



2021 ConocoPhillips Alaska “Excellence in Safety” Awards



Introduction

These awards are to promote and recognize excellence in safety throughout the construction industry in Alaska. Applications are reviewed by an independent panel of safety professionals with special attention to upper management commitment, worker training, active participation of the entire company and special innovations. Nominees may be contacted by judges for fact clarification of the information in their application. DO NOT send copies of your company safety program, manual, policies, training records, OSHA 300 logs, etc. as part of your application.

Award Categories – (See category descriptions below)

- Excellence in Safety – Building Division
- Excellence in Safety – Heavy Division
- Excellence in Safety – Utility Division
- Excellence in Safety – Specialty Division
- Excellence in Safety – Highway Division
- Excellence in Safety – Individual

Submissions

Nominations will be accepted for any AGC Alaska member firm and must complete the application which contains:

- Quantitative Measures
- Program Evaluation Checklist
- Qualitative Narrative – Must be submitted in WORD format
- 100-word summary of company safety values - **NEW!**

Nominations

Send by mail or email no later than **5:00 p.m. Wednesday, September 22, 2021.**

AGC of Alaska
Attn: Kimberley Gray
8005 Schoon Street
Anchorage, AK 99518

Email: Kimberley@agcak.org



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PART 1 - General Information & Categories

Participants will be required to complete the application forms and submit them directly to AGC of Alaska.

Each application will be reviewed for evidence of:

- Company management commitment
- Active employee participation
- Safety training
- Work site hazard identification and control
- Safety program innovation

Entry Categories

- Joint Venture projects will not be considered for this award. This award is intended for companies and is not project specific. Joint venture project hours are prohibited from inclusion within the hours submitted for competing companies.
- Applicants are eligible to only ONE category. If your company performs multiple scopes of work (Building, Highway, Federal and Heavy etc.) you must choose one scope BUT submit all work hours for the company as a whole for ALL divisions. This includes ONLY hours worked with in Alaska.

Selecting the division that best describes your company

- **Building Division**: The general contractor is responsible for the means and methods to be used in the construction/ execution of a building or structure in accordance with the contract documents. A general contractor usually is responsible for the supplying of all material, labor, equipment, and services necessary for the construction of the project.
- **Heavy Division**: This division is for companies who completed projects for the Corps of Engineers, NAVFAC, the Air Force, GSA or other federal agencies; any type of marine construction or dredging projects for sports and inland waterways; flood control and prevention projects for the Natural Resources Conservation Service, Bureau of Reclamation and any industrial plant construction.
- **Utility Infrastructure**: This division is for companies who completed projects related to water and wastewater, underground utility, site preparation and other types of public works construction such as public facilities, gas, water, sewer, or electrical. Construction or rehabilitation is typically underground, but is not all-inclusive and may be open, cut or trenchless.
- **Highway Division**: This division is for companies who completed projects included highways, bridges, lane expansions, interchange improvements, new interchanges or alignments, overpasses, pedestrian bridges, road tunnels, transit and railroad project.
- **Specialty Division**: Specialty contractor means a contractor whose operations do not fall within the definition of "general contractor". A specialty contractor may only subcontract work that is incidental to the specialty contractor's work.



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PART 1 - Company Information

Company Name:	Contact Person:
Address:	Title:
City:	Phone:
State/Zip:	Fax:
NAICS #:	Email:

Signature: _____ Date: _____

Category Classification

- Building
 Heavy
 Utility
 Specialty
 Highway

<input type="radio"/> Yes <input type="radio"/> No	Is your business considered to be a small business per definition of the Small Business Administration?
<input type="radio"/> Yes <input type="radio"/> No	If your company is a subsidiary, division of, or a member of a larger corporate entity, please identify the corporate entity here:
<input type="radio"/> Yes <input type="radio"/> No	Have you had any AKOSH/OSHA enforcement visits? If yes, explain reason and results in your narrative.
<input type="radio"/> Yes <input type="radio"/> No	Has your organization, parent, or subsidiary company experienced an occupational-related fatality on one of your projects between September 1, 2020 and August 31, 2021?

Report ONLY work hours performed in ALASKA	Calendar Year 2018	Calendar Year 2019	Calendar Year 2020	YTD est. Thru August 2021
Average Number of Employees				
Total Employee Hours Worked				
Total Lost Work-day Cases of Injuries/Illnesses Column H on OSHA 300 log				
Lost Workday Incidence Rate # of lost workday cases X 200,000 ÷ total employee hours worked				
Total Recordable Injury/Illnesses Combined totals in columns H, I & J of OSHA 300 log				
Recordable Incident Rate # of total recordable cases X 200,000 ÷ total employee hours worked				
DART Rate # of total workday cases + total restricted workday cases X 200,000 ÷ total employee hours worked				



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PART 2 - Program Assessment Checklist

PRINCIPAL COMMITMENT			
Yes	No	NA	
			Written safety & health policy signed by a company principal with an emphasis on company commitment to safety & health
			Designated safety administrator/coordinator trained in safety & health hazard recognition and management/risk control
			Company policy gives field employees authority to “shut down” a job or operation because of a hazard that presents and imminent danger to employees
			Have safety & health policy or requirements written into contracts to require subcontractors to meet your safety requirements
			Utilize a pre-qualifications safety & health screening method to select subcontractors, suppliers or vendors
			Control and monitor all safety activities on the jobsites
			Provide contractual provisions for termination of contractors for unsatisfactory safety performance

ACCIDENT PREVENTION PLAN & PROCEDURES			
Yes	No	NA	
			Provide safety & health rules that are equal to OSHA standards
			Require job hazard analysis (JHA) job-specific tasks
			Standard procedure to inform and receive information from other contractors on the same job site

NEW HIRE ORIENTATION INCLUDES:			
Yes	No	NA	
			How to report injuries and unsafe conditions and work practices
			An overview of the company’s safety & health requirements
			Location of first aid kits/facilities
			Use and care of personal protective equipment (PPE)
			Actions to take in the event of emergencies
			Overviews of the company’s discipline procedures and enforcement policy

EMPLOYEE TRAINING & DOCUMENTATION INCLUDES:			
Yes	No	NA	
			Have personnel on each job trained in first aid and CPR
			Supervisors with OSHA extensive (ie: 10/30 hour) hazard recognition/competent person training certification
			Fall protection systems
			Forklift operator training certification & evaluation
			Fire prevention
			Hazard communication
			Defensive driving
			Use of personal protective equipment (PPE) and respirators
			Confined space hazards
			Asbestos, lead & silica hazard awareness
			Manual lifting hazard awareness
			Electrical hazards, including lockout/tagout procedures
			Site-specific risks and hazard awareness
			Traffic zone hazard awareness and flagging



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WRITTEN POLICY OR PROCEDURE THAT INCLUDES:

Yes	No	NA	
			Lockout/tagout of hazardous energy sources
			Permit required confined space entry procedures
			Blood borne pathogens exposure control plan
			Fall protection plan
			Fire prevention and emergency action plan
			Asbestos and lead procedures
			Trenching and excavations procedures
			Traffic control plan
			Vehicle driver selection and fleet safety policy
			Assured equipment grounding or GFCI program
			Disciplinary procedures and enforcement of subcontractor safety
			Workplace violence and harassment policy
			Explosives and detonation safety plan
			Pre-lift cranes or hoisting equipment plan
			Behavior based observations & reporting
			Quality assurance/quality control plan

EMERGENCY PROCEDURES AND FIRST AID/CPR

Yes	No	NA	
			First aid and CPR certifications (current and up to date)
			Written emergency procedure plan for evacuation
			Crisis management plan
			Have the appropriate/adequate first aid supplies and equipment on a jobsite
			Have an emergency rescue plan in place for a fall and caught-in-between victim (ie: falls, excavations, confined space, etc.)

INSPECTIONS AND ACCIDENT INVESTIGATIONS & REPORTS

Yes	No	NA	
			Maintain safety & health recordkeeping requirements
			Provide safety inspection and accident investigation procedures
			Injury accidents are investigated promptly after an occurrence and a report is presented
			Accident reports are reviewed regularly to determine corrections
			Require safety & health inspections of each jobsite at least weekly by the supervisor
			An investigation procedure for near misses
			Daily site inspections conducted by competent person
			Site inspections documented

CONSISTENT USE OF SAFETY POSTERS AND POSTED INFORMATION

Yes	No	NA	
			All required federal and state forms and notices posted at jobsite
			Post injury and illness records such as 300A form
			Communicate all environmental monitoring and test data with employees (ie: post the results of air tests)
			Use warning signs on jobsites to alert workers of hazards
			Safe work practices and rules posted
			Crane or material handling hand signals posted



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SUBSTANCE ABUSE POLICY PROCEDURES			
Yes	No	NA	
			Written drug and alcohol prohibition policy
			Drug & alcohol testing protocol
			Inclusions of subcontractors in testing policy

PARTICIPATION IN AT LEAST ONE CONSTRUCTION SAFETY ACTIVITY BY ONE OR MORE EMPLOYEES (INCLUDES SAFETY & HEALTH RELATED SEMINARS, WORKSHOPS AND CONFERENCES)			
Yes	No	NA	
			Construction related association training classes
			Active participation in a construction related association safety committee
			National safety organization conference
			Academia-sponsored safety seminar/conference (ie: college, university or junior college)
			Local or regional safety seminars

RETURN TO WORK PROGRAM & MEDICAL MANAGEMENT			
Yes	No	NA	
			Written return to work program

BILINGUAL EMPLOYEES			
Yes	No	NA	
			Provide safety training in a language other than English
			Provide written material and signs in language other than English

GENERAL CONTRACTORS/CONTRACT MANAGER SECTION ONLY			
Yes	No	NA	
			Provide OSHA 10-hour training to field employees
			Provide 30-hour OSHA training to field management staff
			Track subcontractor work hours by site or project
			Track subcontractor work related injuries by site or project
			Have a mandatory 100% 6-foot fall protection requirement for all trades or adhere to your state-run OSHA program
			Company participates in any OSHA partnerships or alliances
			Offer your subcontractors free OSHA 10 or 30-hour training
			Require JHA use by subcontractors for daily operations
			Require daily written crane inspections
			Require crane pre-task planning for all picks
			Require 3 rd party crane inspections prior to crane operational set up
			Conduct daily pre-task meetings with involved trades covering high hazard work
			Conduct a project wide muscle strain prevention program

You may attach up to one page of explanation of the reasons marked “NO” or “NA” in the above items.



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PART 3 - Narrative

Description of Your Safety Program

This area is where you will show why your company safety program is the best and what makes it unique. Do not repeat everything you have said in your application to this point or reiterate what is published in your corporate program. This is where you talk about the special things your company does, to bring its employees into your company’s safety culture. Suggested items you should address are: Management commitment, employee involvement, and creative practices.

The narrative should not exceed three pages and MUST be submitted in WORD format. Provide a brief description of the type of work your company performs, including any special hazards that are faced and explain **why you believe your company is set apart from others.**

Use this as a guide to prepare the written description of your safety program. Provide information about your orientation program, training program, recognition program, innovative practices and those elements described in the following:

- **PARTICIPANT INVOLVEMENT:** Consider how the individual closest to the daily work make decisions that improve safety. Please write about how your project managers/superintendents ensure that everyone can participate in the decision-making process when it comes to safety.
- **OPEN DISCUSSION:** Consider how your project managers/superintendents ensure that there are open discussions about safety – how they communicate their expectations. Write about a time when your project managers/superintendents made safety a priority in order to push a key project forward.
- **VISIBLE MANGEMENT COMMITMENT:** Consider how your project managers/ superintendents perform their daily site activities. Write about a time when you had to communicate safety expectations to your customer while handling several competing priorities like schedule and quality. If you’ve used AKOSH Consultation, provide information about your experience.



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INDIVIDUAL AWARD

The recipient of this award is someone who leads the charge in safety within your organization and who has had been a driving force on improving the overall culture of the company.

GENERAL INFORMATION:

Company Name:	Nominee Name:
Address:	Title:
City:	Phone:
State/Zip:	Fax:
NAICS #:	Email:
Submitted by:	
Signature:	Date:

<input type="radio"/> Yes	Has your organization, parent, or subsidiary company experienced an occupational-related fatality on one of your projects between September 1, 2020 and August 31, 2021?
<input type="radio"/> No	

APPLICATION:

Submit up to two pages of summary supporting why your candidate should be considered for this award. Use this as a guide to prepare the written narration in WORD format describing the candidate:

- Past 5 years of activities and accomplishments
 - Explanation of job responsibilities
 - Technical expertise and job specific safety training/education
 - Demonstrated safety leadership and communication tools used
 - Participation in industry groups, safety organizations, community activities and legislative committees
 - Other recognition received
 - Innovative ideas
- Please include 100-word summary of individuals safety accomplishments & activities



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