

UTCA'S ANNUAL SAFETY AWARDS PROGRAM

For many years our association and its members have made significant contributions to improving workplace safety and health in construction. UTCA is heavily involved in both the New Jersey Common Ground Alliance and New Jersey Work Zone Safety Partnership. While constantly evolving its construction safety seminar training for members over the years, UTCA strives to meet the needs of any size contractor member.

The Safety Committee is pleased to announce that applications for the Annual Safety Awards are being accepted. The awards program was developed to publicly recognize the extraordinary efforts made by association members to provide the safest possible construction worksites. The Awards will be presented at the Association's Annual Safety Conference held on March 6, 2020.

These Safety Awards will be determined through several criteria. The categories are based on annual hours worked and type of work done by the contractor. There will be awards given for each category and then one overall award recipient. The process is voluntary through self-nomination and the honor system.* All information presented will be kept confidential.

Enclosed with this announcement is the Safety Awards Application that should be completed and returned to the UTCA office by **February 7, 2020.** Please fax the application to: Helene (732) 292-4310 or email helene@utcanj.org. Anyone with questions regarding the application should contact Dan Neville at the UTCA offices (732) 292-4300.

** Winners may have to supply OSHA 300 records*

UTCA's 2020 Construction Safety Awards Application

(Due February 7th)

Company Name **Contact Name**

Telephone **Title & E-mail**

Predominant type of Work

_____ **Site** _____ **Heavy Highway, Utility Construction** _____**Construction Management**

2019 Hours Worked (Please Check) _____ **0 - 75k hrs** _____ **75-200k hrs** _____ **200k+ hrs**

I, _____ , **certify** that each of the following applies to our firm.

Please check all that apply:

_____ Our Company has a written occupational safety and health program.

_____ Our Company has a Safety and Health Director

_____ Our Company always incorporates safety and health considerations into our pre-bid planning.

_____ Our Company provides safety analysis, job safety analysis, and/or task safety analysis prior to starting our work.

_____ Our Company Provides safety training as part of our New Full-time Employee Orientation.

_____ Our Company provides safety education and training to all employees, at least annually, as a component of our written safety and health program.

_____ Our Company safety program includes visible top management involvement in implementing our safety program to emphasize management's commitment to safety.

_____ Our Company Policy gives field personnel authority to "shut down" a job or operation because of a hazard that presents an imminent danger to employees.

Please provide the following information for calendar year **2019:**

1. Total Number of *Man–Hours* worked : _____
2. Company Lost Day Incident Rate: _____
3. Total Recordable Injury /Illness: _____
   (Total in Column H, I, & J of OSHA 300 log)
4. Company Recordable Incident Rate: _____
5. Company *DART* Rate: _____
6. Current Modification Rate*: _____
7. Yearly # of Safety Training Hours per worker _____

Print Name: _____ Title: _____

Signature: _____ Date: _____

Helpful Hints:

1. Total Employee Hours Worked By Your Company: Enter the total number of work hours reported on your OSHA 300A Summary. This does **NOT** include subcontractor hours or temporary labor agency hours.

2. Lost Work-Day Incidence Rate: A mathematical calculation that describes the number of lost work days per 100 full-time employees in any given time frame. The formula is: # of (lost workday cases or total recordable cases) * 200,000/Total Employee-hours worked

Example: X Company
*3 Lost Workday Cases * 200,000 = 600,000*
600,000/350,000 (X Company Man Hours) = 1.71
X Company Lost Work Day Incidence Rate = 1.71

3. From your OSHA 300 log, total columns H, I, and J.

4. Use the number from Item 3, enter into the following formula to get this rate: # of (lost workday cases or total recordable cases) * 200,000/ Total Employee-hours worked

Example: X Company
*5 Total Recordable Cases * 200,000 = 1,000,000*
1,000,000/350,000 (X Company Man Hours) = 2.86
X Company Recordable Incidence Rate = 2.86

5. DART Rate: # of lost workday cases **plus** total restricted workday cases (from OSHA 300 log)*200,000/Total Employee-hours worked

Example: X Company
10 Lost Workday cases + 3 Restricted Workday Cases = 13 cases
*13 * 200,000 = 2,600,000/350,000 (X Company Man Hours) = 7.42*
X Company DART Rate is 7.42

1***MOD rate will only be used to break a tie.**