

OSHA Challenge Administrator Annual Report

Included in this spreadsheet are:

Tab 1. Administrator Annual Report

Tab 2. Summary of Participant Injury and Illness Rates - Autofills

Tabs 3 - 12. Individual Participant Information

- 1.) Some fields in this spreadsheet are programmed to fill these forms automatically. Do not manually enter data into these fields. All of Tab 2 autofills.
- 2.) The year has been entered in all applicable boxes.
- 3.) Each participant is to have their own tab. If you have more than 10 participants, copy the file of blank annual reports before entering information first. Ensure that you have enough annual report files for the total number of your participants.
- 4.) Ensure that all fields are filled in correctly.
- 5.) Remember to submit an updated OCTPS for each participant along with this summary.
- 6.) Ensure that the data inputted are consistent and accurate.

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

The OSHA Challenge Administrator must prepare the Administrator Annual Report each year and a Challenge Tracking Participant Status (OCTPS) form for each participant. Both the annual report and OCTPS forms must be submitted electronically to your OSHA Challenge Liaison harris.richard@dol.gov.
March 25.



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along with an OSHA
report and all OCTPS
gov no later than

OSHA Challenge Administrator's Annual Report

Administrator Name	Year
West Virginia University Safety and Health Extension	CY2023

Section 1. Administrator Information Update

Name	West Virginia University Safety and Health Extension
Site Address	3604 Collins Ferry Rd.
City, State, Zip	Morgantown, WV 26506

Section 2. Administrator Contact Information Update

Administrator Contact Name	Mark Fullen
Administrator Contact Title	WVU Extension Director
Administrator Contact Phone Number	3042933200
Administrator Contact Fax Number	3042935905
Administrator Contact E-mail Address	m.fullen@mail.wvu.edu

Section 3. Coordinator Contact Information Update

Coordinator Contact Name	Amanda Mason
Coordinator Contact Title	WVU Extension Specialist
Coordinator Contact Phone Number	3042933167
Coordinator Contact Fax Number	3042935905
Coordinator Contact E-mail Address	amanda.mason@mail.wvu.edu

Section 4. Participant Information Updates

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Section 5. Input from Challenge Administrators

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

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2.) Do you have any suggestions for improving OSHA Challenge?

Update tracking forms	
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OSHA Challenge Administrator's Annual Report

3.) Additional comments:

Form Approved

OMB# 1218 – 0239

Expires 09-30-2014

Public reporting burden for this collection of information is voluntary and is estimated to average 20 hours per response, including the time for reviewing instruction, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate, or any other aspect of this collection of information including suggestions for reducing this burden to the Office of Partnerships and Recognition, Department of Labor, Room N-3700, 200 Constitution Avenue, N.W., Washington, DC 20210.

OSHA Challenge Summary of Participant Injury and Illness Rates

Administrator			Year			
West Virginia University Safety and Health Extension			CY2023			
Participant Name	Injury and Illness Rates					
	TCIR			DART		
	Current	Baseline	%	Current	Baseline	%
Building Systems Inc.	3.1	2.6	19%	1.0	2.6	-60%
Westlake Chemical	3.0	0.0	#DIV/0!	2.5	0.0	#DIV/0!
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!
[Insert Participant Name Here]	#DIV/0!	0.0	#DIV/0!	#DIV/0!	0.0	#DIV/0!

OSHA Challenge Participant Information

Participant	OSHA 300 Log Totals for
Building Systems Inc	Year CY 2020

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	193,698.0
Total Employees	98

Measure	Current Year	Baseline	Change
TCIR	3.1	2.6	0.5
DART	1.0	2.6	-1.6

Significant Achievements and Milestones
Describe any significant achievements/milestones accomplished by your participants during the past year.
Stage II

OSHA Challenge Participant Information

Participant
Westlake Chemical

OSHA 300 Log Totals for	
Year	CY 2

G	H	I	J	K	L	M:1	M:2	M:3	M:4	M:5
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	864,649.0
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Total Employees	40
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Measure	Current Year	Baseline	Change
TCIR	3.0	0.0	3.0
DART	2.5	0.0	2.5

Significant Achievements and Milestones
Describe any significant achievements/milestones accomplished by your participants during the past year.
Stage II

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OSHA Challenge Participant Information

Participant	OSHA 300 Log Totals for	
[Insert Participant Name Here]	Year	CY 2

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

Significant Achievements and Milestones
Describe any significant achievements/milestones accomplished by your participants during the past year.

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OSHA Challenge Participant Information

Participant	OSHA 300 Log Totals for	
[Insert Participant Name Here]	Year	CY 2

G	H	I	J	K	L	M:1	M:2	M:3	M:4	M:5
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	
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Measure	Current Year	Baseline	Change
TCIR	#DIV/0!	0.0	#DIV/0!
DART	#DIV/0!	0.0	#DIV/0!

Significant Achievements and Milestones
Describe any significant achievements/milestones accomplished by your participants during the past year.

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OSHA Challenge Participant Information

Participant	OSHA 300 Log Totals for	
[Insert Participant Name Here]	Year	CY 2

G	H	I	J	K	L	M:1	M:2	M:3	M:4	M:5
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	
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Measure	Current Year	Baseline	Change
TCIR	#DIV/0!	0.0	#DIV/0!
DART	#DIV/0!	0.0	#DIV/0!

Significant Achievements and Milestones
Describe any significant achievements/milestones accomplished by your participants during the past year.

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OSHA Challenge Participant Information

Participant	OSHA 300 Log Totals for
[Insert Participant Name Here]	Year CY 2

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

Significant Achievements and Milestones
Describe any significant achievements/milestones accomplished by your participants during the past year.

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OSHA Challenge Participant Information

Participant	OSHA 300 Log Totals for	
[Insert Participant Name Here]	Year	CY 2

G	H	I	J	K	L	M:1	M:2	M:3	M:4	M:5
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
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Measure	Current Year	Baseline	Change
TCIR	#DIV/0!	0.0	#DIV/0!
DART	#DIV/0!	0.0	#DIV/0!

Significant Achievements and Milestones
Describe any significant achievements/milestones accomplished by your participants during the past year.

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OSHA Challenge Participant Information

Participant	OSHA 300 Log Totals for
[Insert Participant Name Here]	Year CY 2

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

Significant Achievements and Milestones
Describe any significant achievements/milestones accomplished by your participants during the past year.

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OSHA Challenge Participant Information

Participant	OSHA 300 Log Totals for
[Insert Participant Name Here]	Year CY 2

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

Significant Achievements and Milestones
Describe any significant achievements/milestones accomplished by your participants during the past year.

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OSHA Challenge Participant Information

Participant	OSHA 300 Log Totals for
[Insert Participant Name Here]	Year CY 2

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

Significant Achievements and Milestones
Describe any significant achievements/milestones accomplished by your participants during the past year.

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