Form 300 Log of Work Related Injuries and Illnesses **AND** OSHA’s Form 300A Summary of Work-Related Injuries and Illnesses for those 3 years.

Companies should obscure all personal employee information from the Form 300 and any submitted injury/illness information included in this application.

Violations

Any group submitting a nomination with serious, willful or repeat violations issued by AKOSH (or other regulatory offices such as MSHA) are not eligible for an award in the year the violation was issued or in the year in which there are outstanding violations of the above types. AKOSH will verify that the nominee does not exceed the AKOSH violations criteria.

Also, the State of Alaska will review the application and ensure the submitting company or organization is a good corporate citizen in regards to environmental rules, legal issues, wage and hour, etc. Persons submitting and signing the nomination attest that all material submitted is correct to the best of their knowledge. The highest-ranking officer of the group submitted must also sign submissions.

Work description

Applicants must provide a short description of the work they perform.

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NAICS codes

Nominee must have a 10% or more Total Recordable Incident Rate (TRIR) below the recordable rates for their NAICS or SAIC code classification to demonstrate they are working above and beyond the normal standards for their industry. If the company applying for the award is not required to submit OSH logs, they must still submit their rates and have a 10% or more reduction in their rates annually to demonstrate continuous improvement.

Continued excellence and/or continuous improvement

The application must show a demonstrated improvement or continued excellence in results, from previous years, over all three years, culminating in a high level of achievement, or a very high level of achievement maintained over all three years.

Results may be measured as a reduction in frequency and severity (reduction in lost workday injuries or days, reduced number of recordable injuries, reduction in workers compensation claim costs, or whatever traditional measurements are used by the nominee's industry).

Safety programs/Methods of Risk control

Applicant must discuss how their safety and or risk programs have enabled them to be successful and continually improving. Short examples of the program referenced must be submitted with the application (e.g....Hazard Identification, Job Hazard Analysis, behavior based safety, Training Program etc.).

Applicants should provide evidence by at least one example of reduced risk to the employee through risk reduction techniques such as prevention through design (ANSI590), engineering out a hazard, use of administrative controls and use of PPE.

Completed applications must be received no later than March 10th, 2017 @ 5:00pm AST. Please send completed applications to: dol.asac@alaska.gov or call 907-465-4855 for more information.

NOTE: If additional information or clarification is needed by the award committee, the applicant will be notified by **March 13th, 2017** and will have until **March 13th, 2017 5:00pm AST** to submit those clarifications or documents. The applicant will be disqualified if any of the data proves incorrect or the applicant unresponsive.

End of this section

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Date of Submission of Application _____

Name of Company/Agency Division/Operating Unit:	
Company Name: (as it would appear on the award)	
Mailing Address:	
Physical Address:	
Phone Number:	
Fax Number:	
SIC/NAICS Code:	

Is this a division/department of a larger organization? yes no

Group size (number of employees): 1 – 50 51 – 300 300+

Size: (check or highlight one)

- Small Company/Organization - Eligibility for consideration for the award as a small company requires that a company performs less than 10,000 man hours of work annually, which can equate to 5 full time employees.
- Large Company/Organization

Application Individual:	
Mailing Address:	
City, State, Zip:	
Phone Number:	
Fax Number:	
Email:	
Affiliation to Application	

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organization:	
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The information provided in this nomination is correct to the best of my knowledge.

Signature

Date

Work Description/scope:

Continued excellence and/or continuous improvement

I. Safety Performance, Injury/Illness Data

Note: There must be a demonstrated improvement in results. These may be measured as reductions in Total Recordable Incidence Rate (TRIR) and Days Away/Restricted and Transfer Incidence Rate (DART). The application must show a trend in improvement from previous years.

Table 1 – Injury/Illness Data

Year	2014	2015	2016
Total Work Hours			
Average Number of Employees			
Number of Recordable Injury & Illness Cases			
Number of Days Away/Restricted/Transfer Cases			
Total Recordable Incident Rate (TRIR)			
Number of Days Away/Restricted/Transfer Rate			
Severity Rate			
EMR			
NAICS or SIC Rate from BLS			

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% Above or Below NAICS or SIC Rate			
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II. Injury/Illness Investigation and Corrective Action

If your company experienced injuries and illnesses as noted in in Table 1, briefly describe the mitigations and corrective actions resulting from the injury/illness investigations. For example, were engineering controls installed or work processes changed as a result of an incident? (500 words or less)

III. Safety	Improvement	Discussion
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Briefly describe how your organization demonstrated improvement or continued excellence in results, from previous years, over all three years, culminating in a high level of achievement, or a very high level of achievement maintained over all three years. Specifically identify what programs or processes made you successful. Results may be measured as a reduction in frequency and severity (reduction in lost workday injuries or days, reduced number of recordable injuries, reduction in workers compensation claim costs, or whatever traditional measurements are used by the nominee's industry). (500 words or less)

IV. Management Commitment

Describe how management provides visible leadership in implementing the safety and health program. Describe how safety and health fits into the overall organization. (500 words or less)

V. Employee Commitment

Describe at least three ways employees are involved in the safety and health process. (500 words or less)

VI Safety programs/Methods of Risk control

Describe the safety and/or risk programs have enabled success and continuous improvement. Short examples of the program referenced must be submitted with the application (e.g. hazard Identification, Job

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Hazard Analysis, behavior based safety, Training Program etc.). (500 words or less)

VII Risk Reduction

Describe at least one example of reduced risk to the employee through risk reduction techniques such as prevention through design (ANSI590), engineering out a hazard, use of administrative controls and use of PPE. (500 words or less)

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When describing items required in Attachment B, please limit all responses to 500 words or less.

This table describes how to calculate numbers required in Table 1 of Attachment B.

If the organization does not track their rates and is not required to do so per OSHA 1910 regulations, (usually due to size or industry code), they should submit actual numbers of incidents per man-hours.

Number of Recordable Injury & Illness Cases	List the total number of recordable cases that occurred in that year.
Number of Days Away/Restricted/Transfer Cases (DART)	List the total number of DART cases that occurred in that year.
TRIR	Calculate your TRIR which is done by (Total Recordable Injuries and Illnesses Cases) x 200,000/Total hours worked
DART Rate (Days Away/Restricted/Transfer Cases Rate) x 200,000 Total hours worked	Calculate your DART rate which is done by (Total DART Cases) x 200,000/Total hours worked
Severity Rate	Calculate your Severity rate which is done by (Total Lost Work and Work Transfer days) x 200,000/Total hours worked
EMR	Experience Modification Rate – provided by your insurance provider
BLS national average = [(Site rate – BLS rate)] x 100	BLS rates are located at the Bureau of Labor and Statistics web site: http://data.bls.gov/iirc/
BLS rate BLS data: Insert the TRIR and DART rate for your industry from the BLS’s Table of Incidence Rates of Nonfatal Occupational Injuries and Illnesses by Industry, can be found at Table 1: http://www.bls.gov/news.release/osh.t01.htm	Reference materials: Table 1. Incidence rates of nonfatal occupational injuries and illnesses by case type and ownership, selected industries, 2014