
MIOSHA

Consultation Education and Training (CET) Division
Michigan Occupational Safety and Health Administration (MIOSHA)
Department of Labor and Economic Opportunity (LEO)

DIVISION INSTRUCTION

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- I. Purpose. The purpose of this instruction is to establish the Michigan Challenge Program's (MCP) policies and procedures for the Consultation Education and Training (CET) Division.
- II. Scope. This instruction applies to the CET Division.
- III. References.
 - A. Division Instruction CET-ADM-08-1, [Award Instruction](#), as amended.
 - B. Executive Office of the President, Office of Management and Budget, [North American Industry Classification System \(NAICS\) Manual](#), 2002.
 - C. Michigan Occupational Safety and Health Administration's [Strategic Plan 2019-2023](#).
 - D. MIOSHA Safety and Health Standard Part 11. /R408.22101 et seq., [Recording and Reporting of Occupational Injuries and Illnesses](#).
 - E. Occupational Safety and Health Administration [Recommended Practices for Safety and Health Programs](#).
 - F. [OSHA's Small Business Handbook](#)
- IV. Distribution. MIOSHA Staff, Federal OSHA; S-drive Accessible; MIOSHA Messenger; and Internet Accessible.
- V. Cancellations. All previous versions of this division instruction.
- VI. Next Review Date. This instruction will be reviewed in 3 years from date of issuance.
- VII. History. History of previous versions include:

CET-ADM-07-1R3, January 23, 2017
CET-ADM-07-1R2, October 31, 2012
CET-ADM-07-1R1, April 17, 2009
CET-ADM-07-1, February 15, 2007
- VIII. Contact. [Barrington Carr](#), Supervisor, CET Division
- IX. Originator. Nella Davis-Ray, Director, CET Division
- X. Background. Historically, MIOSHA has assisted employers with their Safety and Health Management System (SHMS) through a Safety Development Program. This program was amended in 2001 to include an occupational health component and was renamed the Safety and Health Development Program. The name was changed to the MCP in 2006 to adopt a similar Federal Occupational Safety and Health Administration (OSHA) Program. The MCP is intended to help in the development of an effective Safety and Health Program (SHP). The MCP is a stepping-stone toward achieving CET awards or participation in cooperative recognition programs.

Employers that participate in the MCP are making an investment in workplace safety and health through the development and implementation of a SHP, consistent with the Occupational Safety and Health Administration Recommended Practices for Safety and Health Programs, formerly Safety and Health Management System. The benefits of

participation in the MCP go beyond improving the company's bottom line. Participating employers can also realize the following:

- A. free consultation services in building a safe and healthy work environment
- B. reduced absenteeism
- C. lower turnover rates
- D. higher productivity
- E. greater efficiency
- F. increased quality
- G. decreased scrap/waste
- H. increased employee morale
- I. positive brand image
- J. decreased healthcare costs
- K. decreased workers' compensation costs
- L. deferral of six months from programmed inspections

XI. Significant Changes.

- A. Created a new MCP application process.
- B. Created and defined a 24-month instructional training period.
- C. Created a 12-month implementation and self-evaluation period.
- D. Created a new MCP Checklist.
- E. Created 5 stages in the MCP.
- F. Created the Program Assessment and Evaluation Form (PAEF) that replaces the use of the Safety and Health Assessment Form-33.
- G. Created the requirement for a signed Commitment Statement from the applicant to accompany the MCP application.
- H. Created a schedule for required audits, inspections, and program assessments.
- I. Established requirements for a training program with emphasis on the seven core elements of the SHP.
- J. Discontinued the MCP Agreement.
- K. Discontinued the MCP Training List.
- L. Discontinued requirements for a written MCP report.

XII. Definitions.

- A. Days Away from Work/Restricted Work/or Job Transfer Cases (DART). The annual total case rate of recordable injuries and illnesses resulting in days away

from work and days of restricted work activity, and job transfer per 100 full-time employees divided by hours worked.

DART FORMULA =

$$\frac{(\text{Days Away Cases} + \text{Restricted Cases} + \text{Transfer Cases}) \times 200,000}{\text{Total number of hours worked by all employees}}$$

- B. High Hazard Industry. Industries that are a part of [MIOSHA's Strategic Plan goals](#) or on the current federal OSHA's "Consultation High-Hazard Industries" list. Employers with injury and illness rates above the industry average are also considered a high hazard industry as well as those employers on the Management Information System Section priority list.
- C. Instructional Training Period. The first 24 months following the date of the MCP application approval in which teaching of the core elements of the SHP shall begin and conclude. The training shall cover the seven core elements of the Occupational Safety and Health Administration's "Recommended Practices for Safety and Health Programs."
- D. MCP. A program for employers who have a Total Case Incidence Rate (TCIR) above the industry average and a need for developing or improving their SHP. The MCP consists of an assessment and evaluation of the employer's SHP including a review of injury and illness data, written policy and programs, and accident cost estimation reports, a hazard survey, and training.
- E. Program Assessment and Evaluation. A systematic method or continuing process of monitoring an employer's procedures followed to improve the effectiveness and/or efficiency of its occupational safety and health program.

This is accomplished through use of a program assessment and evaluation tool that aids in review of the employer's proactive approach in using OSHA's recommended SHP's core elements of management leadership, worker participation, hazard identification and assessment, hazard prevention and control, education and training, program evaluation and improvement, and communication and coordination for host employers, contractors, and staffing agencies, in its SHP. The tool identifies how establishing a SHP prepares employers to effectively comply with occupational safety and health standards that apply to their operations. This occurs as employers implement effective procedures for involving workers in finding solutions to abate occupational hazards, identifying and mitigating hazards, and conducting reviews to ensure safety controls are working and occupational safety and health objectives are being achieved.

The tool will also assist in identifying or determining how deficiencies in one or more SHP's core elements may have caused a failure in the SHP or may have been the root cause of occupational safety and health violations observed during a hazard survey.

- F. Safety and Health Hazard Survey. The hazard survey consists of observations, documentations, and reporting of safety and health hazards, unsafe conditions, or unsafe practices discovered, if any, during a tour or walk-around of one or more

facilities or job sites of the employer by a CET consultant. The hazard survey also provides the consultant with an opportunity to help the employer develop an effective SHP.

G. SHP. A systematic approach to managing safety and health activities by integrating occupational safety and health technical issues and technical solutions with organization's policies and objectives, human factor considerations, and behavioral issues. The components of a SHP include a set of interrelated core elements:

1. Management Leadership
2. Worker Participation
3. Hazard Identification and Assessment
4. Hazard Prevention and Control
5. Education and Training
6. Program Evaluation and Improvement
7. Communication and Coordination for Host Employers, Contractors, and Staffing Agencies

H. TCIR. The total number of recordable injury and illness cases per 100 full-time employees divided by hours worked.

TCIR FORMULA =

$$\frac{(\text{Total Number of Recordable Injury and Illness Cases}) \times 200,000}{\text{Total number of hours worked by all employees during the calendar year}}$$

I. Duration of the MCP. The MCP shall last for approximately 36 months from the date the MCP Letter of Approval is signed.

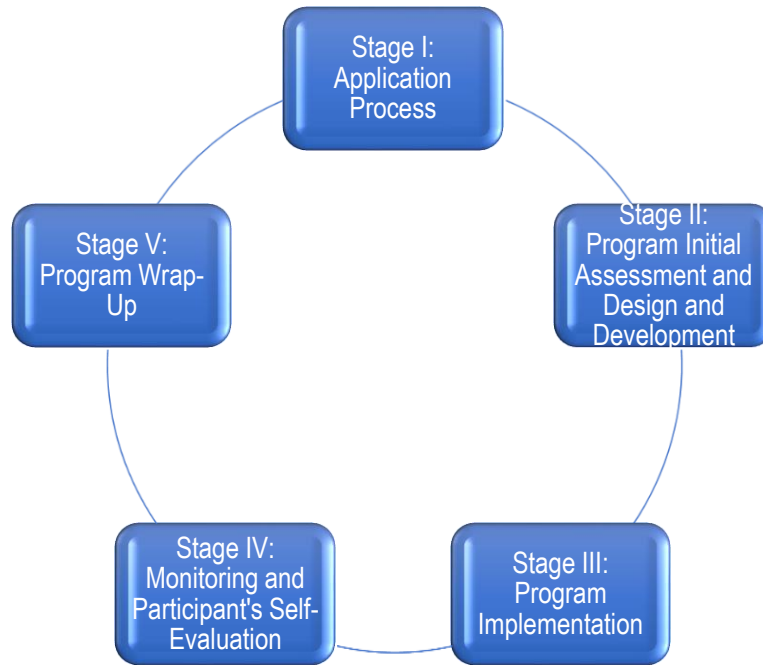
XIII. Responsibilities.

- A. Division Director. Responsible for establishing policies and procedures for implementing MCP activities.
- B. Safety and Health Program Manager. Responsible for ensuring that the policies and procedures established by these instructions are carried out by the supervisors.
- C. Supervisors. Responsible for monitoring consultant's activities to ensure that performance goals are achieved and the MCP policies are followed.
- D. CET Consultants. Responsible for promoting, scheduling, and conducting MCPs at qualifying workplaces.

XIV. Eligibility. Applicants shall satisfy one or more of the following eligibility criteria for participating in the MCP:

- A. Establishments of any size, and which [North American Industry Classification System \(NAICS\)](#) codes are identified in the current [MIOSHA Strategic Plan](#).

- B. Candidates may also include employers who are a "high-hazard industry" and/or have above average injury and illness rates.
 - C. Exceptions may be made for a company newly established; or has recently reorganized with new management or supervision and does not have an effective SHP in place.
 - D. Exceptions may also be made when the employer has installed a new equipment/process, etc.
- XV. MCP Promotion and Identification of MCP Candidate. A logo and promotional quick card have been created for the MCP. The MCP is promoted on the agency's website, through email blasts, MIOSHA News, MIOSHA Messenger, GovDelivery, and by use of promotional cards and/or brochures. The MCP is also promoted by use of the MCP logo on MCP publications and printed materials. Additionally, the MCP may be promoted as part of settlement negotiations to employers through MIOSHA's General Industry Safety and Health Division's appeal process, and by award ceremonies.
- Various sources may be used to identify MCP candidates. Consultants may identify potential MCP candidates in their respective territories through promotional cold calls; requests for consultative assistance; special emphasis programs; seminar attendees; referrals; affiliation with industry associations and other networking opportunities.
- When deemed appropriate, the consultant shall request a meeting with the employer's CEO or designee of the site to explain the purpose of the MCP. The consultant shall utilize promotional talking points established in CET literature to form a narrative and create the employer's interest in the MCP.
- XVI. MCP Stages. The MCP is divided into five (5) stages. Figure 1 illustrates the concept of organizing the MCP into different stages. The significance of the matrix is that the functional activities of the program are clearly delineated and streamlined in a manner to be easily understood and communicated.



- XVII. Stage I: MCP Application Process. All prospective applicants for the MCP shall submit a completed application package for review and shall meet the eligibility requirements of these instructions.
- A. Application Package. The following shall constitute the MCP application package:
 - 1. The completed MCP Application Form ([Appendix A](#)).
 - 2. The two most recent years' injury & illness rates of the applicant.
 - 3. Commitment Statement signed by the applicant ([Appendix B](#)).
 - 4. Optional data (e.g., new process installed, new machinery installed, new management team).
 - B. An employer interested in participating in the MCP shall be directed to the MIOSHA CET Division's website to complete and submit the online application.
 - C. All MCP applications received by CET Division personnel, whether by a manager or support staff, shall be forwarded to the MCP champion or designee, for processing.
 - D. Within three (3) days of receipt of a completed MCP application package, the MCP champion or designee processing the application shall send an Acknowledgement of Receipt of Application ([Appendix C](#)) to the applicant's given email address or by mail.
 - E. Incomplete Application. If an application is incomplete the MCP champion or designee shall contact the applicant by telephone to resolve the deficiency.

- F. Letter of Approval of Application. The MCP champion or designee shall notify the applicant by letter of the approval of the application and that the application has been assigned to the designated consultant(s). The letter shall serve as the single most important document of the start date of the MCP ([Appendix D](#)).
- G. Application not Approved. If not approved, the applicant shall be notified by letter by the MCP champion or designee.
- H. Request for Consultative Assistance (RCA). An RCA shall be prepared by the MCP champion or designee for an approved application. The MCP champion or designee shall clearly state in the RCA that the document is prepared pursuant to an approved application for participation in the MCP. The MCP champion or designee shall make an assignment of the application by email to a designated primary CET consultant and shall notify the CET consultant's supervisor of the assignment by copy of the email that created the assignment. The assignment shall be made to a consultant for the designated geographic region of the applicant. In the event a consultant for the designated geographic region in which the application originated is not available to service the application, the responsibility to perform the RCA may be assigned to a consultant of another region, depending on operational needs.

The MCP assignment shall be made to either an occupational safety advisor (OSA) or an industrial hygienist (IH) as the primary consultant. The RCA shall name both an OSA and an IH consultant who shall perform the assignment. If an assignment is made to the OSA as the primary consultant, the RCA may name the IH who shall assist in the IH's discipline. If the assignment is made to the IH as the primary consultant, the RCA may name the OSA who shall assist in the OSA's discipline. The primary consultant shall make appropriate arrangements with the other consultant to provide necessary assistance. Two different RCAs shall not be made for the same MCP.

- I. Creation of a Digital File System. The MCP champion or designee shall create an electronic filing system on the V-Drive, with a series of folders and subfolders, as needed, in the name of the applicant.
- J. Creation of a sequence of events MCP checklist. The MCP champion or designee shall create a sequence of events MCP checklist for each applicant as part of the applicant's digital file to track all events from the time the application is submitted to the end of the program ([Appendix E](#)). A master MCP checklist shall be maintained on the V-Drive for use by appropriate CET personnel. The MCP champion or designee shall ensure that the master MCP checklist is current. Each CET employee performing an MCP activity corresponding to the applicant shall be responsible for immediately updating the electronic file system to document the activity he/she has performed.
- K. Enforcement Deferral. An employer that participates in the MCP shall be granted deferral from programmed inspections for six successive and concurrent calendar months. The enforcement division shall be notified electronically at the start of

all MCPs of a deferral granted to an employer. The beginning and ending dates of the deferral shall be clearly stated in the notification to the enforcement division.

XVIII. Stage II: Program Initial Assessment and Design, and Development. The following events are accomplished in this stage: the assigned-RCA MCP application is received by the consultant, the initial or baseline safety and health hazard survey is completed; the initial or baseline injury and illness analysis and cost estimation audit is completed; the initial or baseline program assessment and evaluation is completed; and designing, developing and the writing of the customized MCP objective and training program are completed.

- A. Receipt of the MCP Assignment. A copy of the MCP application, applicant's (hereafter, participant's) Commitment Statement, and Acknowledgement of Receipt of MCP application are received by the consultants.
- B. Initial or baseline Safety and Health Hazard Survey. An initial full and comprehensive baseline survey of the participant's operation shall be completed by assigned CET OSA and IH using the Safety and Health Hazard Survey Form HO-29 ([Appendix F](#)). An ergonomic assessment shall also be completed.
- C. Initial Injury & Illness Audit. Corresponding with the baseline safety and health hazard survey, the participant and CET consultants shall conduct an initial injury/illness audit using the Injury/Illness and Cost Estimation Form HO-44 ([Appendix G](#)). Three additional injury & illness audits shall be performed throughout the MCP as follows:
 1. Twelve (12) months after the date of the MCP Letter of Approval of Application.
 2. Twenty-four (24) months after the date of the MCP Letter of Approval of Application.
 3. Thirty-six (36) months after the date of the MCP Letter of Approval of Application.

The consultant shall notify the participant of the audit 30 calendar days prior to the due date of each audit required in this section. The consultants shall send the participant the HO-44 by email with instructions to complete and return the audit by a given deadline. Accident cost estimates and workers' compensation premium costs are required for each annual injury & illness audit.

- D. Program Assessment & Evaluation. The consultants shall evaluate the elements of the employer's SHP using the Program Assessment and Evaluation Form (PAEF) ([Appendix H](#)). The form consists of three main categories:
 1. Instruction tab. The first tab of the excel worksheet provides information for completing all sections of the workbook.
 2. Establishment Information. This section requires certain employer information, the categories of which are self-evident in excel worksheet. The consultant is required to secure and input the information required by the worksheet.

3. Core Elements. Each of the seven core elements and their respective “Action Items” have their own worksheet in the excel workbook. There is a choice of 1 of 6 performance assessment indicators available for each “Action Item”.
- E. Initial Program Assessment & Evaluation. CET consultant shall complete an assessment and evaluation of the employer's existing SHP to determine strengths and weaknesses. The following activities shall be performed:
1. Hazard Survey. The CET consultant shall conduct an initial or baseline safety and health hazard survey and assessment using the Safety and Health Hazard Survey form HO-29 ([Appendix F](#)) or request CET onsite consultant (s) to conduct the safety and health hazard survey and assessment if the company meets the size (below 250 employees) and high hazard requirements for the onsite program. Both a safety consultant and an industrial hygienist shall complete the survey and assessment. If the onsite consultant (s) conducted a safety and health hazard survey and assessment within the last year, those findings may be used. However, due to the confidential nature of the onsite safety and health hazard survey and assessment, the employer must agree to its use. If scheduling permits, both a safety and a health hazard survey and assessment may be completed simultaneously.

Consultants shall stress that the hazard survey is not to be construed as representing all MIOSHA's standards violations. Consultants shall explain that observations made during the survey will not guarantee that citations will not be issued if an enforcement division's safety officer/industrial hygienist conducts a subsequent inspection. Consultants shall schedule follow-ups as needed to assess progress made by the employer on corrections for all identified serious safety and health hazardous conditions.

2. Injury and Illness Analysis and Cost Estimation. The participant and consultant shall review the most recent complete calendar year of MIOSHA's injury and illness data. Using the "Injury/Illness Analysis and Cost Estimation" Form, HO-44 ([Appendix G](#)), the employer shall supply data, meeting the general recording criteria of MIOSHA Safety and Health Standard Part 11. R408.22101 et seq., Recording and Reporting of Occupational Injuries and Illnesses, to calculate the TCIR and DART rate and make comparisons to the industry averages. A review of the site's accident and "near-miss" reports can also provide information on how well the site handles investigation of accidents.

The employer shall enter the employee's average wage and current workers' compensation premiums on the HO-44 form which is automated to use the data to calculate the accident-cost estimation. The employer and consultant shall record accident statistics which shall include accident type, body part affected, source of injury, and other relevant data

maintained on the Injury Trend Analysis Form, HO-125 ([Appendix I](#)). Reviewing the employer's workers' compensation loss runs and comparing data to the MIOSHA Recordkeeping Form 300, the consultants shall analyze the data for accuracy, patterns, and trend.

3. SHP Analysis. The consultant shall evaluate the elements of the employer's SHP, using the PAEF ([Appendix H](#)), for determining the operation's effectiveness in administering its SHP. As a part of this evaluation, the consultant may conduct interviews with first-line supervisors, safety committee members, and maintenance employees to obtain their perspectives and report of the employer's SHP.
4. Scoring the Action Items. Each core element's worksheet contains three columns titled, "Assessment #1," "Assessment #2," and "Assessment #3." In the normal course of the MCP, the consultant shall be required to complete two columns: "Assessment #1," and "Assessment #2," in the program assessment and evaluation process. The third column, "Assessment #3," may be completed should the consultant, at his/her discretion, perform a third (3rd) safety and health hazard survey.
5. For the initial or baseline safety and health hazard survey, the consultant shall assess all core elements' worksheet to determine the correlation between any observed hazard and the core elements' deficiencies that caused the failure of the SHP or are the root cause of the observations. The consultant shall click in the right cell adjacent to the specific action item that is being evaluated, then click on the validation list at the bottom right of the cell to display six performance indicators. The consultant shall then select the option that best corresponds to his/her assessment and then register the evaluation in the cell in the column titled, "Assessment #1." Consultants may select from the following six options:

PROGRAM ASSESSMENT & EVAL DESCRIPTIONS AND VALUES		
	DESCRIPTION	VALUES
1	Not Implemented	0
2	No; Needs Major Improvements	1
3	Yes, Needs Minor Improvements	2
4	Full Implementation	3
5	Not Applicable	NA
6	Not Evaluated	NE

These are also summarized in the “Employer’s Information” section of the excel workbook.

Columns "Assessment #2 and "Assessment #3" are not completed at the time of the initial or baseline program assessment and evaluation but left blank for use in the assessment and evaluation of subsequent safety and health hazard surveys.

The program assessment and evaluation results shall be retained on the form for measure and comparison with corresponding subsequent program assessments and evaluations.

The total of each core element is linked to a cell in the "Establishment Information" sheet of the Program Assessment and Evaluation excel workbook. At the end of the evaluation, the consultant shall go to the "Establishment Information" sheet of the excel workbook to view the summary report of the employer's aggregate score on all core elements individually and in combination. This data is useful to the consultant in gaging the employer's actual performance against expectations. The consultant shall discuss the observations with the participant and establish new performance achievement goals.

6. The program assessment and evaluation is based on personal observations (i.e., work being performed, documentation reviewed, conditions in the facility, responses to employee/employer interviews, etc.). Generally, there will be differences in how CET staff assesses a SHP which may be based on time constraints, complexity/size of the establishment, and knowledge of the SHP.
 7. It is difficult to conduct an evaluation that is completely objective. However, staff is required to be as objective as possible. It is not necessary to ask an employer a question related to every action item. The PAEF form shall be completed to make an adequate assessment of the employer’s SHP.
- F. Developing the Instructional Training Program. After the initial safety and health hazard survey, injury and illness analysis and cost estimation audit, and the completion of the PAEF, the consultant shall develop an instructional training program that meets the specific needs of the participant. The consultant shall develop the instructional training program with the following in mind:
1. Analysis. Using the information that was gained in the initial hazard survey, initial annual injury & illness audit, interviews with management, employees, and union representation, as relevant, the consultant shall utilize the PAEF, ([Appendix H](#)), to complete an analysis of the participant's SHP to aid in determining the training needs of the participant.

2. Use current MTI Course Modules. The consultant shall rely primarily on current MTI course modules, customizing as needed, to satisfy the objective of the instructional component of the training program.
 3. Implement. The consultant shall teach the core elements of the SHP, in relevant manageable components. This is discussed further on the next stage.
 4. Evaluate. The consultant shall consider appropriate assessment methods that shall be used to determine or evaluate whether the training that is designed and developed is the structure that will deliver the program's objectives. These methods may include dialogues, review of the completed PAEF, and interviews of participant and employees, or any other assessment methods the consultant deems appropriate. Evaluation shall be continuous and shall always weigh what, when, and how the training content and the assessment itself, directly related to the training objectives, were delivered, or may be accomplished. It shall determine whether the program is on track to achieve its goals.
- G. Retention of Records. The consultant shall file an electronic copy of the initial safety and health hazard survey and all related documents, the initial annual injury and illness audit, and the completed Performance Assessment and Evaluation Form in the participant's MCP file folder on the V-Drive.
- XIX. Stage III: Program Implementation. This stage constitutes the period in which the core elements of the SHP are taught, and an interim assessment is performed to determine if the program is proceeding on track to achieve its objective. The training topics shall consist of all seven core elements of the SHP.
- A. Duration of Instructional and Theory Training. Training in the core elements of the SHP shall begin and conclude in this stage. Training shall conclude within but no later than 2 years after the date of the MCP Letter of Approval of the Application.
 - B. Assessment Methods. The consultant shall use appropriate assessment methods to determine or evaluate whether the training is effective: what is working; how well the information is being retained; how well the training is being received; and how the training is being put to practice. Assessment methods might include dialogues, observations, discussions, questionnaires (open-ended or otherwise), or others the consultant deems appropriate. These methods shall always weigh what, when and how the training content and the assessment itself, directly related to the training objectives, are being delivered and are being accomplished.
 - C. Core Elements. The following core elements shall be taught in the implementation stage of the program:
 1. Management Leadership. Management provides the leadership, vision, and resources needed to implement an effective SHP. Management leadership means that business owners, managers, and supervisors do the following:

- a) Make the worker safety and health a core organizational value.
 - b) Fully commit to eliminating hazards, protecting workers, and continuously improving workplace safety and health.
 - c) Provide adequate resources to implement and maintain the SHP.
 - d) Visibly demonstrate and communicate their safety and health commitment to workers and others.
 - e) Set an example through their own actions.
2. Worker Participation. To be effective, any SHP needs the meaningful participation of workers and their representatives. Workers have much to gain from a successful program and the most to lose if the program fails. They also often know the most about potential hazards associated with their jobs. Successful programs tap into this knowledge base.

Worker participation means that workers are involved in establishing, operating, evaluating, and improving the SHP. All workers at a worksite, including those employed by contractors, subcontractors, and temporary staffing agencies, should participate.

In an effective safety and health program, all workers:

- a) Are encouraged to participate in the program and feel comfortable providing input and reporting safety or health concerns.
 - b) Have access to information they need to participate effectively in the program.
 - c) Have opportunities to participate in all phases of program design and implementation.
 - d) Do not experience retaliation when they raise safety and health concerns; report injuries, illnesses, and hazards; participate in the program; or exercise safety and health rights.
 - e) Do not encounter potential barriers or obstacles to worker participation in the program. For example, language barriers, lack of information, or disincentives, are removed or addressed.
3. Hazard Identification and Assessment. One of the "root causes" of workplace injuries, illnesses, and incidents is the failure to identify or recognize hazards that are present, or that could have been anticipated. A critical element of any effective SHP is a proactive, ongoing process to identify and assess such hazards.

To identify and assess hazards, employers and workers shall:

- a) Collect and review information about the hazards present or likely to be present in the workplace.
- b) Conduct initial and periodic workplace inspections to identify new or recurring hazards.

- c) Investigate injuries, illnesses, incidents, and close calls/near misses to determine the underlying hazards, their causes, and SHP shortcomings.
- d) Determine the severity and likelihood of incidents that could result for each hazard identified and use this information to prioritize corrective actions.

4. Hazard Prevention and Control. Effective controls protect workers from workplace hazards; help avoid injuries, illnesses, and incidents; minimize or eliminate safety and health risks; and help employers provide workers with safe and healthful working conditions.

To effectively control and prevent hazards, employers should:

- a) Involve workers, who often have the best understanding of the conditions that create hazards and insights into how they can be controlled.
- b) Identify and evaluate options for controlling hazards, using a "hierarchy" of controls."
- c) Use a hazard control plan to guide the selection and implementation of controls and implement controls according to plan.
- d) Develop plans with measures to protect workers during emergencies and nonroutine activities.
- e) Evaluate the effectiveness of existing controls to determine whether they continue to provide protection, or whether different controls may be more effective. Review new technologies for their potential to be more protective, more reliable, or less costly.

5. Education and Training. Education and training are important tools for informing workers and managers about workplace hazards and controls, so they can work more safely and be more productive. Another role of education and training, however, is to provide workers and managers with a greater understanding of the SHP itself, so that they can contribute to its development and implementation.

An effective education and training program provide employers, managers, supervisors, and workers with the following:

- a) Knowledge and skills needed to do their work safely and avoid creating hazards that could place themselves or others at risk.
- b) Awareness and understanding of workplace hazards and how to identify, report, and control them.
- c) Specialized training is given when work involves unique hazards.

6. Program Evaluation and Improvement. Once a SHP is established, it should be evaluated initially to verify that it is being implemented as

intended. After that, periodically, and at least annually, step back and assess what is working and what is not, and whether the program is on track to achieve its goals. Whenever these assessments identify opportunities to improve the program, everyone: owners, management personnel, supervisors, and workers, alike, should make modifications and then monitor how well the program performs because of these adjustments. Sharing the results of monitoring and evaluation within the workplace, and celebrating successes, will help drive further improvement.

Program evaluation and improvement includes:

- a) Establishing, reporting, and tracking goals and targets that indicate whether the program is making progress.
- b) Evaluating the program initially and periodically thereafter to identify shortcomings and opportunities for improvement.
- c) Providing ways for workers to participate in program evaluation and improvement.

7. Communication and Coordination for Host Employers, Contractors, and Staffing Agencies. In today's economy, an increasing number of workers are assigned by staffing agencies to work at specific host worksites under the direction and control of the host employer. Examples include seasonal workers, such as delivery drivers and warehouse workers, who may be placed in both short and long-term assignments. In these situations, it is important for the staffing agency and the host employer to communicate and coordinate to provide and maintain a safe work environment for their workers.

In other situations, some workers are employed by a host employer and others by a contractor or subcontractor. Examples include electrical or mechanical contractors working in a facility, a vendor installing or maintaining equipment, or long-term contractors providing building cleaning and maintenance. OSHA refers to these as "multiemployer" worksites. It is important that the employer and every contractor consider how each work and activity can affect the safety of other employers and workers at the site.

Effective communication and coordination among such employers mean that, before coming on site, contractors and staffing agencies and their workers are aware of:

- a) The types of hazards that may be present.
- b) The procedures or measures they need to use to avoid or control their exposure to these hazards.
- c) How to contact the host employer to report an injury, illness, or incident or if they have a safety concern.

- d) The types of hazards that may arise from the work being done on site by workers employed by contractors or staffing agencies.
 - e) The procedures or measures needed to avoid or control exposure to these hazards.
 - f) How to contact the contract or staffing firm if they have a safety concern.
 - g) What to do in case of an emergency.
- D. Safety and Health Hazard Survey. The primary CET consultant shall conduct a safety and health hazard survey to conclude this stage. This safety and health hazard survey shall constitute the second (2nd) such survey required in the program.
- E. Annual Injury and Illness Audit. The participant and the primary CET consultant shall conduct an annual injury and illness audit to conclude this stage, using the Injury/Illness Analysis and Cost Estimation Form (HO-44) ([Appendix G](#)). This audit shall constitute the third (3rd) audit, occurring 24 months after the date of the baseline injury/illness annual audit. ([See Table 1.](#)) The participant shall be notified by the primary CET consultant 30 calendar days prior to the due date of the audit. The participant shall receive the HO-44 by email with instructions to complete and return by given deadline. Accident cost estimates and workers' compensation premium costs are required for the annual injury audits. These results shall be compared against the two-prior injury and illness audit results.
- F. Utilizing the PAEF. The primary CET consultant shall use the PAEF ([Appendix H](#)) to conduct an assessment and evaluation of the participant's operation as described in Stage II of these instructions, except that in this instance, the consultant shall complete the column titled, "Assessment #2," by recording his/or her evaluation on the form. The consultant shall perform a side-by-side comparison of these results against those of the initial or baseline hazard survey. The consultant shall use the results of the program assessment and evaluation to accomplish the following:
- 1. Review and discuss the site's progress towards achievement of SHP goals & objectives with the participant.
 - 2. Establish and communicate SHP goals & objectives, as appropriate, to be accomplished during Stage IV of the program.
 - 3. Encourage open dialogue between management staff and employees to improve safety in operations.
- G. Certificate of Training. Within 15 days of the successful completion of this stage, the primary CET consultant shall submit a request to the MCP champion or designee for a Certificate of Training ([Appendix J](#)) to be issued to the participant. The MCP champion or designee shall process the request that is properly submitted, obtain the signature of the division director to the certificate, and send

the signed certificate to the consultant for delivery to the participant. The certificate may also be delivered by any other alternate appropriate means.

- H. Retention of Records. An electronic copy of the hazard survey, annual injury & illness audit, and the completed PAEF, certificate of training, and other related documents shall be retained in the participant's MCP file folder on the V-Drive. A copy of these documents shall be provided to the participant by the consultant.
- XX. Stage IV: Monitoring and Participant's Self-Evaluation. The MCP recognizes that to achieve success, it is important that participants maintain sustained involvement and demonstrate corporate or personal initiative in the MCP. Participant and workers are required to work cooperatively and proactively with the CET Division and the designated consultants and shall demonstrate a level of responsibility necessary to achieve success in occupational safety and health in the workplace. Participants shall be given time to implement the learning objectives taught in the instructional training period, that is building an effective SHP that results in significant rate reduction in the participant's occupational injury and illness or improvements in the participant's SHP. This period shall last for 12 months following the completion of Stage III of the program. For clarity, Stage IV of the program shall begin 24 months after the date of the MCP Letter of Approval of Application and shall end on or about 12 months thereafter.
- XXI. Stage V: Wrap Up. The primary CET consultant shall use this period to highlight the accomplishments of the learning objectives with the MCP participant. The consultant shall use CET standard feedback comment card to solicit feedback from the participant about the program.

On or about 36 months after the date of the MCP Letter of Approval of Application the consultant shall verify that the MCP requirements have been met. Verification shall be done through an onsite visit (or virtually, if a significant event makes an onsite visit infeasible) and the following shall be performed:

- A. Final Annual Injury/Illness Analysis and Cost Estimation Audit. This activity shall be performed by the primary consultant as the program's final injury/illness audit. The consultant shall perform the injury/illness analysis and cost estimation using Form HO-44, ([Appendix G](#)).
- B. Program Assessment and Evaluation. The primary CET consultant shall complete a final program assessment and evaluation using the results of the previous assessments and evaluations and injury/illness audits to accomplish the following:
1. Review and discuss the site's progress towards achievement of SHP goals & objectives with the participant.
 2. Encourage open dialogue between management staff and employees to improve safety in operations.
 3. Encourage management to continue training management team, supervisors, and designated safety and health staff, to equip them with the knowledge & skills needed to perform safety and health responsibilities (i.e., hazard recognition, accident investigation and root cause analysis, hazard controls.)

4. Encourage management to implement effective procedures for identifying and mitigating hazards.
 5. Encourage management to continue the practice of lessons learned through the MCP.
 6. Determine successful completion of the program.
 7. Congratulate the participant for the decision to invest in occupational safety and health as one of the most important investment the participant would ever make for the business and employees alike.
- C. Retention of Records. The primary consultant shall store an electronic copy of the final hazard survey, final annual injury/illness audit, and completed PAEF and other related documents in the participant's MCP file folder on the V-Drive. The primary CET consultant shall ensure that a copy of these reports is provided or has been provided to the participant.
- D. Notification of Completion. After verifying successful completion of the MCP, the primary CET consultant shall notify the MCP champion or designee by email. The completed final annual injury/illness analysis and cost estimation audit, using Form HO-44 ([Appendix G](#)) with comparisons of the two (2) prior injury/illness audits, shall be attached to the email notification. The email notification shall also list some of the participant's major accomplishments or successes in the program. (An email notification of completion of the MCP that is not accompanied by the final annual injury/illness audit and a listing of some of the participant's major accomplishments shall not constitute an adequate notice of completion. It shall also be required that the participants have corrected all serious hazards identified during the hazard surveys and that the participant's electronic file folder is updated and complete.

The consultant shall request that the MCP champion or designee issues a Completion Letter and Certificate of Recognition to the participant ([Appendices K & L](#)), respectively).

When all requirements of the MCP have been satisfied, the MCP champion or designee shall prepare the completion letter for the signature of the division director. The signed letter shall be given to the consultant for presentation to the participant. A copy of the letter shall be retained in the participant's electronic MCP file folder on the V-Drive.

When all requirements of the MCP have been satisfied, the MCP champion or designee shall prepare the Certificate of Recognition for the signature of the division director. The signed certificate shall be framed and given to the consultant for presentation to the participant. A copy of the certificate shall be retained in the participant's electronic MCP file folder on the V-Drive.

- E. CET Award Eligibility. A participant who has successfully completed the MCP may be eligible for one of CET's recognition awards should there be a significant reduction in its injury and illness rates, pursuant to [CET-ADM-08-01R1](#), Award Instruction. The primary CET consultant shall review the records of the

participant for CET's award eligibility. Should the consultant decide that the participant meets CET's award eligibility requirements, the consultant shall make the appropriate recommendation with supporting documentation to the CET supervisor [not the MCP champion]. Information shall also be shared with the participant about the Michigan Safety and Health Achievement Program and the Michigan Voluntary Protection Program.

- XXII. The MCP is Challenging. Even though the MCP is challenging, participants may follow some simple steps to get started. Completing these steps will give the participants a solid base from which to take on some of the more structured requirements presented in the program:
- A. Set safety and health as a top priority. Always set safety and health as the top priority. Tell your workers that making sure they finish the day and go home safely is the way you do business. Assure them that you will work with them to find and fix hazards that could injure them or make them sick.
 - B. Lead by example. Practice safe behaviors yourself and make safety part of your daily conversations with workers.
 - C. Implement a reporting system. Develop and communicate a simple procedure for workers to report any injuries, illnesses, incidents (including near misses/close calls), hazards, or safety and health concerns without fear of retaliation. Include an option for reporting hazards or concerns anonymously.
 - D. Provide training. Train workers on how to identify and control hazards using, for example, OSHA's Hazard Identification Training Tool.
 - E. Conduct inspections. Inspect the workplace with workers and ask them to identify any activity, piece of equipment, or material that concerns them. Use checklists, such as those included in [OSHA's Small Business Handbook](#), to help identify problems.
 - F. Collect hazard control ideas. Ask workers for ideas on improvements and follow up on their suggestions. Provide them time during work hours, if necessary, to research solutions.
 - G. Implement hazard controls. Assign workers the task of choosing, implementing, and evaluating the solutions they come up with.
 - H. Address emergencies. Identify foreseeable emergency scenarios and develop instructions on what to do in each case. Meet to discuss these procedures and post them in a visible location in the workplace.
 - I. Seek input on workplace changes. Before making significant changes to the workplace, work organization, equipment, or materials, consult with workers to identify potential safety or health issues.
 - J. Make improvements. Set aside a regular time to discuss safety and health issues, with the goal of identifying ways to improve the program.

XXIII. Non-Repeat of MCP. The program shall not be repeated at the same establishment unless an exception is granted by the CET division director. An exception may be granted when a participant has undergone a major expansion, significant change in management, or installation of new equipment/processes, etc.

XXIV. MCP Suspension or Termination. Suspension may occur if an on-going MCP is curtailed due to significant events that affect the MCP progress (e.g., employee layoffs, strikes, or production changes). On a case-by-case basis, CET and the participant shall determine the impact of the significant event. If the length of the suspension is considerable the MCP shall be considered incomplete, and the program terminated.

Termination may also occur when two consecutive follow-up reviews confirm lack of progress as scheduled or unwillingness of a participant to correct serious hazards identified during the hazard survey. In any of these instances, the CET champion or designee shall send a Letter of Termination ([Appendix M](#)) to the participant. If these events occur prior to the end of the enforcement deferral period, the enforcement division shall be notified to terminate any operating deferral.

XXV. Withdrawing from the MCP. A participant may withdraw from the MCP at any time by notifying the consultant, CET administration, or the MCP champion or designee. The MCP champion or designee shall prepare and mail a Letter of Acknowledgment of Withdrawal to the participant. If this event occurs prior to the end of the enforcement deferral period, the enforcement division shall be notified to terminate any operating deferral. If later, the participant expresses an interest in resuming the MCP effort, a new MCP may be initiated, upon recommendation of the CET consultant and approval of the reviewing CET supervisor [not the MCP champion].

APPENDIX A

MICHIGAN CHALLENGE PROGRAM APPLICATION FORM

<p>PLEASE COMPLETE THE APPLICATION. If you want to participate in the Michigan Challenge Program, please complete this form. If you have no information to enter in a section, please enter N/A. After completing the form, sign and date it, then give it to a CET consultant or mail it to the address above or submit it online by using the email address above. NOTE: YOU MUST ATTACH YOUR SIGNED COMMITMENT STATEMENT. If your application is incomplete it may not be accepted.</p>			
Section I. Date, Applicant's FEIN & NAIC			
	Date of Application:	July 29, 2021	
	FEIN:	Enter information here	
	NAICS:	Enter information here	
Section II. Applicant's Name & Address Information			
Company/Corporate Name:	Enter Information here		
Company/Corporate Address:			
Site Address:	Enter street name here	City:	Enter Information here
		ZIP:	Enter information here
		County:	Enter Information here
Site Manager's Name:	Enter Information here		
Site Manager's Title:	Enter information here		
Site Address (If different from above):	Enter street name here	City:	Enter information here
		Zip:	Enter information here
		County:	Enter information here

APPENDIX B

APPLICANT'S COMMITMENT STATEMENT

We understand that the Michigan Challenge Program offers us the opportunity to develop an effective occupational safety and health management program during a 3-year commitment with MIOSHA. We understand that the program is a free consultation service that will help us in the following ways:

- Identifying the strengths and weaknesses of our existing Safety and Health Program.
- Learning about the elements of a strong Safety and Health Program.
- Learning about the fundamentals of effective management leadership for a safe work environment.
- Learning of effective hazard prevention and control methodologies.
- Receiving on-going safety and health training for all levels in our organization.
- Learning about accident trends and cost estimates of our industry.

Our commitment and continued involvement in the Program will also benefit our business in the following ways:

- lower turnover rates & higher productivity
- increase efficiencies in operations & product quality
- decrease scrap/waste & increase financial reward
- improve product quality & positive brand image
- decrease healthcare costs
- increase morale of employees
- reduce absenteeism
- development of a solid and proven safety and health program
- lower workers' compensation costs due to fewer employee injuries and illness
- reduction or elimination of property damage due to fewer incidents
- deferral of 6 months from programmed inspections

Most importantly, we understand that our employees are our greatest assets and that their safety and health is central to our vision and mission. We are committed to providing a safe and healthful workplace for each worker. We have resolved to maintain sustained involvement and to work cooperatively and proactively with you to benefit fully from this extraordinary opportunity.

Sign Here

(Enter Name & Title)

CET-ADM-07-1R4
November 4, 2021
Michigan Challenge Program (MCP)

APPENDIX C

ACKNOWLEDGMENT OF RECEIPT OF MCP APPLICATION

{date defaults}

{Insert Applicant's Name}
{Insert Applicant's Address}
{Insert Applicant's Address}

Dear {Applicant}:

Thank you for your application to the Michigan Challenge Program. Your application will be reviewed to determine your eligibility for the Program. It is important that you reply promptly if we request additional information.

The review process takes time; therefore, we appreciate your patience. We will notify you of our decision as soon as a determination is made.

Please feel free to contact me by telephone number (517) 284-7730, with any of your questions or for additional information about the Program.

Sincerely,

{insert manager's name and position}
Consultation Education & Training Division
(517) 284-7730

APPENDIX D

(MCP LETTER OF APPROVAL OF APPLICATION)

(DATE)

(NAME)

(TITLE)

(COMPANY)

(ADDRESS)

(CITY), Michigan (ZIP CODE)

Dear (NAME):

Congratulations, your MCP application has been approved. Your decision to invest in occupational safety and health as one of the most important investment you will ever make for your business and employees alike.

Your application has been assigned to (insert name) who will contact you within 3 business days of the date of this letter to discuss the program further. Please feel free to contact (him/her) by telephone at (xxx)-(xxx-xxxx) or by email at (insert email address) if you have any questions or need additional information. Thank you for accepting this challenge to improve your safety culture for the safety and health of your employees.

Sincerely,

(NAME)

Supervisor

(INITIALS)

Enclosure

APPENDIX E

MICHIGAN CHALLENGE PROGRAM (MCP) SEQUENCE OF EVENTS CHECKLIST

Participant:						
Contact Person:			Date:			
Address:						
City:		[Enter city here]		County [Enter County here]		
Zip Code:		[Enter Zip here]		Telephone: [Enter # here] Fax: [Enter # here]		
Email:		NAICS:		# of Employees:		
President/CEO/Designee: _____ Union: _____ Local: _____						
Union Contact:						
MCP Events		By:	Initials	Due Date	Completion Date	Comments
STAGE I: APPLICATION, REVIEW AND APPROVAL						
<u>MCP Application Received</u>		Administration				
Verifies one or more of the following:		Administration				
<ul style="list-style-type: none"> • NAICS Code is listed in MIOSHA's Strategic Plan. • Injury and Illness Calculations are Complete and TCIR is above Industry's Average (HO-44). • High Hazard Industry. • Reorganization or New Management. • Employer has Installed a New Equipment/Process, etc. 						
MCP Application Received by CET Division's Personnel forwarded to the MCP champion or designee for Processing:		Administration				
<ul style="list-style-type: none"> • Completed application form received. • Two years of I & I data received. • Signed Commitment Statement received 						

APPENDIX F SAFETY & HEALTH HAZARD SURVEY



CET DIVISION CONSULTATION SAFETY AND HEALTH HAZARD SURVEY



Michigan Department of Labor and Opportunity
 Michigan Occupational Safety and Health Administration
 Consultation Education and Training Division
 530 W. Allagan Street, Box 30643
 Lansing, Michigan 48909-8143

Company: <input style="width: 90%;" type="text"/>	Date of Site Visit: <input style="width: 90%;" type="text"/>
Contact: <input style="width: 90%;" type="text"/>	Consultant: <input style="width: 90%;" type="text"/>
Address: <input style="width: 90%;" type="text"/>	Phone: <input style="width: 90%;" type="text"/>
Phone: <input style="width: 90%;" type="text"/>	Email: <input style="width: 90%;" type="text"/>
Email: <input style="width: 90%;" type="text"/>	Date Submitted to Employer: <input style="width: 90%;" type="text"/>

Following are the results of the walkthrough hazard survey which you should find helpful in continuing to provide employee protection in your workplace. This hazard survey should not be construed as a complete listing of all unsafe acts or unsafe conditions which might be present. This is a listing of acts or conditions which were observed during the visit that could cause personal injury, illness, or property damage. Items observed which are deficient and may be non-compliant are so noted.

We look forward to hearing from you about actions you have taken, or plan to take, in response to this report and its recommendations. The consultant will follow up with you on to discuss the status of the observations noted in this report. The follow up contact may be done by site visit, phone, or e-mail. You are urged to correct all deficiencies as soon as possible. The action taken to correct the identified hazards can be reported to the consultant in the response section for each item.

Also, included is a copy of the MIOSHA Form 512 which was used to assess the Safety and Health program at your facility. If a box is not marked, it represents an opportunity for program improvement. We encourage you to inform your employees of the actions you take. This knowledge will help them to participate in maintaining a safe and healthy workplace.

Thank you for the opportunity to provide consultative assistance. Should you have any questions about this report please contact the consultant listed above.

Ergonomic Assessment:			
<input type="checkbox"/> Review Injury/Illness Log	<input type="checkbox"/> Assessed Workstations	<input type="checkbox"/> Issued Ergonomic Recommendations	
<input type="checkbox"/> Interviewed Employees	<input type="checkbox"/> Evaluated Ergonomic Program (Training, Assessment, Controls, Medical)		

+ - Item: 1	Standard/Rule: Click here to enter text.
+ - Hazard/Equipment/Location/Recommended Action / Conditions Observed: <i>Select a value</i>	
Click here to enter text.	

APPENDIX G

INJURY/ILLNESS ANALYSIS AND COST ESTIMATION (HO-44)

Calculations of: Total Case Incident Rate (TCIR)
Days Away Restricted Transfer Rate (DART)
Costs of Accidents (Insured and Uninsured Costs)

Note: Partial screen shot of form shown below for reference.

	Baseline	1st Year	2nd Year
	Year	Review	Review
Calendar Year ----->	----- ▼	----- ▼	----- ▼
300 Log Data			
Column G - Deaths			
Column H - Days away from work			
Column I - Job transfer or restriction			
Column J - Other recordable			
Column K - Away from work -days			
Column L - On job transfer or restriction - days			
Column M1 - Injury			
Column M2 - Skin disorder			
Column M3 - Respiratory conditions			
Column M4 - Poisoning			
Column M5 - Hearing Loss			
Column M6 - All other illnesses			
Other Data			
Total Employee-Hours Worked			
Employees' Average Hourly Wage (W)			
Total Number of Employees			
Actual Number of First Aid Cases			
-OR-			
Estimated the Number of First Aid Cases (Total # Recordable Cases x 5)	0	0	0
Injury & Illness Statistics			

APPENDIX G (CONTINUED)

UNINSURED COSTS EXAMPLES

The following information may be helpful to CET consultants in better understanding the concept of uninsured costs.

Uninsured costs, often referred to as “hidden costs,” are sometimes equal to or greater than the insured costs. These are costs that an employer withstands but cannot insure itself against.

1. Cost of wages paid for time lost by workers who were not injured.
2. Cost of wages paid for time lost by the injured worker other than Workers' Compensation premiums.
3. Cost of damage to material and equipment.
4. Extra costs due to overtime work necessary because of the accident.
5. Cost of wages paid supervisors for time devoted to adjusting work schedules, making personnel changes, and arranging for equipment and material repairs.
6. Cost of wages from decreased output of injured worker after he/she returns to work.
7. Cost of learning period for new worker.
8. Uninsured medical costs borne by the employer.
9. Cost of time spent by higher supervision and clerical workers or investigators or in the processing of insurance reports.
10. Miscellaneous costs such as liability, costs of renting equipment, loss of profit on contracts canceled, loss of bonuses, orders lost, or cost of hiring new employees.
11. Cost of lost production because of morale, attitudes, and adjustment of thinking as rumors flow among the general workers.

APPENDIX I

INJURY TREND ANALYSIS FORM

INJURY TREND ANALYSIS FORM (HO 125)													
Company Name:													
Audit date:													
Consultant Name (Safety):							Consultant Name (IH):						
DEPARTMENT NAME:	Shipping	Assembly	Molding	Press	Assembly	Rework	Maintenance						
INJURY / ILLNESS DESCRIPTION													TOTAL
Amputation													0
Bruise, Crush, Contusion		1		2									3
Burn, Scald													0
Carpal Tunnel					1								1
Cut, Scratch, Puncture													0
Strain, Sprain	1												1
Dislocation													0
Electric Shock			1										1
Foreign Body													0
Fracture													0
Frostbite													0
Hernia													0
Multiple Injuries													0
Skin disorder (e.g. Dermatitis)													0

APPENDIX J

CERTIFICATE OF TRAINING



The Consultation Education and Training Division
Commends

XYZ, Inc.

for completion of safety and health training for
the Michigan Challenge Program (MCP)

Director

Date

CET-ADM-07-1R4
November 4, 2021
Michigan Challenge Program (MCP)

APPENDIX K

MCP COMPLETION LETTER

Date

SAMPLE

Mr./Ms. Anyone, (Title)
Anytime Anyplace
E. 123 Main Street
Any Town, MI 48123

Dear Mr./Ms. {INSERT LAST NAME}:

Congratulations on completion of the Michigan Challenge Program (MCP). Participation in the MCP is a significant milestone for your company.

Developing and implementing a safety and health program (SHP) requires management commitment, leadership, and strong employee involvement. It is a difficult process to integrate safety and health into the routine operations of your business, yet the benefits gained through reduced employee injury and illness impact employee morale and can result in substantial cost savings.

Your company accepted the challenge to partner with the Michigan Occupational Safety and Health Administration, Consultation Education and Training Division. During the past three years, we have provided consultation and training and you, in turn, have taken the necessary steps to implement an effective SHP. (Add company specific examples of system changes made in the past two years).

Thank you for accepting this challenge and achieving completion of the MCP. We wish you continued success as you continue to strengthen and improve your SHP and look forward to working with you always in achieving your occupational safety goals.

Sincerely,

Name of division director

APPENDIX L

CERTIFICATE OF RECOGNITION AVAILABLE ONLY BY CLICKING [HERE](#)

CERTIFICATE OF RECOGNITION

		
Certificate of Recognition		
The Consultation Education & Training Division Recognizes		
XYZ, Inc. for participation in and completion of the Michigan Challenge Program (MCP)		
_____ Division Director		_____ Date

CET-ADM-07-1R4
November 4, 2021
Michigan Challenge Program (MCP)

APPENDIX M

LETTER OF TERMINATION

Date:

Mr./Ms. Anyone, (Title)
Anytime Anyplace
E. 123 Main Street
Any Town, MI 48123

Re: Letter of Termination

Dear Mr./Ms. {INSERT LAST NAME}:

Thank you for allowing us to provide Michigan Occupational Safety and Health Administration (MIOSHA), Consultation Education and Training (CET) Division services to you through the Michigan Challenge Program (MCP).

Our records indicate that you were not able to complete this project due to _____ . As a result, the MCP has been terminated as of xx/xx/xx and is no longer in effect. Any deferral you were granted from a MIOSHA programmed inspection has been terminated.

We hope that you will continue your efforts to improve your safety and health program. If we can be of further assistance, please contact our office at (517) 284-7720.

Sincerely,

(Supervisor)

XX/xxx

TABLE 1					
SCHEDULE OF REQUIRED AUDITS, HAZARD SURVEYS & PROGRAM ASSESSMENTS					
		Base Line	Due from Date of Initial Annual I & I Audit and Cost Estimation		
NOS	Item Description	Baseline or Initial	12 Months	24 Months	36 Months
1	HAZARD SURVEY	✓		✓	
2	INJURY & ILLNESS AUDIT	✓	✓	✓	✓
3	PROGRAM ASSESSMENT & EVALUATION FORM	✓		✓	✓