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## 2018 CCIA Safety Recognition Award Application

The **Connecticut Construction Industries Association** proudly presents **Safety Recognition Awards** each year to member companies that apply and meet certain specified criteria. CCIA's Safety Committee encourages safety in construction and recognizes companies that maintain a formal safety and health program or related policies and procedures.

In order to recognize and reward those construction firms that have met or exceeded national safety statistics, CCIA offers the **Platinum Level Award**. If your firm wishes to be considered for a Platinum Level Award, please complete a separate application which you will find as the last page of the application.

Please be aware that companies that apply for a Platinum Level Award and also wish to be considered for a Safety Recognition Award need to complete **both** the Safety Self-Assessment Worksheet and the Platinum Application.

CCIA plans to bestow the awards at its **Annual Membership Meeting** on **Wednesday, December 5, 2018** at the **Aqua Turf Club** in Plantsville. If you apply for the award, please follow the instructions attached below and **submit your application to CCIA** by the **deadline of Friday, October 26, 2018**.

For questions, call John Wilhelm at (860) 529-6855, or send e-mail to [jwilhelm@ctconstruction.org](mailto:jwilhelm@ctconstruction.org).

Thank you for your interest in and support of CCIA's Safety Recognition Awards program.

Very truly yours,

Edward Shapiro, Chairman  
CCIA Safety Committee





## CCIA SAFETY RECOGNITION AWARDS

CCIA Safety Recognition Awards recognize member companies with a qualified construction safety and health program. They are designed to help construction companies start a construction safety and health program or enhance an existing program.

CCIA's Safety Recognition Awards Program follows OSHA's safety and health guidelines that require a safety and health program to include:

- MANAGEMENT INVOLVEMENT
- EMPLOYEE TRAINING
- SAFETY HAZARD ANALYSIS AND
- CORRECTION OF VIOLATIONS AND NONCOMPLIANCE

To meet the guidelines, there are 16 criteria categories (A-P), with a graduated point system that allows a company to evaluate its own safety and health program. CCIA's Safety Recognition Self Assessment Awards Program was not designed to have member companies compete against one another.

In order to recognize and reward those construction firms that have met or exceeded national safety statistics, CCIA has established the Platinum Level Award. If firms wish to be considered for a Platinum Level Award, they are required to complete a separate application.

**The Awards will be presented at: CCIA's Annual Membership Meeting, Wednesday, December 5, 2018 at The Aqua Turf Club, Plantsville, CT.**

### SAFETY RECOGNITION PROGRAM APPLICATION INSTRUCTIONS

Each of the **16 criteria** categories has three or four columns to characterize a company's construction safety and health program. Select only the column that accurately describes your company's safety and health program for that particular category. Your safety and health program must have all of the criteria listed in a particular column to qualify for the points. Note the number of points for each category under "point subtotal."

In some instances, the criteria may not apply to your company. If that is the case, please indicate that it does not apply and explain briefly why.

After completing Category P - Recordkeeping, please total the number of points for a final point count.

Remember to complete the first page, which is the application. This page has to be signed and dated by the person completing the application and the company CEO.

## **PLATINUM LEVEL AWARD**

The Platinum Award Level is open to all CCIA-member construction firms. Platinum applicants must submit information regarding their company's safety experience, including the following:

- Injuries or illnesses;
- Total hours worked;
- Experience Modification Rates (EMR);
- Work-related fatalities or catastrophic events;
- Explanations of any OSHA citations; and
- Answers to questions about your company's safety program.

Platinum Level applications will be considered by a special judges' panel comprised of Connecticut safety and risk management professionals. The judges may confer Platinum Merit Awards at their discretion.

**Note:** Companies that apply for a Platinum Level Award and also wish to be considered for a Safety Recognition Award need to complete **both** the **Safety Assessment Worksheet** and the **Platinum Level Award Application**.

***Return Completed Applications by Friday, October 26, 2018 to:***

Connecticut Construction Industries Association  
912 Silas Deane Highway, Suite 112  
Wethersfield, CT 06109-3433

**or by e-mail to:** [jwilhelm@ctconstruction.org](mailto:jwilhelm@ctconstruction.org)



## 2018 SAFETY RECOGNITION AWARD APPLICATION

Company Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Company Size (based on the previous year's payroll scale):

**Small** (up to \$250,000)

**Medium** (\$251,000 - \$999,000)

**Large** (over \$1 million)

### CATEGORIES

- |   |  |
|---|--|
| <b>A.</b> Management Policy and Commitment to Safety      | <b>I.</b> Safety and Health Toolbox Meetings   |
| <b>B.</b> Responsibility for Safety and Health Identified | <b>J.</b> Safety Committee Meetings            |
| <b>C.</b> Safety Budget                                   | <b>K.</b> Site Safety Review                   |
| <b>D.</b> Safety Program Goal Setting                     | <b>L.</b> Supervisory Training                 |
| <b>E.</b> Management Supervisory Meetings                 | <b>M.</b> Accident Investigations              |
| <b>F.</b> Pre-planning for Job-Site Safety                | <b>N.</b> Substance Abuse Policy               |
| <b>G.</b> New Employee Orientation                        | <b>O.</b> Use of Personal Protective Equipment |
| <b>H.</b> Employee Safety and Health Training             | <b>P.</b> Recordkeeping                        |

**Form completed by:** \_\_\_\_\_

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

Title: \_\_\_\_\_

**Confirmed by company officer:** \_\_\_\_\_

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

Title: \_\_\_\_\_

### **SUBMISSION DEADLINE: FRIDAY, OCTOBER 26, 2018**

This Cover Sheet needs to be included with the Application Packet. Please contact John Butts with questions regarding the application form at 860-529-6855, or email: [jbutts@ctconstruction.org](mailto:jbutts@ctconstruction.org).

Electronic submissions of completed Application Packet should be e-mailed to: [jwilhelm@ctconstruction.org](mailto:jwilhelm@ctconstruction.org)

## CCIA SAFETY RECOGNITION AWARD SAFETY SELF ASSESSMENT WORKSHEET

Key components of company safety programs are listed below. Each component contains columns with corresponding point values that describe levels of safety performance. Select the column that best describes your company's performance, then transfer the score assigned to that column to the sub-score. At the end of the worksheet, total all your sub-scores for your FINAL SCORE.

### A. Management Policy and Commitment to Safety

12	8	4	1
<ul style="list-style-type: none"> <li>• Written safety and health program</li> <li>• Written safety and health policy</li> <li>• Safety and health program is known to all employees</li> <li>• Safety and health program is signed by CEO</li> <li>• Management participates in the safety and health program</li> <li>• Management sets objectives for safety and health</li> <li>• Management requires feedback on safety and health program</li> <li>• Management requires company-wide performance appraisals on safety and health program</li> </ul>	<ul style="list-style-type: none"> <li>• Management participates in the safety and health program</li> <li>• Management requires feedback on safety and health program</li> <li>• Safety and health program exists</li> <li>• Safety and health policy exists</li> <li>• Written safety and health policy</li> <li>• Written safety and health program</li> <li>• Management authorizes prevention activities</li> <li>• Safety and health policy has not been explained to employees but is posted</li> </ul>	<ul style="list-style-type: none"> <li>• Management wants and supports safety and health but does not participate</li> <li>• Provides funds for safety and health equipment</li> <li>• Safety and health program exists but is not known by employees</li> <li>• Safety and health policy exists</li> </ul>	<ul style="list-style-type: none"> <li>• Leaves safety and health to Safety and Health coordinator or supervisory staff</li> <li>• No formal safety and health program exists</li> </ul>

**Sub-Score for Section A:** \_\_\_\_\_

### B. Responsibility for Safety and Health Identified

9	6	0
<ul style="list-style-type: none"> <li>• Responsibility and accountability for safety and health identified at all levels of the company</li> <li>• Responsibilities are identified in written safety and health program</li> <li>• Line Supervisors have key safety and health responsibilities</li> </ul>	<ul style="list-style-type: none"> <li>• Safety coordinator has full responsibility for results of the safety and health program</li> <li>• Supervisors look to safety and health coordinator to perform safety activities</li> </ul>	<ul style="list-style-type: none"> <li>• Responsibility and accountability for safety and health have not been identified in the company</li> </ul>

**Sub-Score for Section B:** \_\_\_\_\_

### C. Safety Budget

6	4	2
<ul style="list-style-type: none"> <li>• An annual safety and health budget is established</li> <li>• Budget is based on planned safety and health programs</li> </ul>	<ul style="list-style-type: none"> <li>• An annual safety and health program allocation is established but not necessarily based on planned activities</li> </ul>	<ul style="list-style-type: none"> <li>• Funding is taken from general company budget as needed for safety and health</li> </ul>

**Sub-Score for Section C:** \_\_\_\_\_

#### D. Safety Program Goal Setting

9	6	3
<ul style="list-style-type: none"><li>• Safety and health program performance goals and objectives are established and published</li><li>• A strategy is developed to accomplish safety and health performance goals</li><li>• Safety and health audits are made to measure performance</li></ul>	<ul style="list-style-type: none"><li>• Safety and health program performance goals and objectives are established</li><li>• The safety and health program performance goals and objectives are published</li></ul>	<ul style="list-style-type: none"><li>• Informal safety and health program performance goals are established</li><li>• Results of safety and health programs are discussed at least annually</li></ul>

Sub-Score for Section D: \_\_\_\_\_

#### E. Management Supervisory Meetings

9	6	3
<ul style="list-style-type: none"><li>• Weekly meetings are conducted by management with supervisors and safety and health issues are reviewed</li><li>• Management gives an overview of safety and health activities</li><li>• Serious accidents are analyzed and reviewed by senior management</li></ul>	<ul style="list-style-type: none"><li>• At least monthly meetings are conducted with supervisors and safety and health is reviewed</li><li>• Supervisors report on job site(s) safety and health activities</li></ul>	<ul style="list-style-type: none"><li>• Occasional meetings are conducted with supervisors and safety and health issues are reviewed</li><li>• Information about safety and health is provided to supervisors</li><li>• Serious accidents are sometimes reviewed</li></ul>

Sub-Score for Section E: \_\_\_\_\_

#### F. Pre-planning for Job Site Safety

6	4	3
<ul style="list-style-type: none"><li>• Pre-job safety and health planning is required at the contract award stage</li><li>• Appropriate equipment is provided and precautions are taken before or at start of job</li><li>• Job hazard analysis is formalized during pre-planning</li><li>• Supervisors are trained to plan for safety and health</li></ul>	<ul style="list-style-type: none"><li>• Pre-job safety planning is required before mobilization</li><li>• Safety and health equipment and safety and health procedures are provided when necessary</li></ul>	<ul style="list-style-type: none"><li>• No formal pre-job safety and health planning but some planning is done</li></ul>

Sub-Score for Section F: \_\_\_\_\_

#### G. New Employee Orientation

6	4	2
<ul style="list-style-type: none"><li>• Orientation includes training on the following: Safety and health rules, HAZCOM, major job hazard exposures, PPE, and emergency reporting</li><li>• Formal safety and health orientation program is in effect for new and transferred employees</li></ul>	<ul style="list-style-type: none"><li>• Orientation includes training on the following: Safety and health rules, HAZCOM, major job hazard exposures, PPE, and emergency reporting</li></ul>	<ul style="list-style-type: none"><li>• Orientation is given to employees and records are maintained</li></ul>

Sub-Score for Section G: \_\_\_\_\_

## H. Employee Safety and Health Training

12	8	4
<ul style="list-style-type: none"> <li>From a training needs assessment, formal safety and health training is provided and documented in areas such as: hazard recognition, CPR/first aid, hazard/standard-specific OSHA topics, heavy equipment and trade-specific safety and health</li> <li>Formal safety and health training audits are conducted</li> <li>Training/comprehension understanding by employees is verified and documented</li> <li>Formal safety and health orientation program is in effect for all new or transferred employees, including signing record sheets</li> <li>Orientation includes training on the following: safety and health rules, HAZCOM, major job hazard exposures, PPE, and emergency reporting</li> </ul>	<ul style="list-style-type: none"> <li>Some formal safety and health training is provided and documented in the following areas: CPR/first aid and hazard recognition</li> <li>Informal safety and health training audits conducted for all safety and health instructors</li> <li>Formal training needs assessment conducted for the workforce</li> <li>Training/comprehension understanding by employees is verified and documented</li> <li>Formal safety and health orientation program is in effect for all new or transferred employees, including signing record sheets</li> <li>Orientation includes training on the following: safety and health rules, HAZCOM, major job hazard exposures, PPE, and emergency reporting informal safety training</li> </ul>	<ul style="list-style-type: none"> <li>Formal safety and health training, with verifiable records in hazard recognition</li> <li>Some informal safety and health training for the following topics: hazard recognition, CPR/first aid, hazard/standard-specific OSHA topics, heavy equipment and trade-specific safety and health provided in hazard recognition</li> <li>Orientation is given but no training records are kept</li> </ul>

Sub-Score for Section H: \_\_\_\_\_

## I. Safety and Health Toolbox Meeting

6	4	2	0
<ul style="list-style-type: none"> <li>Safety and health toolbox meetings held weekly</li> <li>Meetings conducted by foremen and supervisors</li> <li>Meeting attendance records maintained</li> <li>Occasionally, management attends safety and health toolbox meetings</li> </ul>	<ul style="list-style-type: none"> <li>Monthly safety and health toolbox meetings are conducted by supervisors</li> <li>Meeting attendance records are maintained</li> </ul>	<ul style="list-style-type: none"> <li>Management or Safety Director holds safety and health toolbox meetings with all employees periodically</li> <li>Meeting attendance records are maintained</li> </ul>	<ul style="list-style-type: none"> <li>No safety and health meetings are held</li> </ul>

Sub-Score for Section I: \_\_\_\_\_

## J. Safety Committee Meetings

4	2	0
<ul style="list-style-type: none"> <li>Safety Committee meetings are held every month</li> </ul>	<ul style="list-style-type: none"> <li>Safety Committee meetings are held every three months</li> </ul>	<ul style="list-style-type: none"> <li>Safety Committee does not meet</li> </ul>

Sub-Score for Section J: \_\_\_\_\_

## K. Site Safety Review

9	6	3
<ul style="list-style-type: none"> <li>Inspections of job sites are made each week by the site supervisor</li> <li>Inspection reports are completed, reviewed by management, and retained</li> <li>Follow-up corrective action dates are established</li> </ul>	<ul style="list-style-type: none"> <li>Inspections of job sites are made periodically by a representative of the company, or safety, or insurance personnel</li> <li>Inspection reports are retained</li> <li>Follow-up corrective action is taken</li> </ul>	<ul style="list-style-type: none"> <li>Inspections are conducted periodically by the supervisor, no inspection report is filed</li> <li>Follow-up corrective action is taken</li> </ul>

Sub-Score for Section K: \_\_\_\_\_

## L. Supervisory Training

9	6	3	0
<ul style="list-style-type: none"> <li>• Supervisory training includes:               <ul style="list-style-type: none"> <li>◇ First Aid/CPR</li> <li>◇ Hazard Recognition</li> <li>◇ Emergency reporting procedures</li> <li>◇ OSHA 30-Hour or greater</li> <li>◇ Conducting meetings</li> <li>◇ Supervisory skills</li> <li>◇ Accident investigation</li> <li>◇ Substance abuse</li> <li>◇ Job safety planning</li> <li>◇ Inspections</li> <li>◇ Site safety review</li> <li>◇ Bloodborne pathogens</li> <li>◇ Hazard communication</li> </ul> </li> <li>• Company either has adequate outside training source or in-house training facilities</li> <li>• Supervisors have access to safety and health professionals</li> </ul>	<ul style="list-style-type: none"> <li>• Most supervisors receive training in:               <ul style="list-style-type: none"> <li>◇ First Aid/CPR</li> <li>◇ Hazard Recognition</li> <li>◇ Emergency reporting procedures</li> <li>◇ Human relations</li> <li>◇ Supervisory skills</li> <li>◇ Accident investigation</li> <li>◇ Site safety review</li> <li>◇ Substance abuse</li> <li>◇ Hazard communication</li> <li>◇ OSHA 10-Hour or greater</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Some supervisors attend outside training courses</li> </ul>	<ul style="list-style-type: none"> <li>• The company has no formal supervisor training program</li> </ul>

**Sub-Score for Section L:** \_\_\_\_\_

## M. Accident Investigations

9	6	3
<ul style="list-style-type: none"> <li>• The immediate supervisor inspects and documents all accidents, including near misses</li> <li>• Each supervisor is trained to conduct an accident investigation</li> <li>• The basic causes of all accidents are determined</li> <li>• Information from accident investigation is shared with all other job sites</li> <li>• There is management review of all serious accidents</li> </ul>	<ul style="list-style-type: none"> <li>• All accidents are investigated and a written report is completed on serious incidents</li> <li>• Supervisors are trained to make investigations</li> <li>• All investigation reports are reviewed by management</li> <li>• Serious incident information is shared on other job sites</li> <li>• The basic cause of all accidents is determined</li> </ul>	<ul style="list-style-type: none"> <li>• Informal investigations are made with no written report</li> <li>• Some supervisory personnel know how to investigate an accident</li> <li>• Information learned from the accident is not shared with other job sites</li> <li>• Most investigations are made by safety personnel</li> </ul>

**Sub-Score for Section M:** \_\_\_\_\_

## N. Substance Abuse Policy

6	4	0
<ul style="list-style-type: none"> <li>• Company safety and health policy contains strict rules about alcohol and drug use</li> <li>• Company does drug testing for pre-hire</li> <li>• Company keeps drug testing records</li> <li>• Supervisors are trained in awareness and hazards of drugs and alcohol on the jobs</li> </ul>	<ul style="list-style-type: none"> <li>• Company has written substance abuse policy</li> <li>• Supervisors are trained in dangers of drugs and alcohol on the job</li> </ul>	<ul style="list-style-type: none"> <li>• Company does not have a policy about drug or alcohol abuse</li> </ul>

**Sub-Score for Section N:** \_\_\_\_\_



## O. Use of Personal Protective Equipment (PPE)

9	6	3	1
<ul style="list-style-type: none"><li>• PPE is provided (except shoes) and its use is required</li><li>• Employees are trained in the selection, maintenance, and use of PPE</li><li>• Employees are informed on PPE requirements for each job</li><li>• Only approved PPE is used</li><li>• Employees are aware of disciplinary consequences of not using PPE</li><li>• An analysis is made to determine PPE needs</li></ul>	<ul style="list-style-type: none"><li>• PPE is provided (except shoes) and its use is required</li><li>• Employees are trained in the selection, maintenance, and use of PPE</li><li>• Employees are informed on PPE required for each job</li><li>• Only approved PPE is used</li></ul>	<ul style="list-style-type: none"><li>• PPE is provided and its use is encouraged</li><li>• Some PPE selection, maintenance, and use training is provided</li><li>• Only approved PPE is used</li></ul>	<ul style="list-style-type: none"><li>• PPE is provided and its use is left to the discretion of each employee</li></ul>

Sub-Score for Section O: \_\_\_\_\_

## P. Recordkeeping

6	4	2
<ul style="list-style-type: none"><li>• Records are kept on:<ul style="list-style-type: none"><li>◇ Inspections</li><li>◇ Training</li><li>◇ Employee absences</li><li>◇ Accident investigations</li><li>◇ First Aid treatment</li><li>◇ OSHA Log 300</li><li>◇ Hazard communication program</li></ul></li></ul>	<ul style="list-style-type: none"><li>• Records are kept on:<ul style="list-style-type: none"><li>◇ OSHA Log 300</li><li>◇ Accident investigations</li><li>◇ Job site reviews</li><li>◇ First Aid treatment</li></ul></li></ul>	<ul style="list-style-type: none"><li>• OSHA Log 300 is maintained according to OSHA requirements</li></ul>

Sub-Score for Section P: \_\_\_\_\_

**FINAL SCORE:** You have now completed the Safety Self Assessment. Add all your Sub-Scores and record the FINAL SCORE here: \_\_\_\_\_

## 2018 CCIA Safety Recognition Award Platinum Level Application

Company Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

NAICS Code: 2 3 \_\_\_\_ (Enter the NAICS code from your OSHA 300A form)

### Part 1: Company Safety Information

1. Did your company self-perform any of its work in the past three calendar years?  
Yes \_\_\_\_\_ No \_\_\_\_\_

2. Safety Performance Data (if possible, please break out data for Connecticut only):

	2015	2016	2017
a. Total number of deaths (line G on the OSHA 300A)	_____	_____	_____
b. Total number of other injuries/illnesses (line M on the OSHA 300A)	_____	_____	_____
c. Total hours worked in by all employees	_____	_____	_____
d. Experience Modification Rate (EMR)	_____	_____	_____

3. Has your company had any OSHA Citations issued in the past three calendar years?  
Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain the citations and how your company corrected them: \_\_\_\_\_

\_\_\_\_\_

4. Has your company experienced an event as defined by OSHA regulations 1904.39(a)(1)(2) in the last three calendar years? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

§1904.39(a)(1) Within eight (8) hours after the death of any employee as a result of a work-related incident, you must report the fatality to the Occupational Safety and Health Administration (OSHA), U.S. Department of Labor. §1904.39(a)(2) Within twenty-four (24) hours after the in-patient hospitalization of one or more employees or an employee's amputation or an employee's loss of an eye, as a result of a work-related incident, you must report the in-patient hospitalization, amputation, or loss of an eye to OSHA.

**Part 2: Narrative.** Please provide the judges with your answers to the following questions about your company's safety program. You may use the pages provided or you may submit your answers on separate sheets of paper. Please adhere to the word limits noted at the end of each question.

1. **Summarize why your safety program should be considered the "Best of the Best" in Connecticut.**  
Explain how you demonstrate top management involvement rather than management commitment. Word limit: 400

2. **Give a brief and definitive description of your last three (3) projects.** This will allow the judges to gain some understanding of the scope and type of work your company performs. Word limit: 350

3. **Describe the key features of your safety program.** Include examples that demonstrate hard work, persistence, innovation, teamwork, and a passion for continuously improving your safety management systems above and beyond minimum state and federal safety standards.

Avoid repeating what you have said in your application to this point or what is published in your corporate program. This is your opportunity to demonstrate that “special something” that sets you apart from others in the industry – be creative. Explain those things that you feel you do better than everyone else. The following will be evaluated: overview of your company safety program; level of employee involvement in safety; new programs, procedures or resources used by the company to promote safety; management’s ownership and involvement in safety; and unique program elements used by company to promote and heighten safety awareness.

Please include information on the following elements:

1. Management Ownership and Involvement – How does senior management drive project safety throughout the organization?
2. Risk Identification and Analysis – How are risks identified, analyzed, and communicated to proactively drive project safety management?
3. Task Design – Engineering Controls and Design for Safety – Provide examples of how you have used engineering controls and the sequence of work to reduce worker injury exposures.
4. Safe Work Methods (Planning and Validation) – Describe how work is planned safely and how you validate that your planning procedures are effective.
5. Worker Engagement, Involvement, and Participation – Consider how the individuals closest to the daily work make decisions that improve safety. Write about how your project managers/superintendents ensure that everyone can participate in the decision-making process when it comes to safety.
6. Safety Training and Validation of Training – Explain key elements of your safety training system; orientation and ongoing. How do you validate the training received was effective?
7. Subcontractor Management – Describe key elements of your subcontractor management process.
8. Emergency and Crisis Management – What are unique aspects of your process?

Word Limit: 700

Please submit this completed application by mail to: CCIA, 912 Silas Deane Highway, Wethersfield, CT 06109; or electronically to: [jwilhelm@ctconstruction.org](mailto:jwilhelm@ctconstruction.org).