

VOSH PROGRAM DIRECTIVE: 09-070

ISSUED: 15 July 2018

SUBJECT: VOSH - VADOC Challenge Pilot Policies and Procedures Manual

Purpose: This Directive establishes the policies and procedures for implementation of the VOSH – VADOC Challenge Pilot Policies and Procedures Manual.

This Program Directive is an internal guideline, not a statutory or regulatory rule, and is intended to provide instructions to VOSH personnel regarding internal operation of the Virginia Occupational Safety and Health Program and is solely for the benefit of the program. This document is not subject to the Virginia Register Act or the Administrative Process Act; it does not have general application; and it is not being enforced as having the force of law.

Scope: This Directive applies VOSH-wide.

Reference: VOSH Directive 13-050, VOSH - VADOC Challenge: A Strategic Partnership Pilot Program of the Virginia Occupational Safety and Health Program and the Virginia Department of Corrections (15 July 2018)

Cancellation: Not Applicable

Effective Date: 15 July 2018

Expiration Date: Not Applicable

Action: Directors and Managers shall ensure that policies and procedures established in this Directive are uniformly enforced and field personnel understand and comply with the requirements included in this Directive.

C. Ray Davenport

Commissioner

Distribution: Commissioner of Labor and Industry
Assistant Commissioner
VOSH Directors and Managers
Legal Support & OIS Staffs

Director of Cooperative Programs
VOSH Compliance & Cooperative Programs Staffs
OSHA Region III & OSHA Norfolk Area Offices VOSH

When the guidelines, as set forth in this Program Directive, are applied to the Commissioner of the Department of Labor and Industry and/or to Virginia employers, the following federal terms if, and where they are used, shall be considered to read as below:

<u>Federal Terms</u>	<u>VOSH Equivalent</u>
OSHA	VOSH
Federal Agency	State Agency
Agency	Department
Regional Administrator	Assistant Commissioner
Area Director	Regional Director VOSH Program Director
Regional Solicitor	Attorney General or VOSH Division of Legal Support (DLS)
Office of Statistics	VOSH Research and Analysis
29 CFR	VOSH Standard
Compliance Safety and Health Officer (CSHO)	CSHO



VOSH – VADOC Challenge Pilot Program Policies and Procedures Manual

*Virginia Voluntary Protection Program
Strategic Partnership Between the
Virginia Department of Labor and Industry
and the
Virginia Department of Corrections*

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I. INTRODUCTION

The Department of Labor and Industry's Virginia Occupational Safety and Health (VOSH) program has two cooperative programs that recognize safety and health excellence: the Virginia Voluntary Protection Programs (VPP) and the Safety and Health Achievement and Recognition Program (SHARP). The Virginia Department of Corrections (VADOC) has the only two correctional facilities in the country that have achieved STAR status in VPP. VOSH and VADOC are embarking on a strategic partnership and pilot program to use OSHA Challenge concepts to move additional VADOC correctional facilities towards VPP STAR participation.

A. Purpose

This manual is to provide guidance, policy, and clarification for the implementation and monitoring of the VOSH - VADOC Challenge: A Strategic Partnership Pilot Program of the Virginia Occupational Safety and Health Program and the Virginia Department of Corrections (hereafter may also be referred to as "Challenge").

B. Scope

This instruction applies VOSH-wide.

C. Authority

Va. Code §40.1-1 authorizes the Virginia Department of Labor and Industry to administer and enforce "occupational safety and health activities as required by the Occupational Safety and Health Act of 1970". Section 21(c) of the Occupational Safety and Health Act gives OSHA the authority to develop programs such as Challenge. The Act states, in part:

"The Secretary, in consultation with the Secretary of Health and Human Services, shall (1) provide for the establishment and supervision of programs for the education and training of employers and employees in the recognition, avoidance, and prevention of unsafe or unhealthful working conditions in employments covered by this Act, and (2) consult with and advise employers and employees, and organizations representing employers and employees as to effective means of preventing occupational injuries and illnesses."

D. Action Information

Responsible Office: Virginia Occupational Safety and Health, Voluntary Protection Programs (VPP).

E. Background

VPP has attracted a wide spectrum of employers, from smaller companies with limited resources to large industrial sites with full-time safety and health professional staff. VOSH's premier recognition program, VPP, has gained international recognition for its successes in reducing injuries, illnesses, and fatalities in the workplace. As the program has grown, so has the interest. VOSH found, through

numerous resources, that many employers are willing to develop a safety and health management system (SHMS) at a level equal to that of a VPP Participant, but lacked the necessary knowledge or resources. Challenge was developed to address their needs in a manner that provides a structured, tiered process based on the VPP model.

F. Definitions

Administrator: Selected individuals in organizations such as corporations, state agencies or non-profit associations that have met VOSH VPP criteria including dedicated resources to administer the Challenge program for their worksites/members or other organizations' worksites/members. Administrators are involved in the application and review processes.

Annual Report: An annual report prepared by Challenge Administrators that summarizes Challenge Participants' progress throughout the course of the year and provides up-to-date information that is transmitted to VOSH by February 28th of the following calendar year.

Candidate: An employer that has elected to submit a Challenge application to a Challenge Administrator. The employer will remain a Candidate until receiving notification from VOSH VPP that it has been accepted into Challenge as a Participant.

Challenge Stages (I, II, and III): Challenge Stages serve as "roadmaps" or guides for achieving VPP status. Each stage has requirements that define the necessary knowledge, actions, outcomes, and documentation for successful completion and implementation of an effective safety and health management system.

Contract Employees: Employees who are employed by a company that provides services under contract to a Challenge Candidate or Participant, usually at the Candidate's or Participant's worksite.

Coordinator: Persons appointed by a Challenge Administrator to manage program implementation for its designated Challenge Participants.

OCTPS Form: OSHA Challenge Tracking Participant Status (OCTPS) form that is submitted every quarter on the status of each Challenge Participant.

Participant: A Candidate that has been accepted into Challenge for the purpose of developing or improving its safety and health management system.

Safety and Health Management System (SHMS): A method of preventing worker fatalities, injuries and illnesses through the ongoing planning, implementation, integration, and control of four interdependent elements: Management Leadership and Employee Involvement; Worksite Analysis; Hazard Prevention and Control; and Safety and Health Training.

Quarterly Report: A report completed by Challenge Administrators on a quarterly basis stating if there has been a significant change to any of its Participants' sites.

Temporary Employees: Employees hired on a non-permanent basis by the Applicant/Candidate/Participant site that they direct and control as their own.

Vetting: A process where VOSH VPP accepts the Challenge Candidates as Participants.

G. Challenge Principles

Challenge provides a "roadmap to VPP" plotting a path for employers to follow with the help of a voluntary network of safety and health professionals committed to providing guidance and advice in developing and implementing a safety and health management system based on VOSH's VPP model. This program provides flexibility for diverse industries with separate tracks for general industry and provides recognition for employers' incremental improvements on their path to attaining VPP status.

In addition, Challenge supports VOSH's VPP mission to protect lives by reducing fatalities, injuries, and illnesses in the workplace. Other important objectives of Challenge are to:

- Support the Virginia Department of Labor and Industry's Strategic Management Plan,
- Logically integrate Challenge with the existing menu of other cooperative programs,
- Uphold quality and integrity commensurate with VPP, and
- Be responsive to stakeholders' needs and maintain positive relations.

H. Challenge Elements

The basic requirements of Challenge are the same as VPP. To qualify for VPP, a site must operate a comprehensive safety and health management system that includes four essential elements and their sub-elements. These elements, when integrated into a site's daily operations, can reduce the incidence and severity of illnesses and injuries:

- Management leadership and employee involvement,
- Worksite analysis,
- Hazard prevention and control, and
- Safety and health training.

I. Performance Measures

VOSH VPP measures Challenge success at both the Participant level and overall program level by monitoring and evaluating the reports submitted by Administrators. VOSH VPP evaluates quantitative and qualitative measures such as illness and injury data and leading indicators for management commitment and employee

involvement. Other measures include evaluating the number of Participants at each Stage, the percentage of Participants progressing to the next stage, and the percentage of those ultimately achieving VPP status.

II. ROLES AND RESPONSIBILITIES

A. Administrators: The Challenge Administrators' primary role is to guide their Participants through a structured series of stages making incremental improvements in their safety and health management system through a combination of development, implementation, and training steps. They may also perform routine evaluations, on-site visits, and data collection to track progress.

Administrators have an important role in collecting and reporting information on each Candidate and Participant to the VOSH VPP Office such as injury and illness data and progress reports. The Administrator's work eases the burden on VOSH's limited resources and allows Participants to work towards developing a world-class safety and health management system. Administrators are the Participants' primary contact and liaison with VOSH VPP. Some specific responsibilities of Administrators include:

- Providing assistance to Candidates in developing Candidate applications;
- Reviewing Candidate applications;
- Compiling and sending Candidate applications to the VOSH VPP Office for review and approval;
- Evaluating and reporting on Participants' progress to VOSH VPP by sending quarterly and annual progress reports;
- Sending Stage Completion forms; and
- Reviewing, verifying, and forwarding information on elements of stage completion to the VOSH VPP Office.

Sponsoring Challenge Participants: Each Administrator is required to commit to sponsoring a specified number of Participants over a period of time, typically three years. An administrator may sponsor more participants upon a showing of willingness and adequate resources as well as consideration of past performance. Factors to be considered will include but are not limited to formal evaluations, participation in quarterly conference calls, face-to-face meetings, and progress reports.

B. Coordinators: Coordinators are appointed by the Administrator and approved by VOSH. They may perform a number of tasks under the direction of the Administrator. At the discretion of the Administrator, Coordinators may help manage the program at the Participant level which may include providing training, monitoring, guidance, and verifying Challenge Stage implementation and completion.

C. Participants: Once a Candidate is accepted by VOSH VPP as a Participant in Challenge, the Participant is responsible for performing the following actions:

- Taking the necessary actions to meet the requirements for the various Challenge

Stages in a manner that reflects the size and nature of the business and to the satisfaction of the Challenge Administrator and VOSH VPP;

- File timely progress reports as required by the Coordinator and/or the Administrator; and
- Continually assess their progress and improve as necessary.

D. VOSH's Role in VADOC Challenge: VOSH's role in VADOC Challenge is primarily related to:

- Program design and policy;
- Managing/controlling the program for the purpose of program assessment and improvement;
- Approval of Administrators, Coordinators, and Candidates;
- Acceptance and Recognition of Participants at inception, Stage completion, and graduation; and
- Program evaluation.

The specific responsibilities of various VOSH Offices are described in the following paragraphs. (See Appendix A: VOSH VADOC Challenge Process Flowchart.)

1. Division of Legal Support, VPP, Office of Research and Analysis (ORA), Office of Policy and Planning (OPP), and Office of Whistleblower Protection (OWP) (hereafter "Division): The Division reviews and approves Candidate packages. Upon vetting by the VOSH VPP Office, the Division either may or will:

- Notify Participants of acceptance;
- Enter pertinent information in database;
- Review Administrators' quarterly and annual progress reports;
- Enter the Administrators' quarterly and annual progress information into a database;
- Review stage completion materials;
- Issue appropriate congratulatory letters to the Commissioner for signature;
- Develop and maintain a VOSH Challenge web page for the general public, Administrators, and Participants which will contain information pertinent to the program including a listing of Administrators, Participants, and Coordinators;
- Maintains statistics on a quarterly basis;
- Provide continuous monitoring and a formal evaluation annually;
- Conduct quarterly meetings with Administrators either by telephone or in person;
- Follow-up meeting outcomes and develop program changes as necessary;
- Form workgroups to address and resolve issues as they arise;
- Provide outreach and training as necessary to all parties in the program and general public; and
- Participate in conferences, roundtable discussions, and the development of informative briefings for the Commissioner.

2. VPP Office: The VPP Office will send congratulatory letters signed by the VPP Program Manager to Participants upon completion of Stage I with copies sent to the participant's Administrator.

3. **Division:** The Division Director will send congratulatory letters signed by the Assistant Commissioner to Participants upon completion of Stage II with copies sent to the participant's Administrator.
4. **VOSH VPP:** VOSH VPP will send congratulatory letters signed by the Commissioner of the Department of Labor and Industry to the Participants upon completion of Stage III with copies sent to the Participant's Administrator.

III. ELIGIBILITY REQUIREMENTS

A. Candidate/Participant Eligibility: Challenge is open to Virginia Department of Corrections facilities, operations and sites (hereinafter "sites") that are interested in and committed to improving their safety and health management system using the VPP model. Candidates must have the sponsorship of an approved Administrator as well as confirmation in writing stating their commitment to improve their safety and health management systems and provide other requested information to VOSH VPP in their applications. Continued participation in Challenge requires that Participants exhibit continued improvements of their safety and health management systems by providing regular progress reports to their Administrator.

The existence of any of the following precludes the filing of an application:

- Open VOSH enforcement investigations,
- Pending or open VOSH contested citations or notices under appeal at the time of application,
- Whistleblower violations during the 12 months prior to application,
- Unresolved, outstanding VOSH enforcement actions, such as long term abatement agreements or contests.

B. Challenge Administrators: Eligibility does not extend to private safety and health consultants or other for-profit associations at this time. However, a participant may elect to hire a safety consultant for the purpose of improving their safety and health management system. An Administrator must possess the following characteristics in order to be eligible:

- **Knowledge and Experience:** Administrators must have demonstrated knowledge and experience in safety and health management systems. This experience may include involvement in other VOSH cooperative programs such as VPP and/or experience in administering corporate-wide safety and health policies at the facility level.
- **Resources:** Administrators must confirm the availability of resources including time, personnel, and expertise to administer, coordinate, and facilitate Challenge to its Candidate/Participant facilities.
- **Commitment:** Administrators must be committed to Challenge and sponsor an agreed upon number of Participants.

C. Coordinators: To serve as a Coordinator, the following eligibility criteria for

Coordinators must be met:

- **Knowledge and Experience:** Coordinators must be knowledgeable safety and health professionals with experience in implementing and evaluating safety and health management systems.
- **Training:** Ideally, Coordinators will have completed the OSHA Special Government Employees (SGE) training or equivalent (i.e., corporate safety and health audit training).
- **Evaluation Experience:** Ideally, Coordinators will have performed site safety and health management system reviews, VPP type onsite evaluations, or safety and health inspections.

IV. CHALLENGE REQUIREMENTS

A. Challenge Stages Serving as a Roadmap: VOSH developed documents to guide Participant's through the three stages, ranging from the initial planning processes to the implementation of effective safety and health management systems based on the VPP model. Employers can begin participation in Challenge at any stage but they must first demonstrate their programs are as effective as those outlined in the guidelines. Stage requirements provide guidance to implement the four main elements of VPP elements, including:

- Management leadership and employee involvement,
- Worksite analysis,
- Hazard prevention and control, and
- Safety and health training.

Using the Challenge materials including the VOSH OCTPS forms, Participants can track their progress. OCTPS automatically calculates the percentage of completion for each element including the required actions, documentation, and outcomes for each stage.

B. Continuous Improvement: With the three VOSH VADOC Challenge Stages, the intention is to have the Participants learn the importance in the upkeep of their safety and health management systems by improving their existing program(s) and maintaining enthusiasm for continued involvement among its employees in carrying out safety and health activities. VOSH VPP believes Participants will find continuous improvement is not only a commonality in Voluntary Protection Programs but is a critical element to all successful safety and health management systems.

Furthermore, the verification process by the Administrator looks at all aspects of the implementation process and may recommend improvements as the employer progress through the stages.

C. Completion of Challenge Stages: Although Participants can enter Challenge at any of the three Stages, the Administrator is responsible for verifying the required documentation in accordance with the Stage requirements. Once approved into VOSH VPP Challenge, Participants are to work with their Administrators and Coordinators to assess their present level of performance and then take actions to

implement and improve various elements as needed throughout the process.

The Participant is required to demonstrate that their programs are effective at the appropriate level by demonstrating knowledge, actions, documentation, and specific outcomes upon completion of each stage. At the completion of Stage III, the Participant should have an effective safety and health management system(s) in place and be prepared to apply for Voluntary Protection STAR recognition.

1. Stage I – Assess, Learn and Develop

This is the Challenge Stage in which introduces Participants to the basic VPP elements that are necessary to launch the development and implementation of an effective safety and health management system. The activities normally are related to the following:

- Assessing performance of existing safety and health programs and policies,
- Providing training to management and employees on effective safety and health management system programs and activities, and
- Developing strategies, programs, policies, and expected outcomes to accomplish Stage 1.

2. Stage II – Implement, Track, and Control

This is the Challenge Stage in which the basic actions and outcomes of Stage I have been completed and the worksites are beginning to implement more thorough safety and health management system processes. The activities are generally related to the following:

- Continuing to enhance and develop the site's safety and health management system,
- Fully implementing and tweaking the site's safety and health management system, and
- Begin to incorporate policies for contractor/special trade contractor Safety and Health program requirements.

3. Stage III – Reassess, Monitor, and Improve

This is the Challenge Stage in which the Participant site's safety and health management system has been fully implemented and the site is continuing to assess its effectiveness and improving its performance where necessary. The activities are generally related to the following:

- Monitoring the Participant site's safety and health management system,
- Refining and enhancing the Participant site's safety and health management system, and
- Reassessing and continuously improving the Participant site's safety and health management system.

4. Detailed required actions and desired outcomes for the three stages are listed on the OCTPS Form in the VADOC Participant OCTPS Form (Appendix B).

V. THE CHALLENGE PROCESS

A. Availability of Challenge Information: Organizations interested in learning about Challenge; its benefits; how to participate as an Administrator, Coordinator, Candidate/Participant; or obtaining an application package may obtain information by contacting the Virginia VPP Office.

B. Applications for VOSH Challenge Administrators: The following provides information for those interested in applying to be an Administrator:

- 1. Preparing Applications for Administrators:** Organizations or business entities that meet the eligibility criteria defined in Section III of this manual and want to be Administrators must complete and submit the requested information in the VADOC Challenge Administrator Application and Instructions (Appendix C.)
- 2. Addressing Applications:** The application package must be submitted electronically to the VOSH VPP Office via the VOSH – VADOC Challenge Coordinator at the following address:
- 3. Receipt by VPP Office:** If the application package is sent to a VOSH VPP Office, it will be forwarded to the VOSH – VADOC Challenge Coordinator.
- 4. Contents of Application Package:** The Administrator’s application package must contain the required information including the Administrator’s Statement of Commitment, Administrator’s Information Form (the proposed Administrator’s name, address, contact information, knowledge and experience, the resources available, and the internal processes for collection of information), and the Coordinators’ Information Form for each Coordinator that will assist the Administrator in carrying out his/her responsibilities.
- 5. VOSH Review and Approval:** VOSH VPP must complete the review of Administrator applications within 45 days of receipt. After VOSH VPP completes its review and determines that the Administrator applicant meets the eligibility criteria, the Division Director is to send a letter to the Administrator advising them of the approval. The name and address of the approved Administrator will also be added on the VOSH VPP Challenge website so any potential Challenge Candidates can have a point of contact and to the VADOC Participant and Administrator Listing Form (Appendix D).

C. Applications from Challenge Candidates

- 1. Application Content:** A Candidate site that meets the eligibility criteria defined in Section III (Eligibility Requirements) of this manual must complete the application VADOC Challenge Participant Application and Instructions (Appendix C). The information included in the application must contain, as a minimum, the Challenge Participant Application, Baseline OSHA 300 log information for the last full calendar year, Optional Data Tracking and Candidate Statement of Commitment. The instructions are available from the Administrator sponsoring

the Participant, the VPP Program Manager, and the VOSH – VADOC Challenge Program Coordinator. This completed Candidate Information Package must be sent to the Administrator sponsoring and supporting the applicant.

- 2. Administrator Actions:** The Administrator, upon receipt of a Candidate Information Package, is to review the package to insure all the required information is included. The Administrator may also need to make a determination that it has the available resources to serve as the Administrator for the Candidate (time, staffing, and resources to support the Candidate's efforts to improve its safety and health management system). Upon approval, the Administrator is then to send the package electronically to the VOSH VPP Office for review.
- 3. VOSH Review and Approval Actions:** Upon receipt of the application package, the VOSH – VADOC Challenge Program Coordinator is to review the application package to ensure that the Candidate meets the eligibility criteria provided in Section III of this manual. The VOSH – VADOC Challenge Program Coordinator must also verify that the Administrator has adequate resources to support the Candidate's efforts to improve its safety and health management system.
- 4. Recording Information on the New Participants:** After notification of acceptance of a new Challenge Participant, the VOSH – VADOC Challenge Coordinator is to enter the required information for tracking purposes on the VADOC Participant and Administrator Listing Form (Appendix D).
- 5. Submission of Stage Tracking Forms:** Once the Candidate is approved and included in VOSH VPP Challenge as a Participant, the sponsoring Administrator must begin to maintain the Challenge Stage I, II, or III OCTPS Forms as the Participant progresses. The Coordinator and/or the Participant may assist in the assessment of the safety and health management system status.

D. Participant Actions to Achieve Challenge Stages

- 1. Working Toward Attainment of VPP Status:** The main objective of VOSH VPP Challenge is to guide Participants in accomplishing specific actions that will improve their safety and health management system programs ultimately to the VPP level. To assist the Participant sites in this improvement, VOSH VPP has developed the three Challenge Stages which define a less than fully effective safety and health management system (Stage I) up to a fully implemented and effective safety and health management system (Stage III) that when implemented should meet all VPP requirements.
- 2. Determination of Challenge Stage for New Participants:** VOSH VPP accepts participation in Challenge at any of the three stages depending on the safety and health management system elements and activities that have been implemented at the Participant site. To determine the stage in which the new Participant enters Challenge, the Participant uses the OCPTS Forms to determine that it has implemented the actions necessary for Stage I. This is, in effect, the baseline on

which the Participant’s progress in their safety and health management system is measured.

3. **Administrator/Coordinator Assistance:** The Administrator and Coordinators are to assist their Participants in obtaining training, developing experiences, and sharing information that are necessary for the Participants to learn about and perform the actions and outcomes that will improve their safety and health management systems following the roadmaps defined in the three Challenge Stages.
4. **Administrator Verification:** The Administrators are to verify their Participants’ performances by reviewing reports submitted by Participants in addition to onsite visits performed by the Administrator or Coordinator and/or teleconferences. This verification is important because VOSH VPP relies on the Participants to self-assess and report on their performance. A Participant that has completed all the Stage I, II, and III actions should then have a safety and health management system in place that would meet the VPP requirements. A VOSH VPP onsite VPP evaluation would serve to validate that the self-assessing and reporting processes were effectively performed.

E. Reporting on Progress

1. Participant Progress Reports

Reporting on the Participant’s progress is a key element of Challenge which keeps Administrators updated on Participants’ activities and progress as well as helps VOSH VPP to measure the overall outcomes of Challenge and the Participants’ progress.

- a. **Participants Submission of OCTPS Reports:** Participants must submit an updated VADOC Participant Challenge Tracking Participant Status (OCTPS) Form (Appendix B) every 3 months to their Administrator. The report includes a Participant Status Summary and the Stage I, II, or III Status Reports. The OCTPS’s Participant Status Summary Report provides an “at a glance” view of the Participant’s status in completing the activities for each Stage and provides the percentage of activities completed for each stage. The Stage I, II, and III Status Reports serve as a tracking system for the Participants and reviewers to use in assessing the Participants’ progress in each of the three Stages. It also informs the Administrator of the progress made by each of their Participants.

The due dates for the Participant reports are:

Reporting Period	Months Covered	Report Due to Administrator
Q1	January - March	April 15
Q2	April - June	July 15
Q3	July – September	October 15
Q4	October - December	January 15

Table 1-A

Detailed instructions for preparing the Participant OCTPS Form are on the form.

b. Verification of Participants' Progress: Administrator must verify the progress of each Participant that they sponsor to ensure the Participants effectively understand and are implementing the guidance provided through Challenge. This ensures that Participants who complete Stage III are prepared for submitting VPP applications which can then be expeditiously reviewed by the VOSH VPP Program Manager. The methodology used by Administrators for verification is included in the periodic progress reports submitted to VOSH is discussed below.

2. Administrator Progress Reports to VOSH: Administrators submit a number of quarterly and annual reports to the VOSH – VADOC Challenge Coordinator on the progress made by their sponsored Participants.

The following table provides the due dates and the relationships between the various Administrator reports:

Quarter	Months Covered	Type Report Due	Due Date
Q1	January - March	Quarterly (if changes)	April 29
Q2	April - June	Quarterly and OCTPS	July 29
Q3	July - September	Quarterly (if changes)	October 29
Q4	October - December	Annual and OCTPS	February 28

Table 1-B

a. VOSH - Recipient of Administrator Reports: All the Administrator reports must be sent electronically to the VOSH VPP.

b. Quarterly Reports: The Administrators are to prepare and send VOSH an Administrator's Quarterly Report if there have been significant changes to any of its participating sites. Examples of significant changes requiring this report include:

- Changes in the Administrator or Participant contact information.
- The addition of a new Participant to Challenge.
- Participants removing themselves from Challenge.

Table 1-B above shows that the Quarterly Report for the Q2 should be transmitted along with the Challenge Participant OCTPS Forms for the preceding three months (discussed in more detail below). The Q4 Administrators Quarterly Report can be satisfied with the submission of the Administrators Annual Report which is also discussed below.

The details of the information to be included in the Quarterly Reports are described in the VADOC Administrator Quarterly and Annual Summary Report (Appendix F).

- c. **Annual Reports:** Administrator must prepare and submit to the VOSH VPP Office an Administrator's Annual Report by February 28 of each calendar year. The annual report takes the place of the Q4 Administrator Quarterly Report (discussed in the preceding paragraph) since to require a Q4 report would constitute redundant reporting. The annual report should be accompanied with updated VADOC Participant OCTPS Form (Appendix B) for the Participants sponsored by the Administrator for the latter three months of the calendar year (also due February 28).

The Administrator's Annual Report must contain, at a minimum, an Administrator's Annual Report; Summary of Annual Rates by Participant; summary of base metrics; summary of significant achievements and milestones by Participant. Details on submission of the report are provided on the report VADOC Administrator Quarterly and Annual Summary Report (Appendix F).

- d. **Administrator OCTPS Form:** Administrators must update the VADOC Participant OCTPS Form (Appendix B) for each Participant every quarter and send them to the VOSH - VADOC Challenge Program Coordinator electronically. A separate spreadsheet must be provided for each Participant. The Administrator OCTPS spreadsheet must include a Verification Summary, Participant Status Summary, Stage I Status Report, Stage II Status Report, and Stage III Status Report.
- e. **Verification Summary:** As part of the Administrator OCTPS Form, the Administrator must describe in the Verification Summary of the Administrators OCTPS Report the methods used to verify the actions and outcomes of the Participant sites sponsored by the Administrator. Methods may include review of draft/final documentation, monthly or quarterly conference calls, site visits, or e-mail correspondence.
- f. **VOSH Actions upon Receipt of Administrator Reports:** The VOSH – VADOC Challenge Program Coordinator reviews the reports to obtain an understanding of the Participants' Safety and Health Management System progress in order to determine Challenge's progress and continuation. The data is entered into a database to enhance VOSH's decision-making capabilities.

F. Recognition for Accomplishment of Challenge Stages

1. **Completion of Stages:** When a Participant believes they have completed Stage I, II, or III, as specified in the Stage Status Reports, they should notify their Administrator or Coordinator and provide a copy of the completed and updated Stage Status Report showing that the actions and outcomes have been completed.
2. **Administrator Verification:** The Administrator must verify that the Stage actions and outcomes have been completed using a Stage Evaluation Checklist:

VADOC Verification Process Form (Appendix G) through an onsite visit, teleconference, and/or document review. Once the Administrator has verified that the actions have been carried out at a Participant site, they send a Stage Completion Letter and the Stage Evaluation Checklist to the VOSH – VADOC Challenge Program Coordinator.

3. VOSH VPP Actions When Stages Are Completed.

a. Stage I Completion: The VOSH - VADOC Challenge Program Coordinator reviews the Stage Completion materials and e-mails a draft Congratulatory Letter to the VPP Program Manager. The VPP Program Manager signs and sends the Congratulatory Letter to the Participant. VADOC Sample Letters (Appendix H).

b. Stage II Completion: The Division Director sends a Congratulatory Letter to the Assistant Commissioner for signature and transmittal to the Participant. (Appendix H).

c. Stage III Completion: The Division Director sends a Congratulatory Letter for the Commissioner's signature for transmittal to the Participant. In addition to the congratulatory message, the letter advises the Participant that they now has an opportunity to request an expedited onsite VPP evaluation. (Appendix H).

4. Expedited VOSH VPP Onsite Evaluation: If the Challenge Graduate asks the VOSH VPP Office for an onsite evaluation then the VPP Program Manager may place the Participant on the VPP onsite evaluation schedule as quickly as possible.

G. Withdrawal And Termination

1. Request for Withdrawal: A Candidate, Participant, Coordinator, or Administrator can withdraw from the VOSH - VADOC Challenge program at any time. Such Candidates, Coordinators, and/or Participants seeking to withdraw should notify their Challenge Administrator in writing of their intent to withdraw and the reasons why. For Administrators and Administrator Applicants, they should notify the VOSH – VADOC Challenge Program Coordinator in writing of their intent to withdraw and the reasons why.

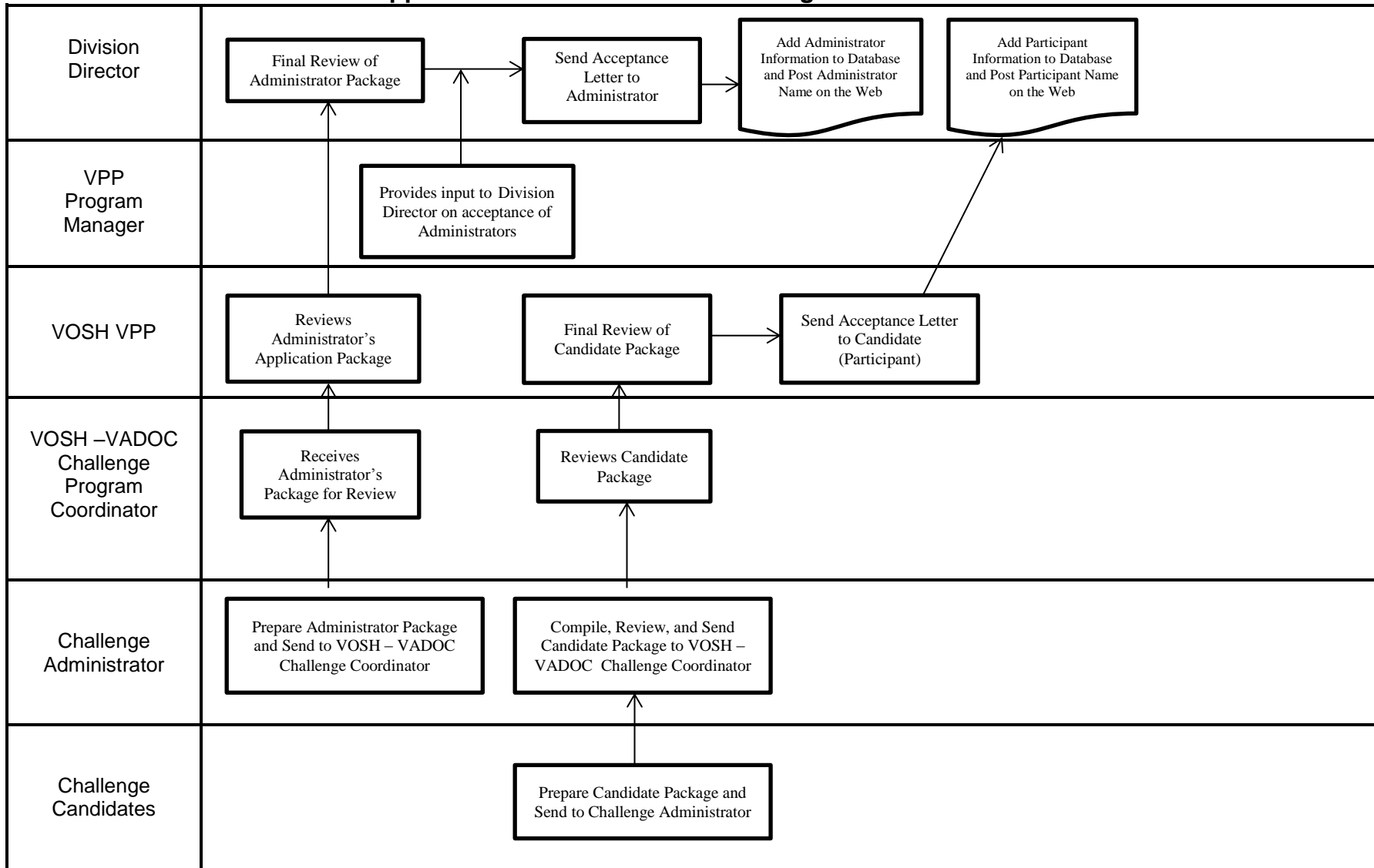
2. VOSH Request Withdrawal: VOSH may ask Administrators or Participants to withdraw for such reasons including but not limited to lack of resources or participation, not submitting the required data, or other reasons indicating roles and responsibilities are not being fulfilled.

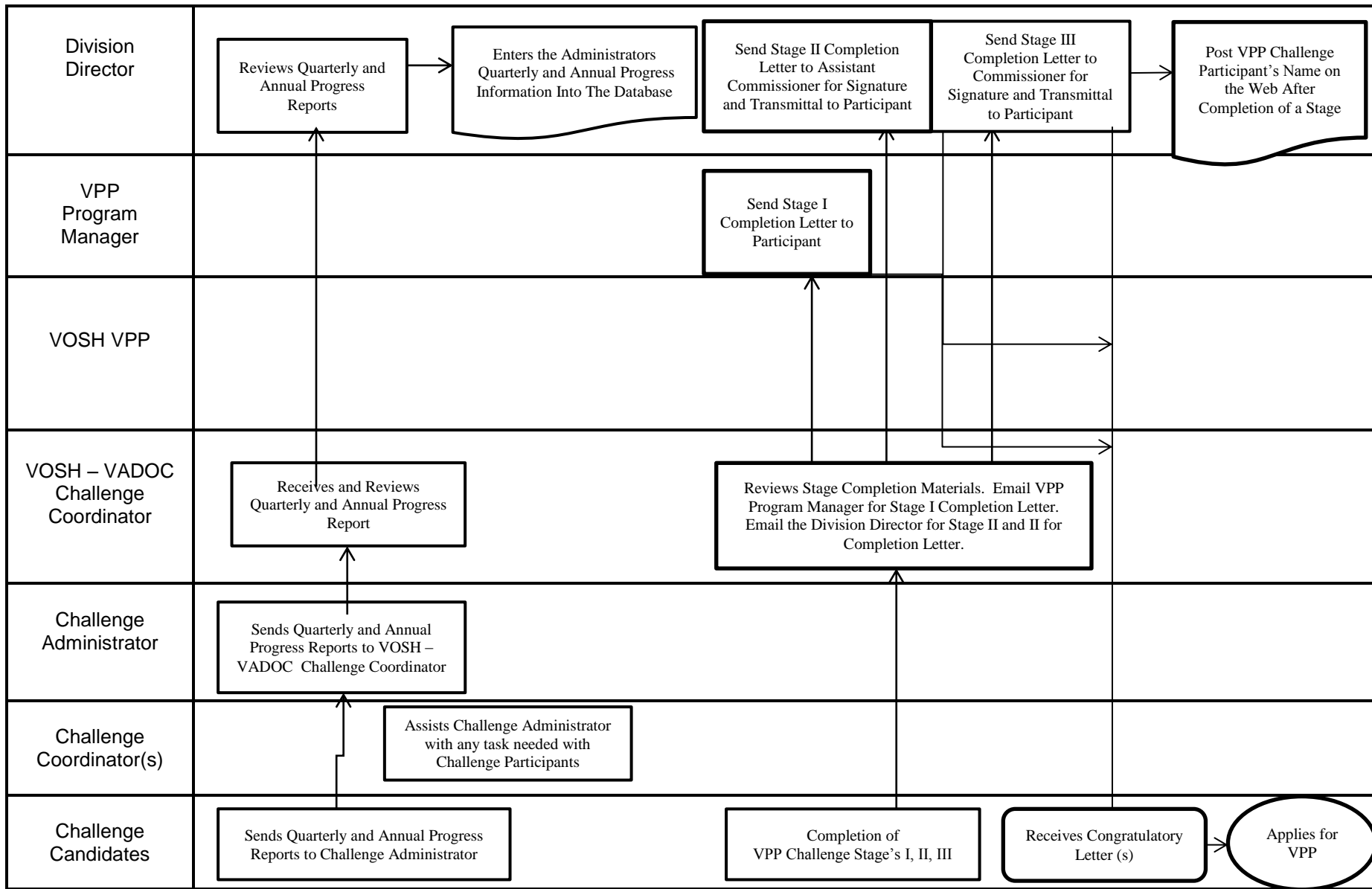
3. Participant Suspension: A Participant may be suspended from the program by the Commissioner of Labor and Industry during the investigation of a fatality or major incident at a covered site. A participant will be automatically suspended from the program during the pendency of a termination process initiated by either VADOC or VOSH under the procedures in paragraph D.4.

below. The timing for reinstatement from the suspension will be at the sole discretion of the Commissioner. VOSH or VADOC may also move to terminate the participant from the program as provided in paragraph D.4. below.

- 4. VOSH Termination Actions:** VOSH will notify any Administrator or Participant of its intent to terminate via a letter. The effective date of the termination is 30 days from the date of the letter. The Administrator or Participant has 30 days to appeal this proposed termination in writing. After reviewing an appeal or in the absence of an appeal, VOSH will send a final termination letter. The effective date of the termination is the date of the letter. A terminated Administrator or Participant may reapply upon mutual agreement between VOSH and VADOC.

Appendix A: VOSH VADOC Challenge Process Flowchart





Appendix B: VADOC Participant OCTPS Form

Electronic File Name: VADOC Participant OCTPS Form 9-5-17.xlsx

Tab 1: Cover page

Tab 2: Overview and Instructions

Tab 3: 1 – Summary Page

Tab 4: 2 – Stage I Status

Tab 5: 3 – Stage II Status

Tab 6: 4 – Stage III Status

Tab 7: Stage I Desired Outcomes

Tab 8: Stage 2 Desired Outcomes

Tab 9: Stage 3 Desired Outcomes

Virginia
Department of
Labor and Industry
and VADOC
Challenge

Participant OCTPS Form



Virginia Department of Labor and Industry & Department of Corrections Challenge OCTPS Form Instructions

This form is to be completed by Challenge participants.

Included in this spreadsheet are:

Tab 1	Cover Page
Tab 2	Overview and Instructions
Tab 3	Summary Page
Tab 4	Stage I Status
Tab 5	Stage II Status
Tab 6	Stage III Status
Tab 7	Stage I Desired Outcomes
Tab 8	Stage II Desired Outcomes
Tab 9	Stage III Desired Outcomes

To access these worksheets, please click on the tabs at the bottom of this form.

The cells in the tables on the Summary Page will be entered automatically as other sections of the spreadsheet are completed. **Please do not manually enter any data into the tables in this section or the formulas will be over-written.**

This spreadsheet provides an “at-a-glance” view of the status of the participant in completing the required activities at each Stage and provides a percentage of activities completed for each element.

Tabs 4/5/6 Stages I, II, and III Status Reports

These worksheets will serve as a tracking system for participants to use in assessing their progress in completing the requirements in each of the three stages of the Challenge Pilot program, as well as serve as a mechanism to update the Administrator as to progress being made.

Participants need only update the spreadsheet for the Challenge Pilot Stage they are currently working in (Stage 1 to start, for most). Once all the requirements for a Stage have been met (i.e., the participant has performed all of the activities and prepared all of the required documentation), the participant would then begin entering information into the next spreadsheet. Note that participants are being asked to provide information only on the Activities completed – not the Outcomes

The spreadsheets for each of the Stages follow the same format. The following instructions apply:

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Enter the participant name, Administrator name, time period (Q1, Q2, Q3, or Q4), and year at the top of the page. The cells with the same information on other pages in the worksheet will automatically be pre-filled.

The remainder of the spreadsheet requires the participant to identify those activities that have been completed as part of their participation in the Challenge Pilot. The worksheets are divided into five sections:

Participant Name	Administrator Name	Report Period	
		Time Period	
		Year	

Stage I

Participant Summary		Mgt. Leadership and Worker Involvement		Worksite Analysis		Hazard Prevention and Control		Safety and Health Training		Documentation	
		#	%	#	%	#	%	#	%	#	%
Stage I Outcome Completion Status	Status										
	No Action Taken	19	100%	6	100%	15	100%	33	100%	15	100%
	In Progress	0	0%	0	0%	0	0%	0	0%	0	0%
	Completed	0	0%	0	0%	0	0%	0	0%	0	0%
Total Outcomes		19	100%	6	100%	15	100%	33	100%	15	100%

Stage I Status Summary **No Action Taken/In Progress**

Administrator Summary

Administrator Summary		Mgt. Leadership and Worker Involvement		Worksite Analysis		Hazard Prevention and Control		Safety and Health Training		Documentation	
		#	%	#	%	#	%	#	%	#	%
Stage I Outcome Completion Status	Status										
	No Action Taken	18	100%	6	100%	15	100%	33	100%	15	100%
	In Progress	0	0%	0	0%	0	0%	0	0%	0	0%
	Completed	0	0%	0	0%	0	0%	0	0%	0	0%
Total Outcomes		18	100%	6	100%	15	100%	33	100%	15	100%

Stage I Status Summary **No Action Taken/In Progress**

Stage II

Participant Summary		Mgt. Leadership and Worker Involvement		Worksite Analysis		Hazard Prevention and Control		Safety and Health Training		Documentation	
		#	%	#	%	#	%	#	%	#	%

Stage II Outcome Completion Status	Status	#	%	#	%	#	%	#	%	#	%
	No Action Taken	21	100%	15	100%	16	100%	9	100%	12	100%
	In Progress	0	0%	0	0%	0	0%	0	0%	0	0%
	Completed	0	0%	0	0%	0	0%	0	0%	0	0%
Total Outcomes	21	100%	15	100%	16	100%	9	100%	12	100%	

Stage II Status Summary No Action Taken/In Progress

Administrator Summary

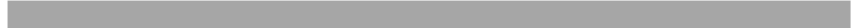
Stage II Outcome Completion Status	Status	#	%	#	%	#	%	#	%	#	%
	No Action Taken	21	100%	15	100%	16	100%	9	100%	12	100%
	In Progress	0	0%	0	0%	0	0%	0	0%	0	0%
	Completed	0	0%	0	0%	0	0%	0	0%	0	0%
Total Outcomes	21	100%	15	100%	16	100%	9	100%	12	100%	

Stage II Status Summary No Action Taken/In Progress

Stage III											
Participant Summary		Mgt. Leadership and Worker Involvement		Worksite Analysis		Hazard Prevention and Control		Safety and Health Training		Documentation	
Stage III Outcome Completion Status	Status	#	%	#	%	#	%	#	%	#	%
	No Action Taken	19	100%	13	100%	8	100%	3	100%	5	100%
	In Progress	0	0%	0	0%	0	0%	0	0%	0	0%
	Completed	0	0%	0	0%	0	0%	0	0%	0	0%
Total Outcomes	19	100%	13	100%	8	100%	3	100%	5	100%	



Report Period	
Time Period	
Year	



Prevention Control		Safety and Health Training		Documentation	
%	#	%	#	%	#
100%	33	100%	15	100%	15
0%	0	0%	0	0%	0
0%	0	0%	0	0%	0
100%	33	100%	15	100%	15

100%	33	100%	15	100%	15
0%	0	0%	0	0%	0
0%	0	0%	0	0%	0
100%	33	100%	15	100%	15

Prevention Control		Safety and Health Training		Documentation	
%	#	%	#	%	#
100%	9	100%	12	100%	12
0%	0	0%	0	0%	0
0%	0	0%	0	0%	0
100%	9	100%	12	100%	12

100%	9	100%	12	100%	12
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0%	0	0%	0	0%
0%	0	0%	0	0%
100%	9	100%	12	100%

Prevention Control	Safety and Health Training		Documentation	
%	#	%	#	%
100%	3	100%	5	100%
0%	0	0%	0	0%
0%	0	0%	0	0%
100%	3	100%	5	100%

%	#	%	#	%
100%	3	100%	5	100%
0%	0	0%	0	0%
0%	0	0%	0	0%
100%	3	100%	5	100%

Stage I OCTPS Tracking Form

Participant Name
[Enter Participant Name]

Coordinator Name
[Enter Coordinator Name]

Report Period	
Time Period	[Enter Time Period]
Year	[Enter Year]

Stage I - 1. Management Leadership and Employee Involvement

1. Management Commitment - Actions Required	Participant Status	Coordinator Status				
<p>1. Safety and Health Mission Statement: Develop, issue, and communicate a Safety and Health Mission Statement (i.e., defining where the site wants to be). This Vision statement should address the company's desire to participate in Challenge. This process may include involving permanent employees in the development of these documents.</p>	No Action Taken	No Action Taken				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%; border: 1px solid black; padding: 2px;">Department and/or Person Responsible:</td> <td style="border: 1px solid black; width: 55%;"></td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">Document Location:</td> <td style="border: 1px solid black;"></td> </tr> </table>	Department and/or Person Responsible:		Document Location:		Target Date:	Completed Date:
Department and/or Person Responsible:						
Document Location:						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%; border: 1px solid black; padding: 2px;">Participant Actions Taken (Supporting Documentation Required):</td> <td style="border: 1px solid black; width: 55%;"></td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">Coordinator Narrative:</td> <td style="border: 1px solid black;"></td> </tr> </table>	Participant Actions Taken (Supporting Documentation Required):		Coordinator Narrative:			
Participant Actions Taken (Supporting Documentation Required):						
Coordinator Narrative:						
<p>2. Safety and Health Policy Statement: Develop, issue, and communicate a Safety and Health Policy Statement (i.e., what the site commits to do).</p>	No Action Taken	No Action Taken				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%; border: 1px solid black; padding: 2px;">Department and/or Person Responsible:</td> <td style="border: 1px solid black; width: 55%;"></td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">Document Location:</td> <td style="border: 1px solid black;"></td> </tr> </table>	Department and/or Person Responsible:		Document Location:		Target Date:	Completed Date:
Department and/or Person Responsible:						
Document Location:						

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
<p>3. Leadership: Company establishes a policy requiring managers to participate and demonstrate leadership in safety and health management system activities. Managers set an example and behaviors that demonstrate a commitment to safety and health, such as attending training, participating in planning meets, wearing PPE, encouraging employees to report hazards, injuries and illnesses, enforcing the "if it's not safe, we're not doing it" principle, and performing other safety and health-related actions that are required of employees.</p>	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
<p>4. Adequate Resources and Safety and Health Integration: Develop a safety and health budget for the present and for the future, including a plan for covering typical safety and health expenditures, as well as unusual or emergency expenditures such as requirements for prompt correction of uncontrolled hazards. Commit and ensure utilization of adequate resources to achieve this for Challenge. Take management action to begin integrating safety and health into other aspects of planning, such as planning for new equipment, processes, building materials, etc. Company establishes a policy/requirement that safety and health will be integrated into the overall planning and budgeting processes.</p>	No Action Taken	No Action Taken	

Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
5. Safety and Health Goals and Objectives: Establish, document, and communicate to employees the annual safety and health goals and objectives that are clear, attainable, measurable, and relevant to bringing about a safe and healthy work environment, as well as the policies and procedures that will help achieve these goals and		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions			
Coordinator Narrative:			
6. Clear Lines of Communication with Employees and Employee Access: Take action to establish clear lines of communication with all employees and ensure that they have reasonable access to top management with regard to safety and health issues. Address issues of employee language barriers by providing safety and health information in languages spoken and understood by employees.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

7. Clear Responsibilities, Authority, and Accountability for Safety and Health: Clarify the safety and health responsibilities of each company employee and contractor working on the site/project:			
a. Identify who will be responsible for achieving safety and health goals and objectives.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
b. Identify specific persons to be accountable for meeting safety and health goals, including, at a minimum, managers, supervisors, and specific safety and health staff; assign adequate authority, as appropriate to their level of responsibility; and explain their accountability and authority to all employees.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
c. Develop a safety and health accountability plan to hold managers, supervisors, and non-supervisory employees accountable for meeting their responsibilities through a documented performance standards and appraisal system.		No Action Taken	No Action Taken

Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Employee Involvement - Actions Required		Participant Status	Coordinator Status
1. Employee Safety and Health Perception Survey: Evaluate the current safety and health practices at the total site and establish a baseline in the following areas for each of the following categories of personnel - managers, supervisors, and non-supervisory employees:		No Action Taken	No Action Taken
a. Levels of involvement in the safety and health management system.			
b. Values regarding the importance of employee safety and health.			
c. Perceptions of the effectiveness of the total company's safety and health management system.			
d. Perceptions of how well the culture encourages and supports reporting on hazards, accidents and injuries.			
e. Levels of compliance with rules or unwritten safety and health standards.			
f. Perceptions regarding their roles, responsibilities, and accountability in ensuring safety and health on the total site/project.			
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Safety and Health Practices Action Plan: Develop an action plan to address the findings from the survey and begin implementation of the plan.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Employee Notification: Notify company and subcontractor as follows:			
a. Inform managers, supervisors, and non-supervisory employees of their rights under the Occupational Safety and Health (OSH) Act. Take steps to encourage them to freely exercise their rights, especially that of freely reporting hazards in the workplace.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			

Coordinator Narrative:			
b. Inform all employees, including new hires, of the company's participation in Challenge.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
4. Meaningful Employee Involvement: Develop a plan, including an implementation schedule, for how to bring about the meaningful involvement of all managers, supervisors, and non-supervisory employees through participation in various safety and health related activities. Specifically, for Challenge:		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
a. Consistent with applicable labor laws, initiate the establishment of a few key teams (i.e., a safety and health planning team) representing different sectors of the site's staff, to bring about meaningful change.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:

Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
b. Begin to involve some employees in safety and health activities such as accident investigations. Note: Ensure that proper training is provided before employees conduct such activities.	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Contract Worker Coverage - Actions Required	Participant Status	Coordinator Status	
1. Contractor Oversight and Management System: Develop, document, and begin implementing the following basic elements of an oversight and management system covering contractors:			
a. Equal Safety and Health Protection: Develop and begin implementing a plan for how to provide contractor employees with safety and health protection equal in quality that is provided to company employees.	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
b. Adherence to Safety and Health Rules: Inform all contractors and their employees that they are required to adhere to all of the company's safety and health rules, regardless of their status or the length of time they perform work on the site.	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
c. Hazards in Contractor Work Areas: Establish a requirement that contractors provide timely identification, correction, and tracking of uncontrolled hazards in their work areas.	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

Stage I - 2. Worksite Analysis			
1. Baseline Safety and Industrial Hygiene Hazard Analysis - Actions Required		Participant Status	Coordinator Status
1. Conduct a baseline safety and industrial hygiene hazard analysis to establish initial levels of exposure (baselines) for comparison to future levels, so that changes can be recognized. This study should include a review of previous accidents, injuries, and illnesses; complaints of workplace hazards; previous studies; etc.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Ensure that the baseline survey accomplishes the following:		No Action Taken	No Action Taken
a. Identifies and documents common safety hazards in the site and how they are controlled.			
b. Identifies and documents common health hazards in the site and determine if further sampling is needed.			
c. Identifies and documents safety and health hazards that need further study.			
d. Covers the entire work site and indicates who conducted the survey and when it was completed.			
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Repeat the baseline survey only if warranted by significant changes (i.e., changes in processes, equipment, hazard controls, etc.).		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Hazard Analysis of Routine Jobs, Tasks, and Processes - Actions Required		Participant Status	Coordinator Status
No Actions Required			
3. Pre-Use Analysis - Outcomes Achieved - Required Actions		Participant Status	Coordinator Status
No Actions Required			
4. Industrial Hygiene (IH) Program - Actions Required		Participant Status	Coordinator Status
1. Complete a baseline study, including a chemical inventory, review of previously reported hazards, trends or illnesses to identify and quantify employee exposures to typical health hazards such as noise, chemicals, dust, etc.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
5. Routine Self-Inspections - Actions Required	Participant Status	Coordinator Status	
No Actions Required			
6. Hazard Reporting System for Employees - Actions Required	Participant Status	Coordinator Status	
No Actions Required			
7. Accident Investigations - Actions Required	Participant Status	Coordinator Status	
1. Investigate Accidents and Maintain Written Reports of the Investigations: Investigations should be conducted by trained personnel and:	No Action Taken	No Action Taken	
a. Document the entire sequence of relevant events.			
b. Identify all contributing factors.			
c. Determine whether the safety and health management system was effective.			
d. Recommend actions to prevent recurrence.			
e. Are prioritized			
f. Assign timeframes and responsibility for implementing recommended controls.			
g. The site should make the results available to employees on request (although actual investigation records need not be provided).			
Department and/or Person Responsible:	Target Date:	Completed Date:	
Document Location:			

Participant Actions Taken (Supporting Documentation Required):	
Coordinator Narrative:	

8. Trend Analysis - Actions Required		Participant Status	Coordinator Status
1. Conduct a trend analysis of previous three complete calendar years' injury and illness history, based on a thorough review of OSHA 300 logs, workers' compensation claim forms, and accident reports.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Begin developing a plan for conducting an analysis of other safety and health-related information (i.e., hazards identified during inspections, employee reports of hazards, accidents, near-misses, etc.) for the purpose of establishing or detecting trends, planning, and setting goals.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			

Coordinator Narrative:			
Stage I - 3. Hazard Prevention and Control			
1. Certified Professional Resources - Actions Required		Participant Status	Coordinator Status
1. Ensure that outside sources are available if needed to conduct baseline hazard analysis, and that they are certified, competent, and qualified to perform baselines pertinent to the work activity involved.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Date Completed:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Hazard Elimination and Control Methods - Actions Required		Participant Status	Coordinator Status
1. Company establishes and implements a system that prioritizes hazards identified in this stage based on the potential seriousness of injury, illness, property loss, frequency of exposure, and long-term effects. Establish an action plan for correction.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			

Coordinator Narrative:		
2. Identify options and select the most appropriate option or combination of options for hazard elimination and control methods, including engineering controls, administrative controls, work practices, and personal protective equipment (PPE).	No Action Taken	No Action Taken
Department and/or Person Responsible:	Target Date:	Completed Date:
Document Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
3. Take steps to ensure that the selected controls are appropriate to the site's hazard(s); understood and followed by all affected parties; equitably enforced through the disciplinary system; written, implemented, and updated as needed; used by employees; and incorporated into training, positive reinforcement, and correction programs.	No Action Taken	No Action Taken
Department and/or Person Responsible:	Target Date:	Completed Date:
Document Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
3. Hazard Control Programs - Actions Required	Participant Status	Coordinator Status

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1. Conduct an inventory of existing hazard control programs required by OSHA standards (i.e., PPE, Hazard Communication, Respiratory Protection, LockOut/TagOut, Confined Space Entry, Process Safety Management, or Bloodborne Pathogens).		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Review existing programs to identify what is missing or unsatisfactory.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Develop missing programs and modify existing programs, as needed, to meet all OSHA guidelines, including training requirements.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Date Completed:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			

Coordinator Narrative:	
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4. Occupational Health Care Program - Actions Required	Participant Status	Coordinator Status
1. Records Review: Conduct a thorough review of injury/illness records and ensure they are in order.	No Action Taken	No Action Taken
Department and/or Person Responsible:	Target Date:	Completed Date:
Document Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
2. Licensed Health Care Professionals: Provide employees access to licensed health care professionals who can provide onsite or offsite services and emergency services. Provide emergency services as required.	No Action Taken	No Action Taken
Department and/or Person Responsible:	Target Date:	Completed Date:
Document Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
5. Preventative Maintenance of Equipment - Actions Required	Participant Status	Coordinator Status

1. Conduct an inventory of equipment that requires preventive maintenance. Verify with manufacture service intervals.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
6. Tracking of Hazard Correction - Actions Required		Participant Status	Coordinator Status
1. Develop and begin using a documented system to record hazards identified in this stage through the baseline study, trend analysis, and accident investigations. The system must document priority, assign responsibility for correction, establish timeframes for correction, and follow up to ensure total abatement.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
7. Emergency Preparedness and Response - Actions Required		Participant Status	Coordinator Status
1. Establish and communicate written procedures for responding during all shifts to all types of emergencies (fire, chemical spill, accident, terrorist threat, natural disaster, active shooter, workplace violence, etc.) in compliance with applicable requirements.		No Action Taken	No Action Taken

Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Conduct at least one evacuation drill and assess how well the procedures worked.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Make available and explain to all employees emergency procedures and services, including provisions for physician care and emergency medical care, ambulances, emergency medical technicians, emergency clinics or hospital emergency rooms available for all shifts within a reasonable time and distance.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			

Coordinator Narrative:			
4. Conduct at least one training class on first aid and CPR so that there is at least one trained employee for each shift or an alternative that is at least as effective.	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
Stage I - 4. Safety and Health Training			
1. Safety and Health Training - Actions Required	Participant Status	Coordinator Status	
1. Provide training to managers, supervisors, non-supervisory employees, and contract workers following the general guidelines below:			
a. Document training attendance.	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
b. Provide training at the following intervals:	No Action Taken	No Action Taken	

(1) For OSHA required courses - as often as necessary to meet OSHA standards;		No Action Taken	No Action Taken
(2) For non-OSHA required courses – at adequate intervals to meet specific needs;		No Action Taken	No Action Taken
(3) For training on new work processes, new equipment, and new procedures, as needed.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
c. Develop or acquire up-to-date and clearly understandable training for all required participants, with curricula and materials developed to meet specific site needs and modified to reflect changes and/or new workplace procedures, trends, hazards, and controls identified by hazard analysis.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Date Completed:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
d. Ensure that training is conducted by persons who have specific subject matter knowledge or expertise.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
e. Use findings of the various worksite analysis activities (i.e., baseline study, hazard analysis of routine jobs, tasks, and processes, etc.) to develop training that is relevant to the site (i.e., training on safe job procedures, modifying workstations, equipment or materials, incorporating findings in future planning efforts, etc.).		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. At a minimum, provide the following types of training to current or new managers, supervisors, and non-supervisory employees:			
a. Their rights under the OSH Act.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
b. Challenge.		No Action Taken	No Action Taken

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Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

c. Hazards in the workplace; how to recognize hazardous conditions; signs and symptoms of workplace-related illnesses; protective measures; safe work procedures.	No Action Taken	No Action Taken
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Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

d. What is required PPE, why it is required, its limitations, how to use it, and how to maintain it.	No Action Taken	No Action Taken
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Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

e. Specific responsibilities for each type of emergency.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
f. Emergency evacuation procedures.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. At a minimum, provide the following types of training to managers and supervisors:			
a. Their specific safety and health responsibilities and how to carry them out effectively.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

b. Methods for changing workplace safety and health attitudes and practices.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
c. Requirements for Challenge Stage I and VPP Requirements		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
4. At a minimum, provide the following types of training to designated safety and health staff and others assigned safety and health responsibilities, to equip them with the knowledge and skills they need to perform their assigned tasks or to identify appropriate vendors:			
a. How to conduct an assessment of workplace safety and health practices.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
b. Methods for changing workplace safety and health attitudes and practices and how to develop a plan to address necessary changes.	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Completed Date:	
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
c. How to conduct the required baseline safety and industrial hygiene hazard analysis.	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Completed Date:	
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
d. How to conduct hazard analyses, accident/incident investigations, routine self-inspections, trend analyses, and preventive maintenance inspections.	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Completed Date:	

Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
e. Hazard elimination and control methods.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
f. How to develop a documented system for routinely scheduled self-inspections.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
g. How to develop a worker hazard-reporting system.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
h. How to develop a plan for a written IH Program.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
i. How to develop emergency procedures.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
j. How to develop a hazard tracking system.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
5. At a minimum, provide the following types of training to all contractors and contractors' managers, supervisors, and non-supervisory employees:			
a. Their rights under the OSH Act.	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Completed Date:	
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
b. Requirements for Challenge Stage I and VPP Requirements.	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Completed Date:	
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
c. Hazards in the workplace.	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Completed Date:	

Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
d. What is required PPE, why it is required, its limitations, how to use it, and how to maintain it.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
e. Specific responsibilities for each type of emergency.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Date Completed:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
f. Emergency evacuation procedures.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:

Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
Stage I - Documentation			
1. Minimum Required Documentation	Participant Status	Coordinator Status	
1. Accurate and up to date records of injury and illness for the previous three calendar years including:			
• OSHA 300 Logs	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Completed Date:	
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
• Insurance Claim Forms	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Date Completed:	
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

• Accident Reports		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Vision and Policy Statements.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Budget documents showing allocated resources for Safety and Health.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
4. Safety and Health Goals and Objectives		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:

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Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

5. Accountability Plan		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Date Completed:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
6. Safety and Health Practices Action Plan		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
7. Meaningful plan including implementation to involve employees		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
8. Written contractor policies for this stage	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Completed Date:	
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
9. Baseline hazard analysis results, including IH reports	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Completed Date:	
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
10. Written hazard control programs	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Completed Date:	
Document Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
11. Accident investigation forms and reports		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
12. Trend Analysis results		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
13. Hazard correction action plan and tracking system		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Document Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
14. Preventative Maintenance of Equipment	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Completed Date:	
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
15. Written emergency procedures.	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Completed Date:	
Document Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
16. Training Records	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Completed Date:	
Document Location:			

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Participant Actions Taken (Supporting Documentation Required):	
Coordinator Narrative:	

Stage II

Participant Name
0

Coordinator Name
0

Report Period	
Time Period	
Year	

Stage II - 1. Management Leadership and Employee Involvement			
1. Management Commitment - Required Actions		Participant Status	Coordinator Status
1. Safety and Health Mission and Policy Statements. Continue to communicate the site's Safety and Health Mission and Policy Statements for the entire site. Incorporate appropriate information about the Safety and Health Mission Statement and Policy Statement into the site's orientation training for new employees and contractors.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Leadership by Example. Continue setting an example to the entire site through behaviors that demonstrate total commitment to safety and health. Ensure increased participation by top executives and managers in safety and health related activities, including examples of activities established in Stage I.		No Action Taken	No Action Taken

Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Adequate Resources and Safety and Health Integration. Continue committing and ensuring the utilization of adequate resources to support safety and health activities and programs. Improve the integration of safety and health into other planning processes.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
4. Safety and Health Goals and Objectives. Review the site's progress towards achievement of its safety and health goals and objectives, as well as the policies and procedures to meet them; revise and communicate new annual goals and objectives, as appropriate. Remember to use the SMART Goal techniques. Establish a policy/requirement that subcontractors will develop their goals and objectives supportive of the company goals in an equivalent manner.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:

Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
5. Clear Lines of Communication with Employees and Employee Access. Continue to take necessary action to clarify lines of communication with company employees and subcontractor employees and ensure access to senior management regarding safety and health issues.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
6. Clear Responsibilities, Authority, and Accountability for Safety and Health. Continue clarifying safety and health expectations for each employee and contract employee on the site.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			

Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
<p>d. Communicate who is responsible for achieving safety and health goals and objectives, with no unassigned areas, so that each employee and contract employee can describe his/her responsibility for safety and health.</p>		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
<p>7. Disciplinary Plan. Develop and begin implementing a disciplinary plan (policy, procedures, consequences) with an implementation schedule for management and employees. Ensure equitable enforcement of the plan among all non-supervisory employees, as well as across levels (i.e., management staff should not get better treatment than non-supervisory employees).</p>		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
<p>8. Annual Self-Evaluation of Safety and Health Management Program. No action required.</p>		
<p>2. Employee Involvement - Required Actions</p>		<p>Participant Status</p>
<p>1. Worker Safety and Health Perception Survey. Continue reviewing and responding to the findings and conclusions of the baseline employee safety and health perception survey conducted in Stage I.</p>		No Action Taken

Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Coordinator Narrative:		
2. Safety and Health Perception Survey Action Plan. Continue implementing the site's Safety and Health Perception Survey Action Plan developed in Stage I.		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
3. Worker Notification. Notify new company managers, supervisors, and non-supervisory employees of their rights under the OSH Act, of the company's participation in Challenge, and any other pertinent information. Incorporate this information into the company's orientation for new employees and subcontractors.		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
4. Meaningful Employee Involvement. Continue implementing the site's employee involvement plan, developed in Stage I. Specifically, for Challenge Stage II.		
a. Encourage the formation of new and/or greater participation in safety and health teams to meet the site's needs at this Stage of Challenge.		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		

Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
b. Increase employee participation as part of safety and health teams that conduct accident/near-miss investigations, self-inspections, and job hazard analyses.		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
3. Contract Employee Coverage - Required Actions		Participant Status
1. Contractor Oversight and Management System. Continue improving and fully implement the following basic elements of an oversight and management system covering contractors:		
a. Equal Safety and Health Protection. Improve and continue implementing the contractor program that begun in Stage I.		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
b. Adherence to Safety and Health Rules. Improve process for requiring immediately and contractually that contract employees who work on-site whether regular or temporary to adhere to all of the site's safety and health rules, regardless of their status or the length of time they perform work on site.		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		

Participant Actions Taken (Supporting Documentation Required):	
Coordinator Narrative:	
<p>c. Contractor Selection and Oversight. Implement a policy and process for addressing safety and health performance, including review of written safety and health plan and injury and illness rates, in selecting contractors and in overseeing their work while they are onsite.</p>	No Action Taken
Department and/or Person Responsible:	
Department Location:	
Participant Actions Taken (Supporting Documentation Required):	Target Date:
Coordinator Narrative:	
<p>d. Hazards in Contractor Work Areas. Improve and formalize the process for the timely identification, correction, and tracking of uncontrolled hazards in the contractors' work areas, as needed.</p>	No Action Taken
Department and/or Person Responsible:	
Department Location:	
Participant Actions Taken (Supporting Documentation Required):	Target Date:
Coordinator Narrative:	
<p>e. Removal of Contractor for Violations. Develop and implement a penalty policy and process for safety or health violations in contractor work areas including removal.</p>	No Action Taken
Department and/or Person Responsible:	
Department Location:	
Participant Actions Taken (Supporting Documentation Required):	Target Date:

Coordinator Narrative:		
Stage II - 2. Worksite Analysis		
1. Baseline Safety and Industrial Hygiene Hazard Analysis - Required Actions		Participant Status
1. No action required (See IH Required Actions below).		
2. Hazard Analysis of Routine Jobs, Tasks, and Processes - Required Actions		Participant Status
1. Identify and document safety and health hazards of routine jobs, tasks, and processes and recommend adequate hazard controls by conducting task-based or system/process hazard analyses when the routine jobs, tasks, and processes have had injuries/illnesses associated with them or have: experienced significant incidents or near-misses; are perceived as high-hazard tasks (i.e., that could result in a catastrophic explosion, electrocution, or chemical overexposure; or are required by a regulation or standard). Identify the steps of the task or procedure being analyzed, the hazard controls currently in place, recommendations for needed additional hazard controls, dates conducted, and the responsible parties.		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
2. Update the hazard analysis as appropriate, such as when the environment, procedures, equipment change, or when errors are found that invalidate the most recent hazard analysis.		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
3. Hazard Analysis of Significant Changes - Required Actions		Participant Status
No action required.		

Coordinator Narrative:		
Stage II - 2. Worksite Analysis		
1. Baseline Safety and Industrial Hygiene Hazard Analysis - Required Actions		Participant Status
1. No action required (See IH Required Actions below).		
2. Hazard Analysis of Routine Jobs, Tasks, and Processes - Required Actions		Participant Status
1. Identify and document safety and health hazards of routine jobs, tasks, and processes and recommend adequate hazard controls by conducting task-based or system/process hazard analyses when the routine jobs, tasks, and processes have had injuries/illnesses associated with them or have: experienced significant incidents or near-misses; are perceived as high-hazard tasks (i.e., that could result in a catastrophic explosion, electrocution, or chemical overexposure; or are required by a regulation or standard). Identify the steps of the task or procedure being analyzed, the hazard controls currently in place, recommendations for needed additional hazard controls, dates conducted, and the responsible parties.		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
2. Update the hazard analysis as appropriate, such as when the environment, procedures, equipment change, or when errors are found that invalidate the most recent hazard analysis.		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
3. Hazard Analysis of Significant Changes - Required Actions		Participant Status
No action required.		

4. Pre-Use Analysis - Outcomes Achieved - Required Actions		Participant Status
No action required.		
5. Industrial Hygiene (IH) Program - Required Actions		Participant Status
1. Develop a Written IH Program. Establish procedures and methods for identifying, analyzing, and controlling health hazards to prevent occupational disease. The written program must address sampling issues including sampling methods, performed by whom, compared to what, required documentation, and how communicated to employees.		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
2. Begin implementing the IH Program by doing the following:		
a. Conduct further analysis, such as full shift sampling, if necessary.		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
b. Establish and implement sampling frequencies – a schedule for sampling identified hazards and conduct additional sampling as needed, based on findings of the baseline hazard analysis, review of chemicals, employee reports of hazards, previous exposures, and reports of illnesses.		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		

Coordinator Narrative:		
c. Begin implementing appropriate controls for hazards identified in Stages I and II.		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
6. Routine Self-Inspections - Required Actions		Participant Status
1. Company develops a documented system for routinely scheduled self-inspections of the workplace, including a tool or checklist, the inspection schedule, the members of the regular self-inspection teams to be created, recording of findings, responsibility for abatement, and tracking of identified hazards for timely correction.		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
2. Start self-inspections, at a minimum, by designated trained safety and health staff.		No Action Taken
Department and/or Person Responsible:		Target Date:
Department Location:		
Participant Actions Taken (Supporting Documentation Required):		
Coordinator Narrative:		
3. Cover the entire worksite at least twice a year.		No Action Taken
Department and/or Person Responsible:		Target Date:

<p>1. Identify and document safety and health hazards of routine jobs, tasks, and processes and recommend adequate hazard controls by conducting task-based or system/process hazard analyses when the routine jobs, tasks, and processes have had injuries/illnesses associated with them or have: experienced significant incidents or near-misses; are perceived as high-hazard tasks (i.e., that could result in a catastrophic explosion, electrocution, or chemical overexposure; or are required by a regulation or standard). Identify the steps of the task or procedure being analyzed, the hazard controls currently in place, recommendations for needed additional hazard controls, dates conducted, and the responsible parties.</p>		<p>No Action Taken</p>	<p>No Action Taken</p>
<p>Department and/or Person Responsible:</p>		<p>Target Date:</p>	<p>Completed Date:</p>
<p>Department Location:</p>			
<p>Participant Actions Taken (Supporting Documentation Required):</p>			
<p>Coordinator Narrative:</p>			
<p>2. Update the hazard analysis as appropriate, such as when the environment, procedures, equipment change, or when errors are found that invalidate the most recent hazard analysis.</p>		<p>No Action Taken</p>	<p>No Action Taken</p>
<p>Department and/or Person Responsible:</p>		<p>Target Date:</p>	<p>Completed Date:</p>
<p>Department Location:</p>			
<p>Participant Actions Taken (Supporting Documentation Required):</p>			
<p>Coordinator Narrative:</p>			

3. Hazard Analysis of Significant Changes - Required Actions		Participant Status	Coordinator Status
No action required.			
4. Pre-Use Analysis - Outcomes Achieved - Required Actions		Participant Status	Coordinator Status
No action required.			
5. Industrial Hygiene (IH) Program - Required Actions		Participant Status	Coordinator Status
1. Develop a Written IH Program. Establish procedures and methods for identifying, analyzing, and controlling health hazards to prevent occupational disease. The written program must address sampling issues including sampling methods, performed by whom, compared to what, required documentation, and how communicated to employees.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Begin implementing the IH Program by doing the following:			
a. Conduct further analysis, such as full shift sampling, if necessary.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
b. Establish and implement sampling frequencies – a schedule for sampling identified hazards and conduct additional sampling as needed, based on findings of the baseline hazard analysis, review of chemicals, employee reports of hazards, previous exposures, and reports of illnesses.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
c. Begin implementing appropriate controls for hazards identified in Stages I and II.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
6. Routine Self-Inspections - Required Actions		Participant Status	Coordinator Status

1. Company develops a documented system for routinely scheduled self-inspections of the workplace, including a tool or checklist, the inspection schedule, the members of the regular self-inspection teams to be created, recording of findings, responsibility for abatement, and tracking of identified hazards for timely correction.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Start self-inspections, at a minimum, by designated trained safety and health staff.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Cover the entire worksite at least twice a year.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
7. Hazard Reporting System for Employees - Required Actions		Participant Status	Coordinator Status
1. Develop and begin implementing a hazard-reporting system, which may be anonymous, that allows employees to use specific tools to notify management staff in writing (or via alternate methods), without fear of reprisal, about possible hazardous conditions, accidents, and near-misses. Determine and communicate to employees how they will receive feedback on actions taken regarding the hazards they report.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
8. Investigation of Accidents and Near-Misses - Required Actions		Participant Status	Coordinator Status
1. Continue investigating accidents, following the guidelines established in Stage I.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Begin investigating near-misses, following the same guidelines established in Stage I for investigating accidents.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Continue making findings and corrective actions available to employees on request (although actual investigation records need not be provided).		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

9. Trend Analysis - Required Actions		Participant Status	Coordinator Status
1. Conduct a trend analysis of the other safety and health-related information not yet studied (i.e., hazards identified during inspections, employees reports of hazards, accidents, and near-misses, etc.) for the purpose of establishing or detecting trends, planning, and setting goals.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Conduct another trend analysis of injury and illness history if a year has gone by since the initial trend analysis.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
Stage II - 3. Hazard Prevention and Control			
1. Certified Professional Resources - Required Actions		Participant Status	Coordinator Status

1. Provide access to certified safety and health professionals, licensed health care professionals, and other experts as needed who can provide onsite or offsite services.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Hazard Elimination and Control Methods - Required Actions		Participant Status	Coordinator Status
1. Prioritize hazards identified in this stage based on seriousness and frequency of injury or illness, property loss, frequency of exposure, and long-term effects. Establish an action plan for correction.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Date Completed:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Identify options and select the most appropriate option or combination of options for hazard elimination and control methods including engineering controls, protective safety devices, administrative controls, work practices, and PPE.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Date Completed:

Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Take steps to ensure that the selected controls are: appropriate to the site's hazard(s); understood and followed by all affected parties; equitably enforced through the disciplinary system; written, implemented, and updated as needed; used by employees; and incorporated into training, positive reinforcement, and correction programs.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Hazard Control Programs - Required Actions		Participant Status	Coordinator Status
1. Continue implementing hazard control programs required by OSHA Standards. Modify and improve, as needed.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Continue training all employees on the required OSHA programs as needed.	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Establish necessary hazard control programs in compliance with any new OSHA Standards.	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
4. Tracking of Hazard Correction - Required Actions	Participant Status	Coordinator Status	

<p>1. Continue implementing and improving the documented system established in Stage I. To record hazards identified in this Stage, through the means listed in Stage I, and now also through hazard analysis of routine jobs, self-inspections, near-miss investigations, and worker reports of hazards. Record priority, responsibility for correction, timeframes for correction, and follow up to ensure total abatement.</p>		<p>No Action Taken</p>	<p>No Action Taken</p>
<p>Department and/or Person Responsible:</p>		<p>Target Date:</p>	<p>Completed Date:</p>
<p>Department Location:</p>			
<p>Participant Actions Taken (Supporting Documentation Required):</p>			
<p>Coordinator Narrative:</p>			
<p>5. Preventative Maintenance of Equipment - Required Actions</p>		<p>Participant Status</p>	<p>Coordinator Status</p>
<p>1. Review the equipment inventory developed in Stage I.</p>		<p>No Action Taken</p>	<p>No Action Taken</p>
<p>Department and/or Person Responsible:</p>		<p>Target Date:</p>	<p>Completed Date:</p>
<p>Department Location:</p>			
<p>Participant Actions Taken (Supporting Documentation Required):</p>			
<p>Coordinator Narrative:</p>			

2. Establish and begin following a preventive maintenance schedule to monitor and maintain equipment (including hazard controls, such as machine guards and exhaust ventilation) so it can be replaced or repaired on a schedule according to manufacturers' recommendations to prevent potential hazards.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
6. Occupational Health Care Program - Required Actions		Participant Status	Coordinator Status
1. Licensed Health Care Professionals. Provide employees access to licensed health care professionals who can provide onsite or offsite services.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Health Services (As Needed). Company arranges for health services, such as pre-placement physicals, audiograms, and lung function tests for employees as needed based on the outcomes of the baseline safety and health analysis.		No Action Taken	No Action Taken

Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
7. Emergency Preparedness and Response - Required Actions		Participant Status	Coordinator Status
1. Continue communicating the emergency procedures in compliance with applicable standards.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Improve and continue making available and explaining to all employees emergency procedures and services including provisions for emergency physician and medical care, ambulances, emergency medical technicians, emergency clinics, or hospital emergency rooms available to all shifts within a reasonable time and distance.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Establish an Emergency Response Team. Including persons trained in first aid and CPR available on all shifts (or an alternative that is at least as effective). Increase the number of trained individuals from Stage I.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
4. Conduct at least one evacuation drill, assess how well the procedures worked, and improve the emergency procedures, as needed.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
Stage II -- 4. Safety and Health Training			

1. Safety and Health Training - Required Actions		Participant Status	Coordinator Status
1. Continue to provide training to managers, supervisors, non-supervisory employees and contract employees following the general guidelines established in Stage I.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. As needed, continue to provide current or new managers, supervisors, non-supervisory employees, contract employees, and designated safety and health staff all the required training established in Stage I.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. In addition to required training established in Stage I, at a minimum, provide the following types of training to designated safety and health staff and others with assigned safety and health responsibilities to equip them with the knowledge and skills they need to perform their assigned tasks or to identify appropriate vendors:			

a. How to develop a disciplinary plan.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
b. How to develop a system and written procedures to annually evaluate the entire site's safety and health management system.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
c. How to conduct hazard analyses of significant changes.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

d. How to conduct pre-use analyses.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
e. How to conduct IH sampling, if applicable.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
f. How to conduct an annual evaluation of the site's safety and health management system.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

4. In addition to required training established in Stage I, at a minimum, provide contract employees with training on how to recognize hazardous conditions, signs and symptoms of workplace-related illnesses, protective measures, and safe work procedures.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
Stage II - Documentation			
1. Minimum Required Documentation		Participant Status	Coordinator Status
1. All Documentation. Required in Stage I.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Minutes, Charters, Mission Statements of safety and health teams.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Contractor Program Documentation. Updated to include additional policies established in this stage.	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
4. Job Hazard Analysis forms and records	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
5. Written IH Program and Sampling results	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
6. Routine Self-Inspection forms and records		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
7. Employee Hazard Reporting form		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
8. Trend Analysis results		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
9. Documentation showing implementation of hazard controls and their effectiveness (i.e., ventilation studies, PPE purchases, machine guarding purchases, etc.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
10. Written Preventive Maintenance schedule and system.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
11. Emergency Procedures updated since Stage 1.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:

Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
12. Training Matrix and Records.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

Stage III

Participant Name	Coordinator Name	Report Period	
[Enter Participant Name]	[Enter Coordinator Name]	Time Period	[Enter Time Period]
		Year	[Enter Year]

Stage III - 1. Management Leadership and Employee Involvement

1. Management Commitment - Required Actions	Participant Status	Coordinator Status								
<p>1. Safety and Health Mission and Policy Statements. Continue to communicate the site's Safety and Health Mission and Policy Statements for the site and take necessary steps to ensure all employees and contractors understand the statements. Ensure that appropriate information about the site's Safety and Health Mission and Policy Statements routinely becomes a part of general communication and of specific training for new employees and contractors. (Refer to Application item 1.1.A..1)</p>	No Action Taken	No Action Taken								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Department and/or Person Responsible:</td> <td style="width: 35%;"></td> <td style="width: 20%;">Target Date:</td> <td style="width: 25%;">Completed Date:</td> </tr> <tr> <td>Department Location:</td> <td></td> <td></td> <td></td> </tr> </table>	Department and/or Person Responsible:		Target Date:	Completed Date:	Department Location:					
Department and/or Person Responsible:		Target Date:	Completed Date:							
Department Location:										
Participant Actions Taken (Supporting Documentation Required):										
Coordinator Narrative:										
<p>2. Leadership by Example. Continue setting an example to the entire site through behaviors that demonstrate total commitment to safety and health (see examples in Stage I). Ensure total involvement of all executives, managers, and supervisors in the site's safety and health related activities and programs. (Refer to Application item 1.1.A.3.)</p>	No Action Taken	No Action Taken								

Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Adequate Resources and Safety and Health Integration. Continue committing and ensuring the utilization of adequate resources to support safety and health activities and programs. Ensure that safety and health is routinely integrated into all planning processes at the site. (Refer to Application item 1.1.A.6.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
4. Safety and Health Goals and Objectives. Review, revise, and continue communicating, as appropriate to this Stage, the previous year's safety and health goals and objectives, as well as the policies and procedures to meet them. Ensure that safety and health goals and objectives are routinely considered in planning for and implementing the site's various activities and programs. (Refer to Application item 1.1.A.1.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
5. Clear Lines of Communication with Employees and Employee Access. Continue to take necessary action to clarify lines of communication with all employees and ensure reasonable access to top management with regard to safety and health issues. Take proactive steps to encourage open dialogue between management and employees. (Refer to Application item 1.1.A.4.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
6. Clear Responsibilities, Authority, and Accountability for Safety and Health. Continue clarifying safety and health expectations for each employee and contract employee in the site. Ensure all employees understand and accept their safety and health roles and responsibilities. Continue supporting the authority of designated staff members who are accountable for achieving safety and health goals and objectives. In addition: (Refer to Application item 1.1.A.5.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
a. Ensure that safety and health performance elements have been incorporated into the written job descriptions and performance plans of all employees, including managers, supervisors and non-supervisory employees, as well as contractors. (Refer to Application item 1.1.A.5.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
b. Incorporate safety and health responsibilities into the job descriptions and performance plans of all non-supervisory employees and ensure that every individual's safety and health performance is monitored and evaluated and that everyone receives feedback on their safety and health performance. (Refer to Application item 1.1.A.5.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			

Coordinator Narrative:			
c. Develop and implement a system of rewards and recognition for exemplary safety and health performance. (Refer to Application item 3.F.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
7. Disciplinary Plan. Improve and continue implementing the disciplinary plan developed in Stage II for non-supervisory employees, ensuring equitable enforcement as required. Enforce the plan to ensure higher levels of compliance to achieve the desired outcomes for Stage III. (Refer to Application item 3.F.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

8. Annual Self-Evaluation of Safety and Health Management System. Develop a system and written procedures to annually evaluate the entire site's safety and health management system. The evaluation may be conducted by site employees with managers, qualified corporate staff, or trained outsiders. The evaluation must identify the strengths and weaknesses of the site's safety and health management system; contain specific recommendations, timelines, and assignment of responsibilities for improvements; and document actions taken to satisfy the recommendations. The site must conduct at least one annual self-evaluation of its safety and health management system in Stage III; and the site must conduct additional self-evaluations each year they remain in Challenge. (Refer to Application item 1.1.D.1.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Employee Involvement - Required Actions		Participant Status	Coordinator Status
1. Follow-Up Employee Safety and Health Perception Survey. Conduct a follow-up assessment of the baseline employee safety and health perception survey to identify improvements.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			

Coordinator Narrative:			
2. Safety and Health Perception Survey Action Plan. Continue implementing the site's Safety and Health Perception Survey Action Plan developed in Stage I.	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Employee Notification. Continue notifying new managers, supervisors, non-supervisory employees, and contractors of their rights under the OSH Act and of the site's participation in Challenge. Assure that appropriate information about employees' rights continues to be incorporated into the site's orientation training for new employees and contractors. Take proactive steps to encourage all employees to freely exercise their rights, especially that of freely reporting hazards in the workplace. (Refer to Application item 1.1.B.2.)	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

4. Meaningful Employee Involvement. Take proactive steps to ensure full implementation of the site's employee involvement plan developed in Stage I and refined in Stage II. Specifically, for Stage III: (Refer to Application item 1.1.B.1.)			
a. Ensure that all the safety and health teams need to achieve the required outcomes for Stage III are established and that there is broad and active employee participation in these teams.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
b. Ensure that audits, accident/incident investigations, self-inspections, and job hazard analyses are routinely conducted by regular teams that have broad and active employee representation. (Refer to Application item 1.1.B.1.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
c. Improve and continue implementing the site's hazard-reporting program for employees. Take proactive steps to encourage more active and open employee participation. (Refer to Application item 1.1.B.1.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:

Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Contract Employee Coverage - Required Actions	Participant Status	Coordinator Status	
1. Contractor Oversight and Management System. Continue improving and fully implementing the contractor oversight and management system. Take proactive steps to ensure that contractors receive safety and health protection equal to that received by employees; that they adhere to the site's safety and health rules and are removed promptly for safety and health violations; that management considers contractors' safety and health performance in selecting contractors and overseeing their work; and that the site identifies, corrects, and tracks uncontrolled hazards in contractors' work areas. (Refer to Application item 1.1.C.1.)	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Safety and Health Management Systems for Contractors. Begin working with contractors to encourage and support them in developing and operating their own effective safety and health management systems. (Refer to Application item 1.1.C.1.)	No Action Taken	No Action Taken	

Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
Stage III - 2. Worksite Analysis			
1. Worksite Analysis - Required Actions		Participant Status	Coordinator Status
1. Baseline Survey. Repeat the baseline survey only if warranted by significant changes (i.e., changes in processes, equipment, hazard controls, etc.). (Refer to Application item 2.A.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Hazard Analyses of Routine Jobs, Tasks, and Processes. Continue conducting hazard analyses, following guidelines specified in Stages II, to identify, analyze, and control hazards at the site. Specifically for this Stage: (Refer to Application item 2.B.)			

<p>a. Identify hazards of routine jobs, tasks, and processes and recommend adequate hazard controls by conducting task-based or system/process hazard analyses when the routine jobs, tasks, and processes; have written procedures; have been recommended by other studies and analyses for more in-depth analysis; or are determined by the Challenge Participant to warrant hazard analysis. Follow the guidelines established in Stage II. (Refer to Application item 2.B.)</p>		<p>No Action Taken</p>	<p>No Action Taken</p>
<p>Department and/or Person Responsible:</p>		<p>Target Date:</p>	<p>Completed Date:</p>
<p>Department Location:</p>			
<p>Participant Actions Taken (Supporting Documentation Required):</p>			
<p>Coordinator Narrative:</p>			
<p>3. Hazard Analysis of Non-Routine Tasks and Significant Changes. Identify and document safety and health hazards of significant changes, including but not limited to non-routine tasks (i.e. performed less than once a year) and new processes, materials, equipment and facilities to identify uncontrolled hazards prior to the activity or use and recommend adequate hazard controls. (Refer to Application item 2.C.)</p>		<p>No Action Taken</p>	<p>No Action Taken</p>
<p>Department and/or Person Responsible:</p>		<p>Target Date:</p>	<p>Completed Date:</p>
<p>Department Location:</p>			
<p>Participant Actions Taken (Supporting Documentation Required):</p>			
<p>Coordinator Narrative:</p>			
<p>4. Pre-Use Analysis.</p>			

<p>a. If the site is considering new equipment, chemicals, facilities, or significantly different operations or procedures, conduct a pre-use analysis to review the potential safety and health impact on the employees at a level of detail that is appropriate considering the perceived risk and the number of people who may be affected. (Refer to Application item 2.C.)</p>		<p>No Action Taken</p>	<p>No Action Taken</p>
<p>Department and/or Person Responsible:</p>		<p>Target Date:</p>	<p>Completed Date:</p>
<p>Department Location:</p>			
<p>Participant Actions Taken (Supporting Documentation Required):</p>			
<p>Coordinator Narrative:</p>			
<p>b. Develop and begin implementing a plan for how to integrate this practice into the procurement/design phase to maximize the opportunity for proactive hazard controls. (Refer to Application item 2.C.)</p>		<p>No Action Taken</p>	<p>No Action Taken</p>
<p>Department and/or Person Responsible:</p>		<p>Target Date:</p>	<p>Completed Date:</p>
<p>Department Location:</p>			
<p>Participant Actions Taken (Supporting Documentation Required):</p>			
<p>Coordinator Narrative:</p>			
<p>c. Take proactive steps to ensure that pre-use analysis continues to be integrated into the procurement/design phase. (Refer to Application item 2.C.)</p>		<p>No Action Taken</p>	<p>No Action Taken</p>
<p>Department and/or Person Responsible:</p>		<p>Target Date:</p>	<p>Completed Date:</p>

Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
5. Industrial Hygiene Program. Continue implementing the IH program to identify, analyze, and control health hazards to prevent occupational disease. (Refer to Application item 2.A.)	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
6. Routine Self-Inspections.			
a. Company and subcontractors continue implementing the documented system for routinely scheduled self-inspections of the workplace developed in Stage II. (Refer to Application item 2.D.)	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

<p>b. Continue conducting self-inspections by designated safety and health staff, with the participation of other non-supervisory employees. (Refer to Application item 2.D.)</p>		<p>No Action Taken</p>	<p>No Action Taken</p>
<p>Department and/or Person Responsible:</p>		<p>Target Date:</p>	<p>Completed Date:</p>
<p>Department Location:</p>			
<p>Participant Actions Taken (Supporting Documentation Required):</p>			
<p>Coordinator Narrative:</p>			
<p>c. Take proactive steps to ensure that self-inspections are routinely conducted monthly and that the entire work site is covered at least quarterly. (Refer to Application item 2.D.)</p>		<p>No Action Taken</p>	<p>No Action Taken</p>
<p>Department and/or Person Responsible:</p>		<p>Target Date:</p>	<p>Completed Date:</p>
<p>Department Location:</p>			
<p>Participant Actions Taken (Supporting Documentation Required):</p>			
<p>Coordinator Narrative:</p>			
<p>7. Hazard-Reporting System. Continue implementing the hazard-reporting system and encourage active reporting. Implement program improvements as needed. Ensure regular feedback to all employees on the status of hazards reported (i.e. through meetings, newsletters, email messages, bulletin board postings, intranet postings, etc.). Take proactive steps to encourage all employees to freely make suggestions and report hazardous conditions without fear of retaliation. (Refer to Application item 2.E.)</p>		<p>No Action Taken</p>	<p>No Action Taken</p>
<p>Department and/or Person Responsible:</p>		<p>Target Date:</p>	<p>Completed Date:</p>

Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
8. Investigation of Accidents and Near-Misses. Continue investigating accidents and near-misses, as needed, following the guidelines specified in Stages I and II. (Refer to Application item 2.F.)	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
9. Trend Analysis. Take proactive steps to establish a system for trend analysis to ensure that the process takes place regularly (at least annually) as scheduled, for all types of safety and health information and is used in setting future goals to address identified trends of accidents, injuries, and illnesses. (Refer to Application item 2.G.)	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			

Coordinator Narrative:			
Stage III -- 3. Hazard Prevention and Control			
1. Hazard Prevention and Control - Required Actions		Participant Status	Coordinator Status
1. Certified Professional Resources. Continue to provide employees and contractors access to certified safety and health professionals and licensed health care professionals who can provide onsite and offsite services. (Refer to Application item 1.1.A.6.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Hazard Elimination and Control Methods. Continue to proactively identify hazards through all means and selecting options or combinations of options to eliminate or control hazards using the most appropriate methods or combination of methods (i.e. engineering controls, protective safety devices, administrative controls, work practices, and PPE). Correct all hazards identified in this and previous stages including long-term abatement projects, before graduating from Stage III. (Refer to Application item 3.A.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Hazard Control Programs. Continue to maintain all hazard control programs required by an OSHA Standard, complying with all guidelines, including an annual review and training if required. Take proactive steps to establish hazard control programs, if any, required by new OSHA Standards, and to modify or update existing programs, as needed. (Refer to Application item 3.A.iii.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
4. Hazard Correction Tracking. Continue to implement and improve the site's documented hazard tracking system. Take proactive steps to improve the tracking system, ensure that it is fully implemented, and communicate with all employees throughout the process on the status of specific hazards identified until they are totally abated. (Refer to Application item 3.E.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			

Coordinator Narrative:			
5. Preventive Maintenance of Equipment. Continue to implement the preventive maintenance on equipment to prevent any hazardous conditions. Take proactive steps to ensure that the site schedule has an established, routinely-observed preventive maintenance schedule and that preventative maintenance is automatically part of future systems. (Refer to Application item 3.E.)	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
6. Occupational Health Care Program. Take proactive steps to provide an excellent occupational health care program, including:			
a. Provisions for access to or availability of certified health care professionals, needed health services, and emergency physician and medical care; improve the program based on all available safety and health information. (Refer to Application item 3.C.)	No Action Taken	No Action Taken	
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

<p>b. Expand use of licensed health care providers to include site visits to help identify causes and symptoms of occupational injuries and illnesses. Ensure care provided is within the schedule of licensure and standard operating procedures. (Refer to Application item 3.C.)</p>		<p>No Action Taken</p>	<p>No Action Taken</p>
<p>Department and/or Person Responsible:</p>		<p>Target Date:</p>	<p>Completed Date:</p>
<p>Department Location:</p>			
<p>Participant Actions Taken (Supporting Documentation Required):</p>			
<p>Coordinator Narrative:</p>			
<p>7. Emergency Preparedness and Response. Continue to improve, communicate, and implement the site's written procedures for responding during all shifts to all types of emergencies. Review the results of previous drills and conduct and evaluate, at a minimum, an annual drill. Ensure that there is at least one fully operational emergency response team on every shift. Provide AEDs as appropriate and training on their use. Take proactive steps to ensure full implementation and automatic tracking of the site's emergency preparedness and response program and procedures. Establish a HAZMAT Team if necessary and consult with local fire department to ensure adequate coverage for fire, explosion, or chemical release. (Refer to Application item 3.G.)</p>		<p>No Action Taken</p>	<p>No Action Taken</p>
<p>Department and/or Person Responsible:</p>		<p>Target Date:</p>	<p>Completed Date:</p>
<p>Department Location:</p>			
<p>Participant Actions Taken (Supporting Documentation Required):</p>			
<p>Coordinator Narrative:</p>			

Stage III - 4. Safety and Health Training			
1. Safety and Health Training - Required Actions		Participant Status	Coordinator Status
1. Continue to provide training to all employees, including contractors, following the general guidelines specified in Stage I. (Refer to Application item 4.A.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Take proactive steps to improve and continue providing training on specific topics, as needed. (Refer to Application item 4.B.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Provide training for contractors on how to recognize hazardous conditions along with the signs and symptoms of workplace-related illnesses and injuries. (Refer to Application item 4.F.)		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			

Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
Stage III - Documentation			
1. Documentation	Participant Status	Coordinator	Status
1. All documentation from Stages I and II completed and updated.	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Completed Date:	
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
2. Annual self-evaluation of the site's safety and health management system.	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Completed Date:	
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
3. Follow up Safety and Health Perception Survey and results.	No Action Taken	No Action Taken	
Department and/or Person Responsible:	Target Date:	Completed Date:	

Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
4. Hazard analysis form showing analysis of non-routine tasks or significant changes.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			
5. Pre-use analysis forms and results.		No Action Taken	No Action Taken
Department and/or Person Responsible:		Target Date:	Completed Date:
Department Location:			
Participant Actions Taken (Supporting Documentation Required):			
Coordinator Narrative:			

Stage I Desired Outcomes

Element 1. Management Leadership and Employee Involvement

1. Management Commitment

[Return to Element](#)

Top Management:

- 1 In conjunction with the employees, have developed, issued, and communicated an acceptable Safety and Health Mission Statement.
- 2 Have developed, issued and communicated an acceptable Safety and Health Policy Statement.
- 3 Demonstrates visible Safety and Health leadership

Management:

- 4 Has committed adequate resources and has begun integrating Safety and Health goals and objectives that are clear, attainable, measurable, and significant.
- 5 Has developed and communicated annual safety and health goals and objectives that are clear, attainable, measurable, and significant.
- 6 Has clarified lines of communication and encourages all workers to contact top management of safety and health issues.
- 7a Has clearly identified every employee's and contract worker's responsibility for safety and health.

The site has an acceptable safety and health accountability plan that includes:

- 7b Safety and health responsibilities and accountability are included in the job descriptions and performance plans of, at a minimum, managers, mid-level supervisors, and designated safety and health staff.
- 7c Authority provided to persons responsible for achieving safety and health goals.

2. Employee Involvement

[Return to Element](#)

- 1 Has conducted a baseline employee safety and health perception survey.
- 2 Has reviewed the results of the employee safety and health perception survey and has begun to make changes in response to the findings.
- 3 Has informed all workers of their rights under the OSH Act, of the site's participation in Challenge, and of the fundamental principles of VPP.

- 4 Has established a few key teams that represent different sectors of the site's staff. Teams have established goals and missions that will effectively contribute to safety and health, such as addressing a particular trend, spreading the word about Challenge, acting as one avenue to accept employee reports of hazards.

3. Contract Worker Coverage

[Return to Element](#)

- 1 Has developed a plan for providing contractors high-quality safety and health protection equal to that received by employees.
- 2 Has required all contractors and contract workers to adhere to the site's safety and health rules.
- 3 Has a system of contractor oversight to ensure that contractors have systems and processes for ensuring the timely identification, correction, and tracking of uncontrolled hazards in contractors' work areas.

Element 2. Worksite Analysis

1. Baseline Safety and Industrial Hygiene Hazard Analysis

[Return to Element](#)

- 1 Has conducted an acceptable Baseline Safety and Industrial Hygiene Hazard Analysis.
- 2 Has conducted a repeat baseline study if justified by significant change (e.g., changes in processes, equipment, hazard controls, etc.).

2. Hazard Analysis of Routine Jobs, Tasks and Processes & 3. Pre-Use Analysis

[Return to Element](#)

No Action Required

4. Industrial Hygiene (IH) Program

[Return to Element](#)

- 1 Has conducted a baseline study based on this IH Program Plan, including a noise, possible chemical exposures, and chemical inventory.

5. Routine Self-Inspections

[Return to Element](#)

No Action Required

6. Hazard Reporting System for Employees

[Return to Element](#)

No Action Required

7. Investigation of Accidents and Near-Misses

[Return to Element](#)

- 1 Had developed a documented system and procedures for investigation of accidents.
- 2 If applicable, site has conducted acceptable investigations of accidents.

8. Trend Analysis

[Return to Element](#)

- 1 Has conducted a trend analysis of injury and illness history at the site for previous three complete calendar years.
- 2 Has, at a minimum, begun developing a plan for conducting additional trend analyses of other safety and health related information.

Element 3. Hazard Prevention and Control

1. Certified Professional Resources

[Return to Element](#)

- 1 No action is required, unless outside resources are being utilized to conduct the baseline hazard analysis.

2. Hazard Elimination and Control Methods

[Return to Element](#)

- 1 Has begun identifying and selecting the most appropriate hazard elimination and control methods for the most serious known hazards at the site that were identified in this stage through the baseline hazard analysis, accident investigations, and/or trend analysis.
- 2 Hazard controls follow the hierarchy of controls. (Engineering, administrative, work practice, PPE).
- 3 Top priority hazards are controlled before progressing to Stage II. (For hazards requiring long-term abatement projects, such as new ventilation systems, interim protection is acceptable).

3. Hazard Control Programs

[Return to Element](#)

- 1 Has met all minimum requirements regarding the establishment of hazard control programs required by OSHA standards.

4. Occupational Health Care Program

[Return to Element](#)

- 1 Has conducted thorough review of OSHA 200/300 logs, insurance claims, and accident investigations and ensures that all records are in order.
- 2 Employees have access to health services, as needed, based on results of the baseline safety and health analysis including physician and emergency medical care. (See also Emergency Preparedness and Response).

5. Preventive Maintenance of Equipment

[Return to Element](#)

- 1 Has an inventory of equipment that requires preventive maintenance and verified recommended intervals.

6. Tracking of Hazard Correction

[Return to Element](#)

- 1 Has developed and established a hazard tracking system.

7. Emergency Preparedness and Response

[Return to Element](#)

- 1 Has provided emergency physician and medical care.
- 2 Has established and communicated written emergency procedures.
- 3 Has trained employees and provided first aid and CPR for each shift, or an equally effective alternative.

Element 4 Safety and Health Training

1. Safety and Health Training

[Return to Element](#)

- 1 Training provided complies with specified guidelines.

2. Managers, supervisors, non-supervisory employees, and contractors are:

- 2a Aware of their rights under the OSH Act, what Challenge is all about, and fundamental VPP Principles.

- 2b** Familiar with the hazards onsite; how to recognize hazardous conditions; signs and symptoms of workplace-related illnesses; protective measures; safe work procedures; and the function, use, and maintenance of specific PPE they are required to wear.
- 2c** Familiar with emergency evacuation procedures and their specific responsibilities for each type of emergency.
- 3** Managers and supervisors have specific knowledge of their safety and health roles and responsibilities and how they can carry these out, including knowledge of change strategies they can use to help improve the safety and health culture at the total site.
- 4** Designated staff who have assigned safety and health responsibilities have the knowledge and skills they need to perform the tasks assigned to them.

Stage II Desired Outcomes

Element 1. Management Leadership and Employee Involvement

1. Management Commitment

[Return to Element](#)

- 1 All employees and contract workers are aware of management's and employee's safety and health vision for the site.
- 2 In addition to top management, managers and supervisors are also demonstrating visible safety and health leadership.
Management has committed adequate resources to meet the safety and health outcomes required for
- 3 Stage II. Management continues to improve and strengthen the integration of safety and health into existing planning.
- 4 Management, in conjunction with the employees, continues to develop and communicate annual safety and health goals and objectives that are clear, attainable, measurable, and significant.
- 5 Employees are communicating with management more openly on safety and health issues.
- 6 Managers, supervisors, and non-supervisory employees can clearly describe their responsibilities and accountability for safety and health at the site.
Employees identified as being accountable for meeting safety and health goals believe they have
- 6a adequate authority and support to do their job. Other workers recognize these persons' authority and are beginning to support them.
- 6b Managers, supervisors, and specific safety and health staff are monitored and evaluated on their safety and health performance; receive feedback; prepare corrective action plans as needed; receive rewards and recognition for good performance ; and bear consequences for poor performance.
- 6c Safety and health responsibilities and accountability are included in the job descriptions and performance plans of managers, mid-level supervisors, and designated safety and health staff.
- 7 Site has an acceptable disciplinary plan for non-supervisory employees and contract workers, which identifies the consequences for meeting or failing to meet safety and health expectations.
- 8 Site has an acceptable plan for conducting an annual evaluation of the total site's safety and health management system.

2. Employee Involvement

[Return to Element](#)

- 1 The site can demonstrate significant improvement in its safety and health practices in terms of employee involvement, attitudes (survey results), and hazard-reporting; their compliance with rules and standards; and their acceptance of safety and health roles and responsibilities.
- 2 Increased activity on and/or additional safety and health teams are formed with greater employee participation.
- 3 Site has incorporated into its orientation training for new employees all the information that is required to be shared with employees (e.g., rights under the Occupational Safety and Health Act, the site's participation in Challenge, and the fundamental principles of VPP).
More employees are actively participating in safety and health activities at the site, together with
- 4 designated safety and health staff in performing hazard analyses, accident and near miss investigations, and self-inspections.

3. Contract Worker Coverage

[Return to Element](#)

- 1 Site routinely uses safety and health factors, such as injury and illness rates, in selecting and overseeing contractors.
- 2 Site can demonstrate a significant improvement in its system for the timely identification, correction, and tracking of uncontrolled hazards in contractors work areas.
- 3 Site has an established process to monitor contractor compliance and to remove contractors for safety or health violations.
- 4 Site can demonstrate a significant rise in the quality of safety and health protection given to contract workers.
- 5 Site can demonstrate a significant rise in the level of compliance by contract workers with the site's safety and health rules

Element 2. Worksite Analysis

1. Baseline Safety and Industrial Hygiene Hazard Analysis

[Return to Element](#)

No Action Required

2. Hazard Analysis of Routine Jobs, Tasks and Processes

[Return to Element](#)

- 1 Site has conducted acceptable hazard analyses of routine jobs, tasks, and processes.

3. Hazard Analysis of Significant Changes

[Return to Element](#)

No Action Required

4. Pre-Use Analysis

[Return to Element](#)

No Action Required

5. Industrial Hygiene (IH) Program

[Return to Element](#)

- 1 Site has developed a written IH program.
- 2 Site has begun implementing controls for hazards identified in the initial baseline study.
- 3 Site has established and implemented sampling frequencies.
- 4 Site has conducted the necessary IH surveys.

6. Routine Self-Inspections

[Return to Element](#)

- 1 Site has developed a documented routine self-inspection system.
- 2 Acceptable routine self-inspections have been conducted, at a minimum, by designated safety and health staff.
- 3 The entire worksite, including contractor work areas, has been inspected at least twice a year.

7. Hazard Reporting System for Employees

[Return to Element](#)

- 1 Site has developed and begun implementing a documented hazard reporting system that includes a feedback to employees on actions taken.

8. Investigation of Accidents and Near-Misses

[Return to Element](#)

- 1 Site has expanded system and process developed in Stage I for accident investigation to include near-misses.
- 2 Site has conducted acceptable investigations of accidents and near-misses.

9. Trend Analysis

[Return to Element](#)

- 1 Site has conducted another acceptable trend analysis of injury and illness history at the site if a year has gone by since the initial analysis.
- 2 Site has conducted an acceptable trend analysis of the other safety and health information in addition to injury and illness history (i.e., near-misses reported, reported hazards, company wide incidents, etc.).

Element 3. Hazard Prevention and Control

1. Certified Professional Resources

[Return to Element](#)

- 1 Site has identified certified safety and health professionals and other licensed health care professionals whom employees and contract workers can access for onsite or offsite safety and health services.

2. Hazard Elimination and Control Methods

[Return to Element](#)

- 1 Site has begun identifying and selecting the most appropriate hazard elimination and control methods for hazards identified in this Stage through all previous methods, and now also through hazard analysis of routine jobs, self-inspections, near-miss investigations, and employee reports of hazards.
- 2 Hazard controls follow the hierarchy of controls. (elimination/substitution, engineering, administrative, work practice, PPE).
- 3 Top priority hazards are controlled before progressing to Stage III. (For hazards requiring long-term abatement projects, such as new ventilation systems, interim protection is acceptable).

3. Hazard Control Programs

[Return to Element](#)

- 1 Site continues to implement, maintain, modify, and improve hazard control programs required by OSHA standards.
- 2 Site continues to train all workers on these programs, as needed.

4. Tracking of Hazard Correction

[Return to Element](#)

- 1 Site continues to implement and improve the hazard tracking system.

5. Preventive Maintenance of Equipment

[Return to Element](#)

- 1 The site has established and is following an acceptable preventive maintenance schedule.

6. Occupational Health Care Program

[Return to Element](#)

- 1 Site continues to provide access to licensed health care professionals.
- 2 Site continues to provide access to health services, as needed, based on the results of the baseline safety and health analysis.
- 3 Site continues to provide access to physician care and emergency medical care for all shifts within a reasonable time and distance. (See also Emergency Preparedness and Response).

7. Emergency Preparedness and Response

[Return to Element](#)

- 1 Site continues to communicate the written procedures for responding to all types of emergencies that meet VPP requirements and has begun improving the emergency procedures established in Stage I.
- 2 Site has conducted at least one evacuation drill and has assessed how well the procedures worked.
- 3 Site continues to provide Emergency Medical Services.
- 4 Site has made available to each shift a sufficient number of employees trained in first aid and CPR, or an alternative at least as effective.
- 5 Site has established an Emergency Response Team.

Element 4. Safety and Health Training

1. Safety and Health Training

[Return to Element](#)

- 1 Training provided complies with guidelines established in Stage I.
Managers, supervisors, non-supervisory employees, and contract workers are aware of their safety and
- 2 health related rights and have the knowledge and skills they need to perform their safety and health roles and responsibilities.
- 3 Implemented training required for safety and health staff.
Provide training to contract employees recognition of hazard, symptoms of workplace illnesses, protective
- 4 measures and safe work procedures.

Stage III Desired Outcomes

Element 1. Management Leadership and Employee Involvement

1. Management Commitment

[Return to Element](#)

- 1 Management overall demonstrates at least minimally effective, visible leadership with respect to the site's safety and health program.
- 2 Top management accepts ultimate responsibility for safety and health in the organization even if safety and health functions are delegated to others.
- 3 The individuals assigned responsibility for safety and health have the authority to ensure that hazards are corrected or necessary changes to the safety and health management system are made.
- 4 Management has set aside and promotes the use of adequate and dedicated resources for safety and health.
- 5 All employees and contract workers are aware of managements and employees safety and health vision for the site.
- 6 Safety and health responsibilities and accountability are included in the job descriptions and performance plans of non-supervisory employees and contract workers, in addition to those of managers, mid-level supervisors, and designated safety and health staff.
- 7 Enforce, document, and improve disciplinary plan.
- 8 Site has an acceptable plan for conducting an annual evaluation of the total site's safety and health management system.

2. Employee Involvement

[Return to Element](#)

- 1 & 2 Complete perception survey plan
- 3 Employees support the site's participation in the Challenge process.
- 4a Site safety and health teams are adequately supported and functioning. Audits, inspections, and investigations are routinely conducted and have broad employee involvement.
- 4b Employees feel free to participate in the safety and health management system without fear of discrimination or reprisal.
- 4c Employees are involved in the safety and health management system in at least three meaningful and constructive ways in addition to the exercise of their right to report a hazard.

3. Contract Worker Coverage

[Return to Element](#)

- 1 Contractors support the site's participation in the Challenge process.
- 2 The site's contractor program covers the prompt correction and control of hazards in the event that the contractor fails to correct or control such hazards.
- 3 The contract oversight is minimally effective considering the nature of the site including: equal safety and health protection provided to contractors, rise in the level of compliance by contract workers with the site's safety and health rules, safety and health performance included in the bidding process, monitoring and correction of hazards in contractor's work areas, and enforcement of penalties, including removal for safety and health violations.
- 4 Site can demonstrate a significant rise in the quality of safety and health protection given to contract workers as reported in employee interviews.
- 5 Site can demonstrate a significant rise in the level of compliance by contract workers with the site's safety and health rules (e.g.: less hazards in contractor work areas, fewer disciplinary actions, fewer penalties).

Element 2. Worksite Analysis

1. Baseline Safety and Industrial Hygiene Hazard Analysis

[Return to Element](#)

- 1 Site has previously conducted baseline survey in Stage I and completed any required resampling after implementing any Hierarchy of Controls required by OSHA programs. (i.e.: Hearing Conservation, Respiratory Protection, regulated chemicals such as Formaldehyde, Asbestos, etc.)

2. Hazard Analysis of Routine Jobs, Tasks and Processes

[Return to Element](#)

- 1 Site has an effective hazard analysis system in place for routine operations, non-routine operations, and significant changes

3. Hazard Analysis of Non-Routine Tasks and Significant Changes

[Return to Element](#)

- 1 Site has an effective hazard analysis system in place for non-routine operations and significant changes.

4. Pre-Use Analysis

[Return to Element](#)

- 1 Site has at least an effective hazard analysis system in place when considering new equipment, chemicals, facilities, or significantly different operations or procedures.

5. Industrial Hygiene (IH) Program

[Return to Element](#)

- 1 Site has developed a written IH program.
- 2 Site has implemented controls for hazards identified in the initial baseline study.
- 3 Site has established and implemented sampling frequencies.
- 4 Site has conducted the necessary IH surveys.

6. Routine Self-Inspections

[Return to Element](#)

- 1 Site has a documented system for routinely scheduled system for self inspections that are completed monthly and ensures that the entire site is covered at least quarterly.

7. Hazard Reporting System for Employees

[Return to Element](#)

- 1 Hazard reporting system is active and encourages reporting with regular feedback.

8. Investigation of Accidents and Near-Misses

[Return to Element](#)

- 1 Site has expanded system and process developed in Stage I and II for accident investigation to include near-misses.
- 2 Site has conducted acceptable investigations of accidents and near-misses.

9. Trend Analysis

[Return to Element](#)

- 1 The site has an effective means for identifying and assessing trends.

Element 3. Hazard Prevention and Control

1. Certified Professional Resources

[Return to Element](#)

- 1 Continue to provide employees and contractors access to certified safety and health professionals and other licensed health care professionals who can provide onsite or offsite services

2. Hazard Elimination and Control Methods

[Return to Element](#)

- 1 Site has an effective tracking system that results in hazards being controlled, reduced, or eliminated.

3. Hazard Control Programs

[Return to Element](#)

- 1 Continue to maintain all hazard control programs required by an OSHA standard, complying with all guidelines including an annual review and training if required. Take proactive steps to establish hazard control programs, if any, required by new OSHA standards and to modify or update existing programs as needed.

4. Tracking of Hazard Correction

[Return to Element](#)

- 1 Continue to implement and improve the site's documented hazard tracking system.

5. Preventive Maintenance of Equipment

[Return to Element](#)

- 1 Continue to implement the preventive maintenance schedule on equipment to prevent any hazardous conditions.

6. Occupational Health Care Program

[Return to Element](#)

- 1 Site continues to provide access to licensed health care professionals to help identify causes and symptoms of occupational injuries and illnesses.
- 2 Site continues to provide access to health services, as needed, based on the results of the baseline safety and health analysis.

7. Emergency Preparedness and Response

[Return to Element](#)

- 1 Continue to improve, communicate, and implement the site's written procedures for responding during all shifts to all types of emergencies. All shifts should be included in one emergency response drill annually.

Safety and Health Training

1. Safety and Health Training

- 1 Training provided complies with specified guidelines.
- 2 Site provides an effective training to educate employees regarding the known hazards of the site and their controls.
- 3 Site continues to provide an effective training that meets its specific safety and health needs of the site.

Appendix C: VADOC Challenge Administrator Application and Instructions

Electronic File Name: VADOC Challenge Administrator Application and Instructions 9-5-17.docx

Section 1: Instructions

Section 2: Administrator Application

Section 3: Coordinator Application

Section 4: Sample Statement of Commitment

DOLI and VADOC Challenge

Administrator Application and Instructions



Section 1 – VADOC Challenge Administrator Application and Instructions

To become a VADOC Challenge Administrator, please follow the steps below.

1. Complete the Challenge Administrator Application. If you intend to use a Challenge Coordinator to assist you as you work with Challenge participants, please complete a Challenge Coordinator Application for each proposed Coordinator.
2. Complete and sign a Challenge Administrator letter of commitment. A sample letter of commitment is at the end of this application.
3. To submit electronically, attach the completed VADOC Challenge Administrator Application (and, if applicable, any completed VADOC Challenge Coordinator Applications) and a scanned copy of the signed VADOC Challenge Administrator letter of commitment to an email and send it to the VOSH Challenge Coordinator.

VOSH Challenge Coordinator
Virginia Occupational Safety and Health
Voluntary Protection Program
3013 Peters Creek Road NW
Roanoke, VA 24019

Electronic submission is preferred

If you have questions about VADOC Challenge or the VADOC Challenge Administrator Application Process, please contact the Voluntary Protection Program at 540-562-3580 Selection 6.

Section 2 – Administrator Application

VADOC Challenge Administrator Application	
Administrator's Organization Information	
Name	
Organization Type (private company, federal agency, association, etc.)	
Site Address (include street, city, state, zip)	
Administrator Contact Information	
Name	
Title	
Phone Number	
Fax Number	
Email Address	
Knowledge and Experience	
Please describe your organization's knowledge and experience in safety and management systems. Experience may include involvement in other OSHA Programs such as: VPP, SHARP or Strategic Partnerships; and/or experience in corporate-wide safety and health policies at the facility-level. [250 words or less]	
Resources	
Please confirm the availability of resources including time and personnel to the Challenge Pilot Program to the Candidate facilities or members. [100 words or less]	

Section 3 – Coordinator Application

Note: Although it is not required, Challenge Administrators may select Challenge Coordinators to assist them in managing their Challenge participants. If the Challenge Administrator chooses to have a Challenge Coordinator, please complete this form. If the Challenge Administrator chooses to have more than one Challenge Coordinator, please complete a separate application for each prospective Challenge Coordinator.

VADOC Challenge Coordinator Application	
Coordinator's Organization Information	
Name	
Organization Type	
Site Address (include street, city, state, zip)	
Coordinator Contact Information	
Name	
Title	
Phone Number	
Fax Number	
Email Address	
Knowledge and Experience	
Please describe the prospective Challenge Coordinator's knowledge and experience in safety and health management programs. [200 words or less]	
Training and Certifications	
Please describe any relevant safety and health training completed (i.e.: OSHA Special Government Employee training) and certifications that the prospective Challenge Coordinator has completed [150 words or less]	
Evaluation Experience	
Please describe any relevant experience the prospective Challenge Coordinator has with evaluating safety and health management programs. [200 words or less]	

Section 4 – Sample Letter of Commitment

Date

VOSH Challenge Coordinator
Virginia Occupational Safety and Health
Voluntary Protection Program
3013 Peters Creek Road NW
Roanoke, VA 24019

Dear **Name**:

I am writing to inform you of the Virginia Department of Corrections intent to participate in the Challenge Program as a Challenge Administrator. We have reviewed the program and believe **[Insert Name]** meets the Administrator criteria you are seeking.

I can assure you that **[Insert Name]** is committed to assisting our potential candidates in progressing through the Challenge Pilot Stages towards health and safety excellence. Initially we agree to have a minimum of ten (10) Candidates in the Challenge Pilot.

Attached please find our: (if submitting at this time).

Administrator Application
Coordinator(s) Application
Candidate Package(s)

Should you have any questions or need additional information, please contact:

VOSH Challenge Coordinator
Virginia Occupational Safety and Health
Voluntary Protection Program
3013 Peters Creek Road NW
Roanoke, VA 24019

The Virginia Department of Corrections looks forward to working together to bring the principles and benefits of VPP to more facilities throughout Virginia.

Sincerely,

Organization Representative Name
Organization Representative Title
Organization Name

Appendix D: VADOC Participant and Administrator Listing

Electronic File Name: VADOC Participant and Administrator Listing 9-5-17.xlsx

Tab 1: Cover Page

Tab 2: Overview and Instructions

Tab 3: Participants Listing

Tab 4: Administrator Listing

DOLI and VA DOC Challenge

Participant Listing



Challenge Pilot Participant Listing

Included in this spreadsheet are:

- Tab 1. Cover Page
- Tab 2. Overview and Instructions
- Tab 3. Participants Listing
- Tab 4. Administrators Listing

- 1) Enter Participant or Administrator information on the correct tab
Update the participant information as they complete each stage

To access these documents, please click on the tabs at the bottom of this form.

The Challenge Administrator must prepare the Administrator Annual Report each year along with the Challenge Tracking Participant Status (OCTPS) form for each participant. Both the annual report and all OCTPS forms must be submitted electronically to your VOSH Challenge Coordinator no later than February 15 of each year.

Participants Listing

Participant	Street	Town	State	Zip	Site Contact Name	Site Contact Title	Site Contact Phone	Site Contact Email	Warden Name
			Virginia						

Warden's Email	# of Employees	# Contractors	SIC	NAICS	# of Participants

Appendix E: VADOC Challenge Participant Application and Instructions

Electronic File Name: VADOC Challenge Participant Application and Instructions 9-5-17.docx

Section 1: Challenge Participant Application and Instructions

Section 2: Challenge Participant Applications

Section 3: Baseline Injury and Illness Information

Section 4: VADOC Baseline H & S I Data Tracking

Section 5: Sample Site Statement of Commitment

Section 6: Sample Site Letter of Assurance

VADOC Challenge Program

Participant Application and Instructions



VADOC Challenge Participant Application and Instructions

To become a VADOC Challenge Participant please follow the steps below.

1. Complete the Challenge Participant Application.
2. Provide a signed copy of the VADOC Challenge Participant Letter of Assurance and the Statement of Commitment.
3. To submit electronically, attach the completed Challenge Participant application a scanned copy of the signed Challenge Participant Statement of Commitment, and Letter of Assurance to an email and send it the VADOC Challenge Administrator.
4. To submit via hard copy, send the completed Challenge Participant application, signed VADOC Challenge Letter of Assurance and the Letter of Commitment to the VADOC Challenge Administrator

If you have questions about the VADOC Challenge Program or the VADOC Challenge Participant application process, please contact the Voluntary Protection Program at 540-562-3580 and press 6.



VADOC Challenge Participant Application

1. Participant Information

Challenge Participant Applicant	
Applicant Site Address <small>(include street, city, state, zip)</small>	
Applicant Site Manager Name	
Applicant Site Manager Title	
Company/Corporate Name and address <small>(if different from above)</small>	

2. Participant Contact Information

Primary Participant Contact Name	
Primary Participant Contact Title	
Primary Participant Contact Phone Number	
Primary Participant Contact Fax Number	
Primary Participant Contact Email	
Secondary Participant Contact Name	
Secondary Participant Contact Title	
Secondary Participant Contact Phone Number	
Secondary Participant Contact Fax Number	
Secondary Participant Contact Email	

3. Participant Site Information

Number of Employees		Number of Contract Employees	
SIC		NAICS	



**VADOC Challenge Program
Site Baseline Injury and Illness Information**

Challenge Participant Applicant	OSHA 300 Log Totals for Calendar Year

G	H	I	J	K	L	M:1	M:2	M:3	M:4	M:5	M:6

Total Hours Worked	Total # of Employees	TCIR	BLS National Average	DART	BLS National Average

To Calculate TCIR

$$\frac{(\text{Columns H + I + J}) \times 200,000}{\text{Total Hours Worked}} = \text{TCIR}$$

To Calculate DART

$$\frac{(\text{Columns H + I}) \times 200,000}{\text{Total Hours Worked}} = \text{DART}$$

Compare the site's TCIR and DART rates to the most recently published BLS TCIR and DART rates for the site's industry NAICS code.



Section 4: Site Base Line Information

VADOC Challenge Program Baseline H&S Metrics

Please provide data for your most recent calendar year.

Candidate Name		
Loss Incident Rate		Year of Data Provided
Near Miss Rate		
Employee H&S Suggestion Rate		
H&S Work-order Closure Rate*		
Other Data*		
Worker's Compensation Data		
Fees		
Direct Costs		
EMR		
Loss Run Data		



Section 5: Sample Statement of Commitment

Date

VOSH VPP Challenge Coordinator
Virginia Occupational Safety and Health
Voluntary Protection Program
3013 Peters Creek Road, NW
Roanoke, VA 24019

Dear Name:

In our mission to provide a safe and healthful workplace, we, **Insert Name of Challenge Participant Applicant**, value our employees as our greatest assets and we are committed to providing an exemplary workplace for them. We assure you that **Insert Name of Challenge Participant Applicant** is committed to successfully completing the VADOC Challenge Program and developing an effective safety and health management program.

We will provide the necessary data and documentation to our VADOC Challenge Administrator, **Insert the Administrator Name along with the Organization Name**, and keep them informed of our progress. We also will involve our employees in the VOSH Challenge Program. We are excited to be involved in voluntary efforts with all involved and look forward to reaching our goals.

Attached please find our Challenge Participant Application, Statement of Commitment, and Letter of Assurance. Should you have any questions or need additional information, please contact me at **Challenge Participant Applicant Telephone Number** or **Challenge Participant Applicant Email Address**.

Sincerely,

Insert Challenge Participant Applicant Name
Insert Challenge Participant Applicant Title
Insert Challenge Participant Applicant

Insert Bargaining Unit Representative Name
Insert Bargaining Unit Representative Title
Insert Bargaining Unit Name and Local #



Section 6: Sample Letter of Assurance

VADOC site name agrees to comply with the following items as a Virginia VADOC Challenge Program Participant:

1. Compliance

We will comply with the Occupational Safety and Health Act (OSHA Act) and correct, in a timely manner, all hazards discovered through self-inspections, employee notifications, accident investigations, VOSH onsite reviews, process hazard reviews, annual evaluations, or any other means.

2. Correction of Deficiencies

We will promptly address safety and health deficiencies related to compliance with VOSH requirements identified during our progress to complete the VADOC Challenge program.

3. Employee Support

Our employees support the VADOC Challenge application. Management's assurance of employee support will be verified by the VOSH Challenge Coordinator through documentation and communications provided by the Participant and those individuals assisting the site in its pursuit of VADOC Challenge.

4. Challenge Elements

Management commits to implementing and maintaining the requirements of the Challenge elements and the overall VADOC Challenge program.

5. Orientation

Employees, including newly hired or transferred employees, and contract employees, will receive orientation on the VADOC Challenge, including employee rights under VADOC Challenge and under the OSHA Act.

6. Non-Discrimination

We will protect employees given safety and health duties as part of our safety and health program from discriminatory actions resulting from their carrying out such duties, as described in Section 40.1-51.2:1 of the Code of Virginia and protect employees who exercise their rights.

7. Employee Access

Employees will have access to the results of self-inspections, accident investigations, and other safety and health data upon request.

8. Documentation

We will maintain our safety and health program information and make it available for VOSH review to determine initial and continued approval to Challenge. This information will include all documentation used to support the site's VADOC Challenge effort.

9. Quarterly and Annual Submissions

We will submit the updated VADOC Challenge Tracking Participant Spreadsheet (OCTPS) as required to the assigned program Coordinator or Administrator on a timely quarterly basis.

10. Organizational Changes

Whenever significant organizational changes occur, we will provide the VPP Manager, **within 60 days**, a new Letter of Assurance by site management.

Warden's Signature		7/2/2018
Print Name		
Assistant Warden's Signature		7/2/2018
Print Name		



Appendix F: VADOC Administrator Quarterly and Annual Summary Report

Electronic File Name: VADOC Administrator Quarterly and Annual Summary Report 9-5-17.xlsx

Tab 1: Cover Page

Tab 2: Overview and Instructions

Tab 3: Admin. Quarterly Report

Tab 4: 1 – Admin. Annual Report

Tab 5: 2 – Summary of Rates

Tab 6 to 15: Participant Information

DOLI and VA DOC Challenge

Administrator Annual Report



Challenge Pilot Administrator Annual Report

Included in this spreadsheet are:

- Tab 1. Cover Page
- Tab 2. Overview and Instructions
- Tab 3. Admin Quarterly Report
- Tab 4. 1 - Admin Annual Report
- Tab 5. Summary of Participant Injury and Illness Rates - Autofills
- Tab 6 - 15 Individual Participant Information

Admin. Quarterly Report and Annual Report Tabs

- Any changes to the administrator's name or address
- Any changes to the administrator's contact information
- Any changes to Coordinator's contact information
- Identify any participants who have dropped out of the Challenge Pilot since the last progress report or any new candidates who have been added. (Candidate information package must be prepared and submitted to VOSH for all new candidates)
- Describe any issues that have prevented your participants from making progress
- Provide any additional comments or suggestions to improve the Challenge Pilot Program

Summary of Rates

This table provides a summary of the annual injury rates for each participant. The data in this table will be automatically filled in as data is entered in later spreadsheets. *The Administrator should not manually enter data into this table.* All the Administrator needs to do is add the Administrator's name and year of the report at the top of the page.

To access these documents, please click on the tabs at the bottom of this form.

The Challenge Administrator must prepare the Administrator Annual Report each year along with the Challenge Tracking Participant Status (OCTPS) form for each participant. Both the annual report and all OCTPS forms must be submitted electronically to your VOSH Challenge Coordinator no later than February 15 of each year.

Administrator Name

Year
CY20__

Section 1. Administrator Information Update (If there were any changes)
--

Name	
Site Address	
City, State, Zip	

Section 2. Administrator Contact Information Update (If there were any changes)
--

Contact Name	
Title	
Phone Number	
Fax Number	
Email Address	

Section 3. Coordinator Contact Information Update (If there were any changes)
--

Contact Name	
Title	
Phone Number	
Fax Number	
Email Address	

Section 4. Participant Information Updates

--

Section 5. Input from Challenge Administrators

Please list any Candidates who have dropped out or have been added since the last progress report. You must submit a Candidate Information Package for all new Candidates.

--

Administrator Name

Year
CY20__

Section 1. Administrator Information Update
--

Name	
Site Address	
City, State, Zip	

Section 2. Administrator Contact Information Update
--

Contact Name	
Title	
Phone Number	
Fax Number	
Email Address	

Section 3. Coordinator Contact Information Update
--

Contact Name	
Title	
Phone Number	
Fax Number	
Email Address	

Section 4. Participant Information Updates

--	--

Section 5. Input from Challenge Administrators

Please provide a couple of examples of significant achievements accomplished by your Challenge Participants during the past year.

--	--

Section 6. Input from Challenge Administrators

Describe any issues that have prevented your Challenge participant from making progress.

--	--

Section 7. Additional Comments and Suggestions

Do you have any suggestions for improving the Challenge Pilot Program?
Additional comments:

Summary of Rates

Administrator	Year
0	#VALUE!

Injury and Illness Rates

Participant Name	TCIR			DART			Loss Incident Rate	Baseline	
	Current	Baseline	%	Current	Baseline	%		Baseline	%
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!	0	0	0
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!	0	0	0
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!	0	0	0
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!	0	0	0
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!	0	0	0
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!	0	0	0
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!	0	0	0
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!	0	0	0
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!	0	0	0
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!	0	0	0
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!	0	0	0
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!	0	0	0
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!	0	0	0

Summary of Rates

Participant Name	Near-Miss Rate	Baseline	%	H&S Suggestion Rate	Baseline	%	H&S Work - Order Closure Rate	Baseline	%
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0
[Insert Participant Name Here]	0	0	0	0	0	0	0	0	0

Participant Information

Participant
[Insert Participant Name Here]

OSHA 300 Log Totals for	
Year	CY 2014

G	H	I	J	K	L	M:1	M:2	M:3	M:4	M:5	M:6
0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Total Hours Worked	0.0
--------------------	-----

Total Employees	
-----------------	--

Measure	Current Year	Baseline	Change
TCIR	#DIV/0!	0.0	#DIV/0!
DART	#DIV/0!	0.0	#DIV/0!
Loss incident Rate			0.0
Near-Miss Rate			0.0
Employee Health and Safety (H&S) Suggestion Rate			0.0
H&S Work-Order Closure Rate			0.0

Significant Achievements and Milestones

Describe any significant achievements/milestones accomplished by your participants during the past year.

Participant Information

Participant
[Insert Participant Name Here]

OSHA 300 Log Totals for	
Year	CY 2014

G	H	I	J	K	L	M:1	M:2	M:3	M:4	M:5	M:6
0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Total Hours Worked	0.0
--------------------	-----

Total Employees	
-----------------	--

Measure	Current Year	Baseline	Change
TCIR	#DIV/0!	0.0	#DIV/0!
DART	#DIV/0!	0.0	#DIV/0!
Loss incident Rate			0.0
Near-Miss Rate			0.0
Employee Health and Safety (H&S) Suggestion Rate			0.0
H&S Work-Order Closure Rate			0.0

Significant Achievements and Milestones

Describe any significant achievements/milestones accomplished by your participants during the past year.

Participant Information

Participant
[Insert Participant Name Here]

OSHA 300 Log Totals for	
Year	CY 2014

G	H	I	J	K	L	M:1	M:2	M:3	M:4	M:5	M:6
0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Total Hours Worked	0.0
---------------------------	-----

Total Employees	
------------------------	--

Measure	Current Year	Baseline	Change
TCIR	#DIV/0!	0.0	#DIV/0!
DART	#DIV/0!	0.0	#DIV/0!
Loss incident Rate			0.0
Near-Miss Rate			0.0
Employee Health and Safety (H&S) Suggestion Rate			0.0
H&S Work-Order Closure Rate			0.0

Significant Achievements and Milestones

Describe any significant achievements/milestones accomplished by your participants during the past year.

Participant Information

Participant
[Insert Participant Name Here]

OSHA 300 Log Totals for	
Year	CY 2014

G	H	I	J	K	L	M:1	M:2	M:3	M:4	M:5	M:6
0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Total Hours Worked	0.0
---------------------------	-----

Total Employees	
------------------------	--

Measure	Current Year	Baseline	Change
TCIR	#DIV/0!	0.0	#DIV/0!
DART	#DIV/0!	0.0	#DIV/0!
Loss incident Rate			0.0
Near-Miss Rate			0.0
Employee Health and Safety (H&S) Suggestion Rate			0.0
H&S Work-Order Closure Rate			0.0

Significant Achievements and Milestones

Describe any significant achievements/milestones accomplished by your participants during the past year.

Participant Information

Participant
[Insert Participant Name Here]

OSHA 300 Log Totals for	
Year	CY 2014

G	H	I	J	K	L	M:1	M:2	M:3	M:4	M:5	M:6
0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Total Hours Worked	0.0
---------------------------	-----

Total Employees	
------------------------	--

Measure	Current Year	Baseline	Change
TCIR	#DIV/0!	0.0	#DIV/0!
DART	#DIV/0!	0.0	#DIV/0!
Loss incident Rate			0.0
Near-Miss Rate			0.0
Employee Health and Safety (H&S) Suggestion Rate			0.0
H&S Work-Order Closure Rate			0.0

Significant Achievements and Milestones

Describe any significant achievements/milestones accomplished by your participants during the past year.

Participant Information

Participant
[Insert Participant Name Here]

OSHA 300 Log Totals for	
Year	CY 2014

G	H	I	J	K	L	M:1	M:2	M:3	M:4	M:5	M:6
0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Total Hours Worked	0.0
---------------------------	-----

Total Employees	
------------------------	--

Measure	Current Year	Baseline	Change
TCIR	#DIV/0!	0.0	#DIV/0!
DART	#DIV/0!	0.0	#DIV/0!
Loss incident Rate			0.0
Near-Miss Rate			0.0
Employee Health and Safety (H&S) Suggestion Rate			0.0
H&S Work-Order Closure Rate			0.0

Significant Achievements and Milestones

Describe any significant achievements/milestones accomplished by your participants during the past year.

Appendix G: Administrator Verification Process Form

Electronic File Name: VADOC Administrator Verification Process Form 9-5-17.xlsx

Tab 1: Cover Page

Tab 2: Overview

Tab 3: 1 – Summary Page

Tab 4: Stage I

Tab 5: Stage II

Tab 6: Stage III

DOLI VADOC Challenge
Stage I Administrator Verification Form

Virginia
Department of
Labor and
Industry and
VADOC
Challenge

Administrator Verification Form



DOLI VADOC Challenge Stage I Administrator Verification Form

Virginia Department of Labor and Industry & Department of Corrections Challenge Summary of Verification Process

This form is to be completed by Administrators

Included in this spreadsheet are:

- Tab 1. Cover Page
- Tab 2. Overview
- Tab 3. 1 - Summary Page - No information is to be put in this tab
- Tab 4. Stage I Check
- Tab 5. Stage II Check
- Tab 6. Stage III Check

To access these worksheets, please click on the tabs at the bottom of this form.

In the space provided below, please describe the methods you have used to verify the actions and outcomes of the Challenge Pilot sites for which you are the Administrator. For example, methods might include:

1) Review of draft/final documents, 2) Monthly or quarterly conference calls, 3) Site visits, 4) Email correspondence

DOLI VADOC Challenge Stage I Administrator Verification Form

OCTPS Summary Status Report

Participant Name	Administrator Name	Report Period	
		Time Period	
		Year	

Stage I

Administrator Summary		Mgt. Leadership and Worker Involvement		Worksite Analysis		Hazard Prevention and Control		Safety and Health Training		Documentation	
Status	#	%	#	%	#	%	#	%	#	%	
Stage I Outcome Completion	No Action Taken	17	100%	10	100%	11	100%	7	100%	16	100%
Status	In Progress	0	0%	0	0%	0	0%	0	0%	0	0%
	Completed	0	0%	0	0%	0	0%	0	0%	0	0%
	Total Outcomes	17	100%	10	100%	11	100%	7	100%	16	100%

Stage I Status Summary No Action Taken/In Progress

Stage II

Administrator Summary		Mgt. Leadership and Worker Involvement		Worksite Analysis		Hazard Prevention and Control		Safety and Health Training		Documentation	
Status	#	%	#	%	#	%	#	%	#	%	
Stage II Outcome Completion	No Action Taken	17	100%	15	100%	16	100%	2	100%	12	100%
Status	In Progress	0	0%	0	0%	0	0%	0	0%	0	0%
	Completed	0	0%	0	0%	0	0%	0	0%	0	0%
	Total Outcomes	17	100%	15	100%	16	100%	2	100%	12	100%

Stage II Status Summary No Action Taken/In Progress

Stage III

Administrator Summary		Mgt. Leadership and Worker Involvement		Worksite Analysis		Hazard Prevention and Control		Safety and Health Training		Documentation	
Status	#	%	#	%	#	%	#	%	#	%	
Stage III Outcome Completion	No Action Taken	17	100%	7	100%	3	100%	3	100%	5	100%
Status	In Progress	0	0%	0	0%	0	0%	0	0%	0	0%
	Completed	0	0%	0	0%	0	0%	0	0%	0	0%
	Total Outcomes	17	100%	7	100%	3	100%	3	100%	5	100%

Stage III Status Summary No Action Taken/In Progress

DOLI VADOC Challenge Stage I Administrator Verification Form

Participant Name	Coordinator Name	Report Period	
	[Enter Coordinator Name]	Time Period	[Enter Time Period]
		Year	[Enter Year]

Stage I -- 1. Management Leadership and Employee Involvement		
1. Management Commitment Outcomes Achieved		Status
1	Top management, in conjunction with the employees, have developed, issued, and communicated an acceptable Safety and Health Mission Statement.	No Action Taken
2	Top management has developed, issued, and communicated an acceptable Safety and Health Policy Statement	No Action Taken
3	Top management demonstrates visible safety and health leadership	No Action Taken
4	Management has committed adequate resources and has begun integrating safety and health into other aspects of planning	No Action Taken
5	Management has developed and communicated annual safety and health goals and objectives that are clear, attainable, measurable, and significant	No Action Taken
6	Management has clarified lines of communication and encourages all workers to contact top management on safety and health issues	No Action Taken
7	Management has clearly identified every employee's and contract worker's responsibility for safety and health	No Action Taken
8	Site has an acceptable safety and health Accountability Plan that includes:	No Action Taken
9	a. Safety and health responsibilities and accountability are included in the job descriptions and performance plans of, at a minimum, managers, mid-level supervisors, and designated Safety and Health Staff	No Action Taken
	b. Authority provided to persons responsible for achieving safety and health goals	No Action Taken
2. Employee Involvement - Outcomes Achieved		
1	Site has conducted a baseline employee safety and health perception survey	No Action Taken
2	Site has reviewed the results of the employee safety and health perception survey and had begun to make changes in response to the findings	No Action Taken
3	Site has informed all workers of their rights under the OSH Act, of the site's participation in Challenge, and of the fundamental principles of VPP	No Action Taken
4	Site has established a few key teams that represent different sectors of the site's staff. Teams have established goals and missions that will effectively contribute to safety and health, such as addressing a particular trend, spreading the word about Challenge, acting as one avenue to accept employee reports of hazards, etc.	No Action Taken

DOLI VADOC Challenge Stage I Administrator Verification Form

3. Contract Worker Coverage - Outcomes Achieved		
1	Site has developed a plan for providing contractors high-quality safety and health protection equal to that received by employees	No Action Taken
2	Site has required all contractors and contract workers to adhere to the site's safety and health rules	No Action Taken
3	The site has a system of contractor oversight to ensure that contractors have systems and processes for ensuring the timely identification, correction, and tracking of uncontrolled hazards in contractors' work areas	No Action Taken
Stage I – 2. Worksite Analysis		
1. Baseline Safety and Industrial Hygiene Hazard Analysis - Outcomes Achieved		
1	Site has conducted an acceptable Baseline Safety and Health Industrial Hygiene Hazard Analysis	No Action Taken
2	Site has conducted a repeat baseline study if justified by significant change (i.e.: changes in processes, equipment, and hazard controls, etc.)	No Action Taken
3	Repeat baseline survey only if warranted by significant changes (i.e.: changes in processes, equipment, hazard controls, etc.)	No Action Taken
2. Hazard Analysis of Routine Jobs, Tasks, and Processes - Outcomes Achieved		
1	No Outcomes Required	N/A
3. Pre-Use Analysis - Outcomes Achieved		
1	No Outcomes Required	N/A
4. Industrial Hygiene (IH) Program - Outcomes Achieved		
1	Site has conducted a baseline study based on this IP Program plan, including a chemical inventory	No Action Taken
5. Routine Self-Inspections - Outcomes Achieved		
1	No Outcomes Required	N/A
6. Hazard Reporting System for Employees - Outcomes Achieved		
1	No Outcomes Required	N/A
7. Accident Investigations - Outcomes Achieved		
1	Site has developed a documented system and procedures for investigations of accidents	No Action Taken
2	If applicable, site had conducted acceptable investigations of accidents	No Action Taken

DOLI VADOC Challenge Stage I Administrator Verification Form

8. Trend Analysis - Outcomes Achieved		
1	Site had conducted a trend analysis of injury and illness history at the site for the previous three complete calendar years	No Action Taken
2	Site has, at a minimum, begun developing a plan for conducting additional trend analyses of other safety and health related information	No Action Taken
Stage I – 3. Hazard Prevention and Control		
1. Certified Professional Resources - Outcomes Achieved		
1	No Outcomes Required (unless outside resources are used to conduct baseline hazard analysis)	N/A
2. Hazard Elimination and Control Methods - Outcomes Achieved		
1	Site has begun identifying and selecting the most appropriate hazard elimination and control methods for the most serious known hazards at the site that were identified in this stage through the baseline hazard analysis, accident investigations, and/or trend analysis	No Action Taken
2	Hazard controls follow the hierarchy of controls	No Action Taken
3	Top priority hazards are controlled before progressing to Stage II (For hazards requiring long-term abatement projects such as new ventilation systems, interim protection is acceptable)	No Action Taken
3. Hazard Control Programs - Outcomes Achieved		
1	Site has met all minimum requirements regarding the establishment of hazard control programs required by OSHA standards	No Action Taken
4. Occupational Health Care Program - Outcomes Achieved		
1	Site has conducted thorough review of OSHA 200/300 logs, insurance claims, accident investigations, and ensures that all records are in order	No Action Taken
2	Site employees have access to health services, as needed, based on results of the baseline safety and health analysis including physician and emergency medical care (See also Emergency Preparedness Response)	No Action Taken
5. Preventative Maintenance of Equipment -Outcomes Achieved		
1	The site has an inventory of equipment that requires preventive maintenance	No Action Taken
6. Tracking of Hazard Correction - Outcomes Achieved		
1	Site had developed and established a hazard tracking system	No Action Taken
7. Emergency Preparedness and Response - Outcomes Achieved		
1	Site has provided emergency physician and medical care	No Action Taken
2	Site has established and communicated written emergency procedures	No Action Taken
3	Site has trained employees and provided first aid and CPR for each shift or an equally effective alternative	No Action Taken

DOLI VADOC Challenge

Stage I Administrator Verification Form

Stage I –4. Safety and Health Training	
1. Safety and Health Training - Outcomes Achieved	
1 Training provided complies with specified guidelines	No Action Taken
2 Managers, supervisors, non-supervisory employees, and contractors are:	No Action Taken
3 a. Aware of their rights under the OSH Act, what Challenge is all about, and fundamental VPP Principles	No Action Taken
4 b. Familiar with the hazards onsite; how to recognize hazardous conditions; signs and symptoms of workplace-related illnesses; protective measures; safe work procedures; and the function, use, and maintenance of specific PPE they are required to wear	No Action Taken
5 c. Familiar with emergency evacuation procedures and their specific responsibilities for each type of emergency	No Action Taken
6 Managers and supervisors have specific knowledge of their safety and health roles and responsibilities and how they can carry these out including knowledge of change strategies they can use to help improve the safety and health culture in the total site	No Action Taken
7 Designated staff who have assigned safety and health responsibilities and have the knowledge and skills they need to perform the tasks assigned to them	No Action Taken
Stage I – Documentation	
1. Required Documentation	
1 Vision and policy statements	No Action Taken
2 Accountability plan	No Action Taken
3 Budget documents showing allocated resources for Safety and Health	No Action Taken
4 OSHA 300 logs	No Action Taken
5 Insurance claim forms	No Action Taken
6 Accident reports	No Action Taken
7 Baseline hazard analysis results including IH reports	No Action Taken
8 Written hazard control programs	No Action Taken
9 Accident investigation forms and reports	No Action Taken
10 Written contractor policies for this stage	No Action Taken
11 Results of baseline assessment of workplace safety and health practices and plan for addressing necessary changes	No Action Taken
12 Trend analysis results	No Action Taken
13 Hazard correction action plan	No Action Taken
14 Hazard correction tracking system	No Action Taken
15 PM Inventory	No Action Taken
16 Written Emergency Procedures	No Action Taken

DOLI VADOC Challenge Stage I Administrator Verification Form

Participant Name		Coordinator Name		Report Period	
		[Enter Coordinator Name]		Time Period	[Enter Time Period]
				Year	[Enter Year]
Stage II -- 1. Management Leadership and Employee Involvement					
1. Management Commitment Outcomes Achieved					Status
1	In addition to top management, managers and supervisors are also demonstrating visible safety and health leadership				No Action Taken
2	Management has committed adequate resources to meet the safety and health outcomes required for Stage II				No Action Taken
3	Management continues to improve and strengthen the integration of safety and health into existing planning processes				No Action Taken
4	Management, in conjunction with the employees, continues to develop and communicate annual safety and health goals and objectives that are clear, attainable, measurable, and significant				No Action Taken
5	Employees are communicating with management more openly on safety and health issues				No Action Taken
6	Managers, supervisors, and non-supervisory employees can clearly describe their responsibilities and accountability for safety and health at the site				No Action Taken
7	Persons identified as being accountable for meeting safety and health goals believe they have adequate authority and support to do their job. Other workers recognize their authority and are beginning to support them				No Action Taken
8	Managers, supervisors, and specific safety and health staff are monitored and evaluated on their safety and health performance; receive feedback, prepare corrective action plans as needed; receive rewards and recognition for good performance; and bear consequences for poor performance				No Action Taken
9	Safety and health responsibilities and accountability are included in the job descriptions and performance plans of managers, mid-level supervisors, and designated safety and health staff				No Action Taken
10	Site has an acceptable disciplinary plan for non-supervisory employees and contract workers which identifies the consequences for meeting or failing to meet safety and health expectations and self-inspections				No Action Taken
2. Employee Involvement - Outcomes Achieved					
1	The site can demonstrate significant improvement in its safety and health practices in terms of employee involvement, attitudes, and hazard-reporting; their compliance with rules and standards; and their acceptance of safety and health roles and responsibilities				No Action Taken
2	Increased activity on and/or additional safety and health teams are formed with greater employee participations				No Action Taken
3	More employees are actively participating in safety and health activities at the site, together with designated safety and health staff (i.e.: in performing hazard analyses, accident and near miss investigations, and self-inspections)				No Action Taken
4	Site has incorporated into its orientation training for new employees all the information that is required to be shared with employees (i.e.: rights under the occupational Safety and Health Act, the sites participation in challenge, and the fundamental principles of VPP				No Action Taken

DOLI VADOC Challenge Stage I Administrator Verification Form

3. Contract Worker Coverage - Outcomes Achieved	
1 Site routinely uses safety and health factors, such as injury and illness rates, in selecting and overseeing contractors	No Action Taken
2 Site can demonstrate a significant improvement in its system for the timely identification, correction, and tracking of uncontrolled hazards in contractors' work areas	No Action Taken
3 Site has an established process to monitor contractor compliance and to remove contractors for safety or health violations	No Action Taken
Stage II -- 2. Worksite Analysis	
1. Baseline Safety and Industrial Hygiene Hazard Analysis - Outcomes Achieved	
1 No Outcomes Required	N/A
2. Hazard Analysis of Routine Jobs, Tasks, and Processes - Outcomes Achieved	
1 Site has conducted acceptable hazard analyses of routine jobs, tasks, and processes	No Action Taken
3. Hazard Analysis of Significant Changes - Outcomes Achieved	
1 No Outcomes Required	N/A
4. Pre-Use Analysis - Outcomes Achieved	
1 No Outcomes Required	N/A
5. Industrial Hygiene (IH) Program - Outcomes Achieved	
1 Site has developed a written IH Program	No Action Taken
2 Site has begun implementing controls for hazards identified in the initial baseline study	No Action Taken
3 Site has established and implemented sampling frequencies	No Action Taken
4 Site has conducted the necessary IH surveys	No Action Taken
6. Routine Self-Inspections - Outcomes Achieved	
1 Site has developed a documented routine self-inspection system	No Action Taken
2 Acceptable routine self-inspections have been conducted, at a minimum, by designated safety and health staff	No Action Taken
3 The entire worksite including contractor work areas has been inspected at least twice a year	No Action Taken
7. Hazard Reporting System for Employees - Outcomes Achieved	
1 Site has developed and begun implementing a documented hazard reporting system	No Action Taken
8. Accident Investigations - Outcomes Achieved	
1 Site has expanded system and process developed in Stage I for accident investigation to include near-misses	No Action Taken
2 If applicable, site has conducted acceptable investigations of accidents and near-misses	No Action Taken

DOLI VADOC Challenge

Stage I Administrator Verification Form

9. Trend Analysis - Outcomes Achieved		
1	Site has conducted another acceptable trend analysis of injury and illness history at the site if a year has gone by since the initial analysis	No Action Taken
2	Site has conducted an acceptable trend analysis of the other safety and health information (in addition to injury and illness history)	No Action Taken
Stage II – 3. Hazard Prevention and Control		
1. Certified Professional Resources - Outcomes Achieved		
1	Site has identified certified safety and health professionals and other licensed health care professionals whom employees and contract workers can access for onsite or offsite services	No Action Taken
2. Hazard Elimination and Control Methods - Outcomes Achieved		
1	Site has begun identifying and selecting the most appropriate hazard elimination and control methods for hazards identified in this Stage through all previous methods, and now also through, hazard analysis of routine jobs, self-inspections, near-miss investigations, and employee reports of hazards	No Action Taken
2	Hazard controls follow the hierarchy of controls. (Engineering, administrative, work practice, PPE)	No Action Taken
3	Top priority hazards are controlled before progressing to Stage III (For hazards requiring long-term abatement projects, such as new ventilation systems, interim protection is acceptable)	No Action Taken
3. Hazard Control Programs - Outcomes Achieved		
1	Site has met all minimum requirements regarding the establishment of hazard control programs required by OSHA standards	No Action Taken
2	Site continues to train all workers on these programs, as needed	No Action Taken
4. Tracking of Hazard Correction - Outcomes Achieved		
1	Site continues to implement and improve the hazard tracking system	No Action Taken
5. Preventative Maintenance of Equipment -Outcomes Achieved		
1	The site has established and is following an acceptable preventive maintenance schedule	No Action Taken
6. Occupational Health Care Program - Outcomes Achieved		
1	Site continues to provide access to licensed health care professionals	No Action Taken
2	Site continues to provide access to health services, as needed, based on the results of the baseline safety and health analysis	No Action Taken
3	Site continues to provide access to physician care and emergency medical care for all shifts within a reasonable time and distance. (See also Emergency Preparedness and Response)	No Action Taken

DOLI VADOC Challenge

Stage I Administrator Verification Form

7. Emergency Preparedness and Response - Outcomes Achieved		
1	Site continues to communicate the written procedures for responding to all types of emergencies that meet VPP requirements and has begun improving the emergency procedures established in Stage I	No Action Taken
2	Site has conducted at least one evacuation drill and has assessed how well the procedures worked	No Action Taken
3	Site continues to provide Emergency Medical Services	No Action Taken
4	Site has made available to each shift a sufficient number of employees trained in first aid and CPR, or an alternative at least as effective	No Action Taken
5	Site has established Emergency Response Team	No Action Taken
Stage II –4. Safety and Health Training		
1. Safety and Health Training - Outcomes Achieved		
1	Training provided complies with guidelines established in Stage I	No Action Taken
2	Managers, supervisors, non-supervisory employees, and contract workers are aware of their safety and health related rights and have the knowledge and skills they need to perform their safety and health roles and responsibilities	No Action Taken
Stage II – Documentation		
1. Required Documentation		
1	All documentation required in Stage I	No Action Taken
2	Job Hazard Analysis forms and records	No Action Taken
3	Routine self-inspection forms and records	No Action Taken
4	Employee Hazard reporting forms	No Action Taken
5	Minutes, charters and mission statements of safety and health teams	No Action Taken
6	Contractor Program - Updated to include additional policies established in this stage	No Action Taken
7	Trend analysis results	No Action Taken
8	Written IH Program - And any sampling results since the baseline	No Action Taken
9	Documentation showing implementation of hazard controls and their effectiveness (i.e., ventilation studies, PPE purchases, machine guarding purchases)	No Action Taken
10	Written Preventive Maintenance schedule and system	No Action Taken
11	Emergency Procedures - updated since Stage I	No Action Taken
12	Training matrix and records	No Action Taken

DOLI VADOC Challenge Stage I Administrator Verification Form

Participant Name	Coordinator Name	Report Period	
	[Enter Coordinator Name]	Time Period	Enter Time Period]
		Year	[Enter Year]

Stage III – 1. Management Leadership and Employee Involvement		
1. Management Commitment Outcomes Achieved		Status
1	All employees and contract workers are aware of management's and employees' safety and health vision for the site	No Action Taken
2	Management overall demonstrate at least minimally effective, visible leadership with respect to the site's safety and health program	No Action Taken
3	Top management accepts ultimate responsibility for safety and health in the organization even if safety and health functions are delegated to others	No Action Taken
4	The individuals assigned responsibility for safety and health have the authority to ensure that hazards are corrected or necessary changes to the safety and health management system are made	No Action Taken
5	Management has set aside and promotes the use of adequate and dedicated resources for safety and health	No Action Taken
6	The written safety and health management system is at least minimally effective in addressing the scope and complexity of the hazards at the site	No Action Taken
7	Safety and health responsibilities and accountability are included in the job descriptions and performance plans of non-supervisory employees and contract workers in addition to those of managers, mid-level supervisors, and designated safety and health staff	No Action Taken
8	Site has an acceptable plan for conducting an annual evaluation of the total site's safety and health management system	No Action Taken
2. Employee Involvement - Outcomes Achieved		
1	Employees support the site's participation in the Challenge process	No Action Taken
2	Employees feel free to participate in the safety and health management system without fear of discrimination or reprisal	No Action Taken
3	Employees have access to results of self-inspections, accident investigations, personal medical records, and personal sampling data upon request	No Action Taken
4	Employees are involved in the safety and health management system in at least three meaningful, constructive ways in addition to the exercise of their rights to report a hazard	No Action Taken

DOLI VADOC Challenge

Stage I Administrator Verification Form

3. Contract Worker Coverage - Outcomes Achieved		
1	Site can demonstrate a significant rise in the quality of safety and health protection given to contract workers as reported in employee interviews	No Action Taken
2	Site can demonstrate a significant rise in the level of compliance by contract workers with the site's safety and health rules (e.g.: less hazards in contractor work areas, fewer disciplinary actions and fewer penalties)	No Action Taken
3	Contractors support the site's participation in the Challenge process	No Action Taken
4	The site's contractor program covers the prompt correction and control of hazards in the event that the contractor fails to correct or control such hazards	No Action Taken
5	The contract oversight is minimally effective considering the nature of the site including: equal safety and health protection provided to contractors, rise in the level of compliance by contract workers with the site's safety and health rules, safety and health performance included in the bidding process, monitoring and correction of hazards in contractor's work area, and enforcement of penalties including removal for safety and health violations	No Action Taken
Stage III -- 2. Worksite Analysis		
1. Worksite Analysis - Outcomes Achieved		
1	Site has conducted another baseline survey, if applicable	No Action Taken
2	Site has at least a minimally effective hazard analysis system in place for routine operations, non-routine operations, and significant changes	No Action Taken
3	Site has at least a minimally effective system for performing safety and health inspections -(i.e.: identifies hazards associated with normal operations)	No Action Taken
4	Site has at least a minimally effective system for conducting accident/incident investigations including near-misses	No Action Taken
5	Site has at least a minimally effective means for employees to report hazards and have these hazards addressed	No Action Taken
6	The site has at least a minimally effective means for identifying and assessing trends	No Action Taken
7	Site has been at least minimally effective at identifying and documenting the common safety and health hazards associated with the site (i.e.: those found in OSHA regulations, building standards, etc., and for which existing controls are well known)	No Action Taken
Stage III -- 3. Hazard Prevention and Control		
Hazard Prevention and Control - Outcomes Achieved		
1	Site has at least minimally effective controls to prevent exposing employees to hazards	No Action Taken
2	Site has at least a minimally effective tracking system that results in hazards being controlled	No Action Taken
3	Site has at least minimally effective written procedures for emergencies	No Action Taken

DOLI VADOC Challenge

Stage I Administrator Verification Form

Stage III --4. Safety and Health Training	
1. Safety and Health Training - Outcomes Achieved	
1 Training provided complies with specified guidelines	No Action Taken
2 Site provides at least minimally effective training to educate employees regarding the known hazards of the site and their controls	No Action Taken
3 Site continues to provide at least minimally effective training that meets its specific safety and health needs in this stage	No Action Taken
Stage III -- Documentation	
1. Required Documentation	
1 All documentation from Stages I and II completed and updated	No Action Taken
2 Hazard analysis form showing analysis of non-routine tasks or significant changes	No Action Taken
3 Pre-use analysis forms and results	No Action Taken
4 Annual self-evaluation of the site's safety and health management system	No Action Taken
5 Follow-up cultural survey and results	No Action Taken

Appendix H: Sample Letters

Electronic File Name: VADOC Sample Letters 9-5-17.docx

Section 1: Administrator Sample Letter of Commitment

Section 2: Participant Sample Statement of Commitment

Section 3: Administrator Acceptance Letter

Section 4: Participant Acknowledgement Letter

Section 5: Stage I Completion Acknowledgement Letter

Section 6: Stage II Completion Acknowledgement Letter

Section 7: Stage III Completion Acknowledgement Letter

Section 8: Sample Letter of Assurance

Section 9: Site Sample Statement of Commitment

DOLI and VADOC Challenge

Sample Letters and Templates



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Section 1 – Administrator Sample Letter of Commitment

Date

VOSH Challenge Coordinator
Virginia Occupational Safety and Health
Voluntary Protection Program
3013 Peters Creek Road NW
Roanoke, VA 24019

Dear **Name**:

I am writing to inform you of **[Insert Name of person]** intent to participate in the VADOC Challenge Program as a Challenge Administrator. We have reviewed the program and believe **[Insert Name]** meets the Administrator criteria you are seeking.

I can assure you that the Virginia Department of Corrections is committed to assisting our potential candidates in progressing through the three Challenge Stages towards health and safety excellence.

Attached please find our: (if submitting at this time)

Administrator Application
Coordinator(s) Application
Candidate Package(s)

Should you have any questions or need additional information, please contact:

VOSH Challenge Coordinator
Virginia Occupational Safety and Health
Voluntary Protection Program
3013 Peters Creek Road NW
Roanoke, VA 24019

The Virginia Department of Corrections looks forward to working together to bring the principles and benefits of VPP to more facilities throughout Virginia.

Sincerely,

VADOC Representative Name
Title

Section 2 – Participant Sample Statement of Commitment

VADOC CHALLENGE PARTICIPANT APPLICATION STATEMENT OF COMMITMENT

Date

VOSH Challenge Coordinator
Virginia Occupational Safety and Health
Voluntary Protection Program
3013 Peters Creek Road NW
Roanoke, VA 24019

Dear **Name**:

In our mission to create a model safe and healthful workplace, we at **Insert Name of VADOC Challenge Participant Applicant**, value our employees as our greatest assets and we are committed to providing a safe workplace for them. We assure you that **Insert Name of Challenge Participant Applicant** is committed to successfully completing the Challenge Program and developing an effective safety and health management program.

We will provide the necessary data and documentation to our Challenge Administrator, **Insert the Administrator Name along with the Organization Name**, and keep them informed of our progress. We also will involve our employees in the Challenge Pilot Program. We are excited to be involved in voluntary efforts with all involved and look forward to reaching our goals.

Attached please find our Challenge Participant Application. Should you have any questions or need additional information, please contact me at **Challenge Participant Applicant Telephone Number** or **Challenge Participant Applicant Email Address**.

Sincerely,

Challenge Participant Applicant Name
Challenge Participant Applicant Title (highest site official)
Challenge Participant Applicant Facility Name

Section 3 – Administrator Acceptance Letter

Date

Administrator Contact

Company

Street

City, State Zip

Dear **[Insert Administrator Contact Name]**:

VOSH has received and reviewed your application package for participation as an Administrator in the VADOC Challenge Program. I am pleased to accept your application and welcome you into the program. It is obvious that [insert Administrator name] is committed to worker safety and health, and I am confident that you possess the skills and willingness needed to assist participating candidates as they progress through the three Challenge Stages.

The next step is for you to provide additional information about your candidates. This includes their general information, baseline information, and statements of commitment as outlined in the Candidate Package. Please submit this information to:

VOSH Challenge Coordinator
Virginia Occupational Safety and Health
Voluntary Protection Program
3013 Peters Creek Road, NW
Roanoke, VA 24019

The VOSH VPP Office will review this information. All accepted candidates will receive letters acknowledging their participation in Challenge.

Thank you for taking on this important responsibility. By partnering with VOSH and by participating in the VADOC Challenge Program, you are helping to ensure a safe and healthy workplace for all Virginia workers.

Sincerely,

Name

Section 4 – Participant Acknowledgement Letter

Date

Participant Contact Name
VADOC Facility
Street
City, State, Zip

Dear [insert Contact Name]:

Welcome to the VADOC Challenge Program. We have reviewed the information that your Challenge Administrator, **[insert administrator name]**, submitted to VOSH, and we are pleased to accept you into the ranks of VADOC Challenge participants.

In our many years of working cooperatively with worksites such as yours, we at VOSH have learned the value of a systems approach to managing worker safety and health. An effective safety and health management system can save lives, reduce injuries and illnesses, and promote cooperation and communication in the workplace. Worksites that implement effective employee protection can increase profits by reducing the costs associated with occupational injuries and illnesses.

Developing and implementing an effective system can be an arduous task; however, it does not need to be tackled all at once. By following VADOC Challenge's three Stages, positive changes will be apparent directly. By staying the course, you and your employees can look forward to the many benefits enjoyed by worksites, both large and small, that operate successful safety and health management systems.

As your facility progresses through the VADOC Challenge Stages, your Administrator will keep VOSH informed of your progress. During this period, your facility remains subject to VOSH programmed inspections and to an investigation following any employee complaints, fatalities, or catastrophes. I urge you to set your sights on applying to the Voluntary Protection Programs STAR after completing the Challenge Stages. Workplaces that participate as VPP STAR worksites enjoy a range of benefits, including removal from VOSH programmed inspection lists.

The efforts of achieving excellence in worker safety and health are great and the rewards substantial. You are on your way. I wish you and your employees many successes.

Sincerely,

[Name]
Title

Section 5 – Stage I Completion Acknowledgement Letter

Date

Participant Contact Name

VADOC Facility

Street Address

City, State, Zip

Dear [Contact Name]:

VOSH has received confirmation from **[identify Administrator]**, your VADOC Challenge Administrator, that your site has successfully completed Stage I of the Challenge Pilot Program.

On behalf of our Agency, let me congratulate you on your site on this accomplishment. It is gratifying to learn about your commitment to improving worker safety and health at your site and your employees growing involvement in the process.

I look forward to your facility proceeding successfully through Stages II and III. It is our hope that you will apply to the Voluntary Protection Programs (VPP) as a STAR participant upon completion of the VADOC Challenge Program.

We at VOSH look forward to hearing from your site's Administrator about your continuing achievement. As you work through the next Stages, please continue to be aware that your facility remains subject to programmed inspections and an investigation of any employee complaints, fatalities, or catastrophes.

You are one Stage closer to achieving excellence in worker safety and health. Keep up the good work!

Sincerely,

[Name]

Title

Section 6 – Stage II Completion Acknowledgement Letter

Date

Participant Contact Name
Company
Street Address
City, State, Zip

Dear [Contact Name]:

I was delighted to learn from your VADOC Challenge Administrator, [identify Administrator], that your site has successfully completed Stage II of the DOC Challenge Program. I am very aware of the effort required to complete this Stage. On behalf of the Virginia Occupational Safety and Health (VOSH), I extend congratulations to you and to all the employees who have made this achievement possible.

I am particularly impressed by your site's success in [highlight a specific accomplishment from the latest progress report]. I hope you have come to appreciate that by taking the many small, incremental steps built into VADOC Challenge, you are gradually creating a broad system that will more effectively protect the site's employees.

As you proceed through Stage III, you and your employees can be proud of the steps that are being taken to achieve excellence in worker safety and health. Your actions are helping to ensure that you all will return home healthy and safe at the end of each workday. VOSH's responsibility toward you and your employees continues, so let me remind you that your facility remains subject to programmed inspections and an investigation of any employee complaints, fatalities, or catastrophes.

Your Challenge Administrator will keep VOSH informed of your progress. I look forward to hearing that your site has successfully completed Stage III. I urge you to give serious thought to continuing your partnership with VOSH. By applying and qualifying for Voluntary Protection Programs (VPP) STAR certification, this recognition will confirm your facility as a model of safety and health excellence in your industry and your community. During this journey, your site will enjoy enhanced prestige, respect, and other benefits accorded VPP companies.

My best wishes for your continued success as you proceed toward completion of the VADOC Challenge Program.

Sincerely,

[Name]
Title

Section 7 – Stage III Completion Acknowledgement Letter

Date

Participant Contact Name
Company
Street Address
City, State, Zip

Dear [Contact Name]:

[Administrator name], your VOSH Challenge Administrator, has informed me of your successful completion of Stage III of the VADOC Challenge Program. Your site is among the first correctional facilities in the nation to reach this milestone achievement. Please accept my sincerest congratulations.

I was especially interested and gratified to read about your experience [highlight a specific accomplishment identified in the latest progress report].

Having successfully completed all three Stages of the VADOC Challenge Program, I urge you to apply for the Voluntary Protection Programs' (VPP) STAR certification. Until that time, the site remains subject to programmed inspections. As you know, all workplaces under VOSH jurisdiction are subject to an investigation of any employee complaints, fatalities, or catastrophes.

I urge you to continue your cooperative relationship with VOSH. Upon receiving your VPP application, we will evaluate your safety and health management system and the site's performance. If it is determined that your worksite meets the requirements of VPP STAR, it will be my pleasure to welcome you to VPP's prestigious ranks.

Thank you for participating in VOSH's exciting new effort to protect Virginia's workers. The most effective workplace protection grows from voluntary and cooperative efforts such as yours. Let us continue working together to help ensure the safety and health of Virginia's workers, the backbone of our state and its most valuable resource.

Sincerely,

[Name]
Title

Section 8 – Sample Site letter of Assurance

VADOC site name agrees to comply with the following items as a Virginia VADOC Challenge Program Participant:

1. Compliance

We will comply with the Occupational Safety and Health Act (OSHA Act) and correct, in a timely manner, all hazards discovered through self-inspections, employee notifications, accident investigations, VOSH onsite reviews, process hazard reviews, annual evaluations, or any other means.

2. Correction of Deficiencies

We will promptly address safety and health deficiencies related to compliance with VOSH requirements identified during our progress to complete the VADOC Challenge program.

3. Employee Support

Our employees support the VADOC Challenge application. Management's assurance of employee support will be verified by the VOSH Challenge Coordinator through documentation and communications provided by the Participant and those individuals assisting the site in its pursuit of VADOC Challenge.

4. Challenge Elements

Management commits to implementing and maintaining the requirements of the Challenge elements and the overall VADOC Challenge program.

5. Orientation

Employees, including newly hired or transferred employees, and contract employees, will receive orientation on the VADOC Challenge, including employee rights under VADOC Challenge and under the OSHA Act.

6. Non-Discrimination

We will protect employees given safety and health duties as part of our safety and health program from discriminatory actions resulting from their carrying out such duties, as described in Section 40.1-51.2:1 of the Code of Virginia and protect employees who exercise their rights.

7. Employee Access

Employees will have access to the results of self-inspections, accident investigations, and other safety and health data upon request.

8. Documentation

We will maintain our safety and health program information and make it available for VOSH review to determine initial and continued approval to Challenge. This information will include all documentation used to support the site's VADOC Challenge effort.

9. Quarterly and Annual Submissions

We will submit the updated VADOC Challenge Tracking Participant Spreadsheet (OCTPS) as required to the assigned program Coordinator or Administrator on a timely quarterly basis.

10. Organizational Changes

Whenever significant organizational changes occur, we will provide the VPP Manager, within 60 days, a new Letter of Assurance by site management.

Warden's Signature		5/23/2018
Print Name		
Assistant Warden's Signature		5/23/2018
Print Name		

Section 9 – Statement of Commitment

VADOC Challenge Participant Sample Statement of Commitment

Date

VOSH VPP Challenge Coordinator
Virginia Occupational Safety and Health
Voluntary Protection Program
3013 Peters Creek Road, NW
Roanoke, VA 24019

Dear **Name**:

In our mission to provide a safe and healthful workplace, we, **Insert Name of Challenge Participant Applicant**, value our employees as our greatest assets and we are committed to providing an exemplary workplace for them. We assure you that **Insert Name of Challenge Participant Applicant** is committed to successfully completing the VADOC Challenge Program and developing an effective safety and health management program.

We will provide the necessary data and documentation to our VADOC Challenge Administrator, **Insert the Administrator Name along with the Organization Name**, and keep them informed of our progress. We also will involve our employees in the VOSH Challenge Program. We are excited to be involved in voluntary efforts with all involved and look forward to reaching our goals.

Attached please find our Challenge Participant Application, Statement of Commitment, and Letter of Assurance. Should you have any questions or need additional information, please contact me at **Challenge Participant Applicant Telephone Number** or **Challenge Participant Applicant Email Address**.

Sincerely,

Insert Challenge Participant Applicant Name
Insert Challenge Participant Applicant Title
Insert Challenge Participant Applicant