



CSIA “Best Practices in Safety” Recognition Program Application

The Central States Insulation Association (CSIA) “Best Practices in Safety” Program Award recognizes CSIA member companies in good standing that have demonstrated a commitment to improving jobsite safety through development, implementation, and enforcement of a safety and risk management program.

Eligibility:

Submissions must come from a CSIA member company in good standing with a documented safety/risk management program including a formal written safety program.

Confidentiality:

The information in Section 1 of this application, and any reference in any part of this application to a specific company, *will not* be included with the application when the submissions are judged. All information provided on this application will be kept in strict confidence. CSIA reserves the right to publish any innovative safety ideas from the submissions for the good of the industry. However, any company-specific information regarding accident or injury statistics, or any other information identified by the applicant as proprietary, will be kept in strict confidence.

Judging:

Applications will be judged by nationally renowned OSHA / Workers Compensation Attorney, Gary Auman, of the Legal Firm Auman, Mahan and Furry.

Deadline:

Deadline for entries is **January 31, 2019**. Winners will be announced at the 2019 CSIA Spring Labor Conference on May 1st at the Belterra Casino Resort in Florence, Indiana April 30th – May 1st.

Entry Fee: There is a \$150 entry fee to have your safety plan reviewed by CSIA Legal Counsel. In return, you will receive a detailed, written critique of the information provided with your application. This evaluation letter is designed specifically to facilitate ongoing safety program improvement for every participating member. You can submit the payment via the attached form or by check. If applying online, there is also an option to pay via credit card at the end of your application submittal.

Entry Submission:

Three easy ways to submit your application:

1. Apply online at csiaonline.org (Members section)
2. Mail this completed application to:
Auman, Mahan & Furry, Attn: Brenda Lightner 110 North Main St., Suite 1000 Dayton OH 45402
3. Email a scan of your completed application to Brenda Lightner at brl@amfd Dayton.com

More Information:

Questions regarding the application may be directed to Gary Auman at gwa@amfd Dayton.com or by calling 937-223-6003.

Instructions

Please complete the following information about your company. Complete and accurate information will help the judging process, and will likewise assist your company in receiving appropriate consideration. Feel free to attach additional paper if necessary for longer answers.

Section 1: General Information

Company Name _____

Contact Name _____

Address _____ City _____ State _____ Zip _____

Telephone _____ Email _____

Please check one:

- Small Company (less than 100,000 man-hours)
- Medium Company (100,001 – 500,000 man hours)
- Large Company (more than 500,001 man-hours)

Does your company have a formal written safety program? Yes _____ No _____

What is your: EMR Rate _____ Lost Time Rate _____ Total Recordable Injury Rate (TRIR) _____ Restricted Duty Rate _____

Section 2: Company Safety Program

Please provide written answers to each question. **If more space is required, attach additional pages.**

Please make your responses as complete as possible. All individual questions must be answered directly and specifically. **DO NOT SEND A COPY OF YOUR ENTIRE SAFETY PROGRAM!**

Doing so will result in point deduction and possible rejection of your application.

- 1) Do you have a Distracted Driving/Distracted Working Policy? Yes No
If yes, please describe the policy in detail:

- 2) When and how do you train your new employees and indoctrinate them into your safety program and company expectations? Please provide a list of the topics you cover with them during this orientation and describe your orientation program. Also include information on how you continually ensure the level of safety knowledge your employees have every day.

- 3) Please describe your comprehensive recordkeeping program. Include ALL records you maintain in connection with safety including injury recordkeeping, training recordkeeping, and disciplinary recordkeeping with regard to safety program violations.

- 4) Please describe how you comply with the OSHA requirement for competent persons on each job site?

- 5) Please describe in detail your safety enforcement program?

6) Does your company have a PPE hazard assessment, training, and/or audit program? Yes No
If yes, please explain the program:

7) Do you have a substance abuse program? Yes No
If yes, please describe the program:

8) Does your company have a formal Heat and Cold Illness Prevention Program? Yes No
If so, please describe these programs.

9) Do you conduct random job site inspections and safety audits? Yes No
If yes, who conducts these? How are they conducted, and what do they cover?

10) Does your company have an Emergency Action Plan including first-aid, communication, and evacuation?
 Yes No

If yes, how do you communicate this program to your employees in the field and how are they trained on the procedures?

Section 3: For Informational Use and Bonus Points

The questions in this section will be used for informational purposes only and may count as bonus points towards your overall score.

- 1) Do you feel you do anything innovative in your safety program - anything unique or not typical of industry standard practices? If so, please explain the practice and its benefit to your company.

- 2) What is your greatest risk as a Contractor and how do you mitigate that?

All applications will be graded and recognition will be awarded at a Bronze, Silver, Gold, Platinum or Participant level. Each applicant will be judged anonymously and will receive a letter critiquing their program from CSIA Legal Counsel, Gary Auman. All participants will receive certificates, and those receiving Bronze, Silver, Gold, or Platinum awards will receive recognition at the CSIA Spring Conference.

Please indicate to whom you would like the feedback sent and their email address

Name _____ Email _____

Payment Information:

Check for \$150 made payable to CSIA Visa MasterCard AmExp Discover

Name on Card _____ Card Number _____

Billing Zip Code _____ Expiration Date _____

All applications and appropriate fees must be received no later than January 31, 2019.

For Office Use Only: DATE RECEIVED _____ ENTRY NO. _____