***SISA AWARDS NOMINATION FORM***

**Award Category #5: Most effective Injury Prevention Program**

*Awarded for the best example of an Injury Prevention Program eg manual handling, slip trip falls, training, auditing*

|  |  |  |  |
| --- | --- | --- | --- |
| Nominee |  | | |
| Contact Name |  | Position |  |
| Email |  | Phone |  |
| Address |  | | |

Please note that **all** criteria must be addressed. Responses need only include ‘material’ content and feel free to use additional pages as needed. Please email your nomination to [sisa@sisa.net.au](mailto:sisa@sisa.net.au) by the due date.

|  |  |  |
| --- | --- | --- |
| **Criteria** | **Response** | **Evidence\*** |
| 1. A description of the nominated Injury Prevention Program |  |  |
| 1. Relevance to the self insurers organisation |  |  |
| 1. Evidence of employee engagement consultation |  |  |
| 1. Evidence of executive line management inclusion/consultation/ leadership |  |  |
| 1. Evidence of implementation and effective outcomes which have impacted positively on the culture of the organisation |  |  |

\* **Please indicate the key evidence to be made available for review by the judging panel.**