



**30th Annual Occupational Safety Awards Entry Form 2021**

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 - 12 as indicated on the website [SafetyAwards.ie](http://SafetyAwards.ie)  
Your organisation must be a paid-up member of NISO or NISG (as appropriate) to enter.

**PLEASE SEPARATE ENTRY FORM AND PAYMENT FROM SUBMISSION.  
FILL IN DETAILS ONLINE AND PRINT OUT FOR SIGNATURES.**

Name of Organisation: \_\_\_\_\_

Address: \_\_\_\_\_

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

- Jurisdiction / Region<sup>1</sup> to which your entry refers to *Please tick one only:*
- |                                     |                                   |                                     |                                           |
|-------------------------------------|-----------------------------------|-------------------------------------|-------------------------------------------|
| <input type="checkbox"/> East       | <input type="checkbox"/> Midlands | <input type="checkbox"/> Mid West   | <input type="checkbox"/> Northern Ireland |
| <input type="checkbox"/> North West | <input type="checkbox"/> South    | <input type="checkbox"/> South East | <input type="checkbox"/> North East       |
|                                     |                                   |                                     | <input type="checkbox"/> West             |

Product / Service Provided: \_\_\_\_\_

Main Business Category<sup>2</sup> [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 Chemical    Pharmaceutical (Fill Finish)    Pharmaceutical (API)    Consumer Product    Biopharma    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, plc, etc. if relevant). Note that changes may not be possible at a later date.

<sup>1</sup> Northern Ireland (Antrim, Armagh, Derry, Down, Fermanagh, Tyrone); East (Dublin, Kildare, Wicklow); Midlands (Offaly, Laois, Longford, Westmeath); Mid West (Clare, Limerick, 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)

<sup>2</sup> 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 • Healthcare Provider • Local Authorities/Councils • Mechanical Engineering / Manufacturing / Assembly • Medical Devices • 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

<b>Employee History</b>	<b>2020</b>	<b>2019</b>	<b>2018</b>	<b>2017</b>	<b>2016</b>
Employees Total <sup>1</sup>	_____	_____	_____	_____	_____
Employees Non Manual <sup>2</sup>	_____	_____	_____	_____	_____
Employees Manual / Process <sup>3</sup>	_____	_____	_____	_____	_____
<b>Contractor History</b> Where available	<b>2020</b>	<b>2019</b>	<b>2018</b>	<b>2017</b>	<b>2016</b>
Contractor Employees Total	_____	_____	_____	_____	_____
<b>Accident History</b> including contractor history where available	<b>2020</b>	<b>2019</b>	<b>2018</b>	<b>2017</b>	<b>2016</b>
Fatal Accidents	_____	_____	_____	_____	_____
Reportable Accidents <sup>4</sup>	_____	_____	_____	_____	_____
Incident Rate <sup>5</sup>	_____	_____	_____	_____	_____
Reportable Dangerous Occurrences	_____	_____	_____	_____	_____
Reportable Diseases	_____	_____	_____	_____	_____
Improvement Notices served by any enforcing authority <sup>6</sup>	_____	_____	_____	_____	_____
Prohibition Notices served by any enforcing authority <sup>6</sup>	_____	_____	_____	_____	_____
Prosecutions served by any enforcing authority <sup>6</sup>	_____	_____	_____	_____	_____
Inappropriate Behaviour Complaints received <sup>7</sup>	_____	_____	_____	_____	_____
Reportable Accidents from 1 January to 31 March 2021 or date of submission if earlier	_____	_____	_____	_____	_____
Reported Fatalities from 1 January to 31 March 2021 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]

**It is useful to the adjudicators if you insert a paragraph at the start of your submission to explain what your organisation does.**

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**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: \_\_\_\_\_

### Counter Signature: Managing Director or equivalent (BLOCK CAPITALS)

Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*NISO/NISG may use the details provided to correspond with your organisation regarding the Safety Awards.*

### 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, advised or PO No. supplied
- 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 - 12 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. Occupational Health and Occupational Hygiene
- 8. Workplace Health and Wellbeing
- 9. Health & Safety Training
- 10. Reactive Health and Safety Management
- 11. Emergency Preparedness and Response
- 12. Work Related Vehicle Safety (including Driving for Work)

**Closing Date: 2 July 2021 (28 May 2021 for early bird entries)**



## Fees and Dates

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

Entry Fee (Early Bird): €380\* [ROI]; £300 + VAT@20% [NI]

**For submissions AND payments** received by NISO/NISG by **28 May 2021** at 17.00hrs.

Entry Fee (Standard): €640\* [ROI]; £500 + VAT@20% [NI]

**For submissions AND payments** received by NISO/NISG by **2 July 2021** at 17.00hrs.

Entries after the closing date **may** be accepted **subject to prior approval before the standard closing date** and will be subject to a late entry fee of an additional €150\*/£125 + VAT@20%. **The date must be agreed with the organisers** prior to the standard closing date but no entries will be accepted after Friday, **30 July 2021**.

Please note that the Euro fee (no VAT) is submitted to NISO from organisations based in the Republic of Ireland and the Sterling fee (+ VAT@20%) 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.**

\* No VAT is charged on ROI entries.

Fees payable to NISO include the return of submissions by courier / recorded delivery in late November 2021 [applies to ROI entries only].

I wish to pay by credit / debit card

We will contact you for payment 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.

National Irish Safety Organisation's Bank account details: IBAN: IE65AIBK93101251712083 ; BIC: AIBKIE2D

Northern Ireland Safety Group's bank account details: IBAN: GB46ULSB98016017022038 ; BIC (Swift): ULSBGB2B

Please include your NISO / NISG 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](mailto:awards@niso.ie) Web: [www.niso.ie](http://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@niscg.org.uk](mailto:info@niscg.org.uk) Web: [www.niscg.org.uk](http://www.niscg.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 information relating the service you have ordered.

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.