



26th Annual Occupational Safety Awards Entry Form 2017

While some marks are allocated to the contents of the entry form and statistics section, it is the content of the overall submission that is important. Your submission should follow the structure of heading numbers 1 - 11 as indicated on the website SafetyAwards.ie

**PLEASE SEPARATE ENTRY FORM AND PAYMENT FROM SUBMISSION.
PLEASE PRINT IN CAPITALS USING A BLACK PEN OR TYPE IN DETAILS.**

Name of Organisation: _____

Address: _____

State whether the whole organisation/ division/ single site, etc. is to be considered in this application: _____

- Region¹ to which your entry refers to *Please tick one only:*
- | |
|---|
| <input type="checkbox"/> Northern Ireland |
| <input type="checkbox"/> East <input type="checkbox"/> Midlands <input type="checkbox"/> Mid West <input type="checkbox"/> North East |
| <input type="checkbox"/> North West <input type="checkbox"/> South <input type="checkbox"/> South East <input type="checkbox"/> West |

Product / Service Provided: _____

Main Business Category² [please select relevant category from list below]: _____

If your entry is **construction related**, which forms the main part of your business? *Please tick one only:*

- | | | |
|---|--|--|
| <input type="checkbox"/> Building Services (Mechanical / Electrical) | <input type="checkbox"/> Civil Engineering | <input type="checkbox"/> Road Finishing Contractors |
| <input type="checkbox"/> Construction (Industrial / Commercial) | <input type="checkbox"/> House Building | <input type="checkbox"/> Specialist Contractors (e.g. painting, roofing, building maintenance) |
| <input type="checkbox"/> Consulting Engineers (comprising Project Management / Supervisors, Architects) | <input type="checkbox"/> Insulation & Energy Conservation | <input type="checkbox"/> Utility Services - Installation / Maintenance |
| | <input type="checkbox"/> Mineral Extraction / Quarrying / Concrete Product Manufacturing | |

If your entry is **Chemical / Pharmaceutical related**, which forms the main part of your business? *Please tick one only:*

- Speciality Chemicals Pharmaceutical (Fill Finish) Pharmaceutical (API) Consumer Product Other
(please state)

Is the applicant part of a larger organisation? _____

If yes, please supply the name of the parent group: _____

Name of Organisation for Award Purposes: _____

N.B. Please print the name of your organisation as it should appear on your award should your entry be successful. The name must reflect your entry, e.g. if your entry is site specific, this **MUST** be reflected in the name above. (The name should include Ltd., DAC, Ireland, GmbH, etc. if relevant). Note that changes may not be possible at a later date.

¹ Northern Ireland (Antrim, Armagh, Derry, Down, Fermanagh, Tyrone); East (Dublin, Kildare, Wicklow); Midlands (Laois, Offaly, Longford, Westmeath); Mid West (Limerick, Clare, Tipperary North); North East (Cavan, Louth, Meath, Monaghan); North West (Donegal, Leitrim, Sligo); South (Cork, Kerry); South East (Carlow, Kilkenny, Tipperary South, Waterford, Wexford); West (Galway, Mayo, Roscommon)

² Agricultural Produce • Chemical / Pharmaceutical • Construction • Consultants (Safety, Management, etc.) • Education and Training • Electronic / Electrical Manufacturing / Assembly • Facilities Management and Service • Financial / Insurance • Food/Drink • Information Technology and Computer Services • Local Authorities/Councils • Mechanical Engineering / Manufacturing / Assembly • Medical Devices • Medical Services • Public Service (Government Services, Public Bodies, Semi-State, Emergency Services, Prisons, etc.) • Retailing/Wholesaling • Sport / Leisure • Transport / Distribution/Storage • Transport and Vehicle Maintenance • Utilities / Telecoms Providers (Power Generation / Distribution, Telecoms, Water, Gas, etc.) • Voluntary, Social and Community • Waste Management • Other Manufacturing • Other Services



Section 1 - Statistics and Accident History

Employee History	2016	2015	2014	2013	2012
Employees Total ¹	_____	_____	_____	_____	_____
Employees Non Manual ²	_____	_____	_____	_____	_____
Employees Manual / Process ³	_____	_____	_____	_____	_____
Contractor History Where available	2016	2015	2014	2013	2012
Contractor Employees Total	_____	_____	_____	_____	_____
Accident History including contractor history where available	2016	2015	2014	2013	2012
Fatal Accidents	_____	_____	_____	_____	_____
Reportable Accidents ⁴	_____	_____	_____	_____	_____
Incident Rate ⁵	_____	_____	_____	_____	_____
Reportable Dangerous Occurrences	_____	_____	_____	_____	_____
Reportable Diseases	_____	_____	_____	_____	_____
Improvement Notices served by any enforcing authority ⁶	_____	_____	_____	_____	_____
Prohibition Notices served by any enforcing authority ⁶	_____	_____	_____	_____	_____
Prosecutions served by any enforcing authority ⁶	_____	_____	_____	_____	_____
Inappropriate Behaviour Complaints received ⁷	_____	_____	_____	_____	_____
Reportable Accidents from 1 January 2017 to 31 March 2017 or date of submission if earlier	_____				

Any additional information to support your application including clarification notes relating to the above points
[use an additional sheet if necessary and attach to this entry form]

**Complete all sections and supply all relevant details. Failure to do so will affect marks allocated.
Do not leave blanks; if figures are not available, indicate so.**

Notes

1 Average of total employees 1 January to 31 December of the stated year

2 Refers to managerial / office based staff

3 Refers to all other employees not covered by employees, non manual (see note 2)

4 To include fatal accidents, major accidents and accidents causing an absence from work of more than three consecutive days (excluding the day of the accident but including days which would not have been working days).

5 Number of fatalities and reportable accidents divided by the number of employees and multiplied by 1,000.

6 Enforcing authorities include HSA, HSENI, Local Authorities (NI), EPA (ROI) and relevant Food Safety Authorities. Please qualify your answer. Please state the enforcing authority.

7 Internal reported complaints of inappropriate behaviour should include: bullying, violence, aggression, abuse, etc. [substantiated or unsubstantiated]



Entries

Entry is incomplete without signatures

Entry Submitted by (BLOCK CAPITALS)

This will be the main contact for the award and the person we will correspond with in relation to your entry.

Name: _____ Job Title: _____

Signature: _____ Date: _____

Telephone [Main line]: _____ Telephone [Direct Line]: _____

Mobile: _____ Fax: _____

Email: _____

Counter Signature: Safety Representative (Trade Union and/or Employee Elected Representative (BLOCK CAPITALS)

Name: _____ Job Title: _____

Signature: _____ Date: _____

Email: _____

Counter Signature: Managing Director or equivalent (BLOCK CAPITALS)

Name: _____ Job Title: _____

Signature: _____ Date: _____

Email: _____

NISO/NISG may use the details provided to correspond with the organisation regarding the Safety Awards and notify you of health and safety news and events from time to time. You may unsubscribe at any stage.

SUBMISSIONS WILL BE INCOMPLETE WITHOUT SIGNATURES

Marks will be deducted from entries not fully complying with the provision of Counter Signatures.

Checklist

- Entry form fully completed and signed
- Payment enclosed
- Submission with documentary evidence enclosed
- Is your membership of NISO or NISG up to date?

Please ensure that all the following criteria are adhered to in your submission.

Your submission should be prepared and presented as per the heading numbers 1-11 below. All statements or performance claims will only be accepted if backed by documentary evidence included in the submission.

- 1. Statistics and Accident History [see page 2]
- 2. Health and Safety Management
- 3. Hazard Identification and Risk Management
- 4. Implementation and Operation of Health and Safety Policies and Procedures
- 5. Health and Safety Communication and Consultation
- 6. Proactive Health and Safety Management
- 7. Health & Safety Training
- 8. Reactive Health and Safety Management
- 9. Emergency Preparedness and Response
- 10. Work Related Vehicle Safety (including Driving for Work)
- 11. Demonstration of Superior Performance in Health and Safety

Closing Date: 5 May 2017 (31 March 2017 for early bird entries)



Fees and Dates

Entry Fee (Early Bird): €380* [ROI]; £300 [NI]

For submissions AND payments received by NISO/NISG by 31 March 2017 at 17.00 hrs.

Entry Fee (Standard): €640* [ROI]; £500 [NI]

For submissions AND payments received by NISO/NISG by 5 May 2017 at 17.00 hrs.

Entries after the closing date **may** be accepted **subject to prior approval** and will be subject to a late entry fee of an additional €150/£125.

Please note that the Euro fee is submitted to NISO from organisations based in the Republic of Ireland and the Sterling fee is submitted to NISG from organisations based in Northern Ireland.

You must be a fully paid up member of NISO or NISG to enter for the Occupational Safety Awards.

* Fees payable to NISO include the return of submissions by courier / recorded delivery in early October [applies to ROI entries only]

I wish to pay by credit / debit card

We will contact you for details on receipt of application form

€ _____

Cheque Enclosed

Please make cheques payable to National Irish Safety Organisation or Northern Ireland Safety Group (as appropriate)

€ _____

Purchase Order Number:

€ _____ PO: _____

Online Banking - ROI entries

Payment can be made through your bank's online payment option. You will need the National Irish Safety Organisation's Bank Account Number (IBAN): IE65AIBK93101251712083 and the Bank Identifier Code (BIC): AIBKIE2D. Please include your NISO membership number as a reference with the payment.

€ _____

Awards are open to fully paid members of NISO or NISG only.

Return Addresses

National Irish Safety Organisation, A11 Calmount Park, Ballymount, Dublin 12, D12 EH21.

Tel: +353 1 465 9760 Fax: +353 1 465 9765 Email: awards@niso.ie Web: www.niso.ie

OR

Northern Ireland Safety Group, 13 De Courcy Avenue, Carrickfergus, BT38 7LJ.

Tel: (028) 9336 8928 Fax: (028) 9336 8928 E Mail: info@nisg.org.uk Web: www.nisg.org.uk

Data Protection Statement

The National Irish Safety Organisation and the Northern Ireland Safety Group, as data controllers, will store the information you provide on its database and fully respect the confidentiality of any personal data provided.

We will process any personal data you provide to us for the following purposes:

- to provide you with the services you have ordered or requested;
 - to contact you if required in connection with your order or to respond to any communications you might send to us;
 - to send you the newsletters/event alerts/health & safety information and to communicate with you about organisational activities.
- We will not disclose your personal data to third parties unless you have consented to this disclosure or unless the third party is required to fulfil your order / provide the service requested (in such circumstances, the third party is bound by similar data protection requirements). We will disclose your personal data if we believe in good faith that we are required to disclose it in order to comply with any applicable law, a summons, a search warrant, a court or regulatory order, or other statutory requirement.