WHS UNIT

WORKPLACE HEALTH AND SAFETY AWARDS
NOMINATION FORM

Please complete this form and return to the whs-admin@uow.edu.au to nominate an individual or team for a Workplace Health and Safety Award. For information about the awards and details about the nomination deadlines please refer to the VC Awards webpage.

NOMINEE DETAILS (Individual or team leader)

Full name: Staff/Student no:
E-mail: Location (if relevant):
Faculty/Division: School/Unit:
Has the nominee previously received an Health and Safety Award: □ No □ Yes, Year

TEAM DETAILS (Not required for individual award nominations)

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<th>Full Name</th>
<th>School/Unit</th>
<th>Staff/Student number</th>
<th>Have you received a Health and Safety Award previously?</th>
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WHS Award Category

1. Best Solution for a Workplace Hazard Award □ Individual Award □ Team Award
2. Best Team Contribution to Improving Health and Safety Award □ Team Award
3. Safety Leadership Award □ Individual Award

Selection Criteria

Please include the following details with the submission, up to an A4 page, including statement of results/benefits, potential for use across UOW, application of hierarchy of control using the highest level of control practicable. Additional information may also be supplied including photos, documents, statements.

1. Best Solution for a Workplace Hazard
   Recognition of excellence in developing and implementing a solution to an identified health and safety issue.
   □ Full description the workplace health and safety issue.
   □ Details of the solution implemented to address the issue and its effectiveness.
   □ The use of hierarchy of control in the development of the solution to eliminate or minimise risk of injury.
   □ Describe how the solution was developed in consultation with others at UOW and, if appropriate, external organisations.
   □ Details to demonstrate that the solution was original and/or innovative.
   □ Describes the impact of the solution on the overall operations of the unit and the university.
2. Best Team Contribution to Improving Health and Safety
Recognition of the establishment, improvement and/or maintenance of WHS practices by a team.

- Description of the systematic approach to WHS management applied by the team.
- Details of the innovative approach to health and safety initiatives implemented by the team.
- Methods of consultation applied within the team to raise awareness on WHS issues.
- Details of improvements to workplace health and safety performance for the team.

3. Safety Leadership Award
Recognition initiatives to establish, improve and maintain best practice in WHS by an employee, supervisor, head, manager, dean or director of people and/or facilities.

- An outline of the workplace health and safety initiatives that have been implemented by the individual.
- List of the individual's health and safety achievements/contributions and a description of how they were accomplished.
- Description of any barriers that were encountered during implementation.
- Details of the improvements in health and safety performance.
- Describe how the individual's impact on health and safety management and performance was above and beyond their immediate field/area of responsibility.
- Illustrate the potential for the individual's contribution to have broader application
- Evidence of the communication and consultation processes used to implement safety achievements/contributions

DECLARATION OF NOMINATOR

I _____________________________, wish to nominate the above person/s for a Health and Safety Award.

Position: ___________________________ Unit: ___________________________

Signature: ___________________________ Date: ___________________________

SUPPORT BY SUPERVISOR OR HEAD OF UNIT

I _____________________________, support this nomination for a Health and Safety Award.

Comments: ___________________________

Position: ___________________________ Unit: ___________________________

Signature: ___________________________ Date: ___________________________

EXECUTIVE DEAN/DIRECTOR ENDORSEMENT

I, _____________________________, endorse this nomination for a Health and Safety Award.

Faculty/Division: ___________________________

Signature: ___________________________ Date: ___________________________