



2022 SAFETY AWARD APPLICATION



www.hruhca.com

Submit applications to srogers@hruhca.com

The HRUHCA annual safety award program encourages member firms to maintain, develop, and improve their safety program through public recognition of their outstanding safety efforts. By introducing competition among member firms, we create a safer working environment for our employees and the public. When we create a safer working environment, everyone is a winner.

THE CRITERIA REQUIRED TO BE CONSIDERED FOR AN AWARD ARE:

- Your firm must be a HRUHCA member firm.
- You must provide a written narrative explaining why you feel your efforts warrant your company receiving an award (you have a written safety program, designated full-time safety director, Drug Free Workplace Program, NSC, NUCA Membership/Safety Awards, Safety First program participation, for example).
- Your NCCI Experience Modification Rate (EMR) for the past year must be 1.0 or lower.
- Your OSHA reportable Total Work-related Cases Incidence rate must be lower than the most recently published Bureau of Labor Statistics (BLS) rates for your SIC or NAICS code. (See <http://bls.gov/iif/home.htm>).
- Your company cannot have had any fatalities for the year under consideration.
- Your company has not received any Willful or Repeat OSHA violations within 3 years.
- The number of reportable accidents your company's vehicles have been involved in. We are considering "reportable accidents" as those that involved injuries to persons and/or exceeding \$1,000 in damages where your driver was at fault.

Mail the completed application with any attachments to:

HRUHCA Safety Awards, 5911 Harbour View Blvd., Suite 220 Suffolk, VA 23435

You may also scan and email your application with any attachments to:

HRUHCA Executive Director Stephanie Rogers at: srogers@hruhca.com.

The application deadline is close of business on Friday, March 25, 2022.

Award winners will be notified by Friday, April 8th. Awards will be presented at the HRUHCA Safety Awards Meeting. We will announce this date soon. All winners will receive 2 free registrations to attend this dinner meeting, an awards plaque and company photo.

COMPANY INFORMATION:

Firm name: _____

Name of safety director or key safety contact: _____

Submitted by: _____

Location of corporate office: _____

Mailing address (if different from corporate office location): _____

Telephone: _____ Fax #: _____

Contact e-mail: _____

BUSINESS CATEGORY

Describe your firm's primary function in a brief sentence: _____

Your firm's NAICS code is: _____

Describe your safety program in detail. Do you have training programs that are specific to your industry? What are these programs? How often do you hold these training programs? Who does your training? How do you document your training and who is responsible for documenting your training programs? ***(Please Note: We encourage you to attach a separate sheet of paper for any question that you feel you need more room than is allowed on this application).***

Do you perform documented safety inspections. If so, explain the process.

Does someone perform documented incident investigations? If so, briefly explain.

Are you doing formalized safety training for your field personnel on a regular basis? Please provide a description of your program.

Does your firm have an employee safety orientation program? If so, briefly describe.

Average number of employees during 2021: _____ Total man-hours worked in 2021: _____

Number of company vehicles in your fleet: _____ Total miles driven in 2021: _____

NCCI Experience Modification Rate (EMR); **please provide a photocopy of your most recent NCCI page with this information or written documentation from provider or NCCI.**

Your 2021 OSHA reportable Total Work-related Cases Incidence rate: _____
(# of incidents x 200,000/total # of man-hours worked that year)

Did your company have any workplace fatalities during 2021? _____

Did your company receive any Willful OSHA violations during 2021? _____

Does your firm have a written vehicle safety program? _____

Total # of "reportable accidents" (please see definition in guidelines above) your company's vehicles were involved in during 2021? _____

Please provide any other supporting comments or information that you would want the committee to consider regarding your safety program

Thank you for taking the time to participate in the HRUHCA Safety Awards program.