

1. Purpose

This procedure describes the Kennesaw State University (KSU) requirements for development, review, and management of Environmental and Occupational Safety Management System (EOSMS) documents and records which include policies, procedures, guidance materials, plans and reviews, reports, minutes, and data.

2. Scope

This procedure applies to KSU faculty, staff, administrators, students, contractors, and other personnel who develop internal documentation, use the EOSMS, or provide data or information for input to the EOSMS. Documentation covered by this procedure includes Environmental and Occupational Safety (EOS) policies, procedures, guidance material, reports, minutes, and data.

3. Responsibilities

- A. The Environmental Health and Safety (EHS) Department is responsible for documenting and maintaining records of EHS operations and activities on campus.
- B. KSU units are responsible for documenting EOS-related actions and activities to include accidents/incidents, training, and corrective measures, and equipment or facilities repair and maintenance.

4. Definitions

A. Controlled Document

A controlled document is a document that is numbered with a defined numbering scheme; is reviewed and approved before issue; and whose changes are authorized.

5. Procedure

A. Policy and Procedure Development, Review, Approval, and Revision

- i. EHS Department coordinates the development and review of EOS policies and procedures in accordance with the KSU policy guidelines as defined at <https://policy.kennesaw.edu/>.
- ii. The director of EHS works with persons delegated responsibility to draft EOS policies and procedures to ensure proposed policies and procedures are consistent with governing requirements.

- iii. EOS policies and procedures must be reviewed:
 - a. at a pre-determined frequency as indicated on the policy or procedure;
 - b. on request by the KSU Safety Council, or University leadership;
 - c. following changes to relevant legislation or standards;
 - d. following changes to University operations or organizational structure(s) significantly affecting responsibilities of EOS or units with EOSMS responsibilities;
 - e. following identification of systems deficiencies during EOSMS reviews or EOS audits.

1) Policy and Procedure Review and Approval

- i. EHS Department develops a draft version of new or revised policies or procedures and forwards to KSU unit managers and the KSU Safety Council for a review and comment period of at least 14 days.
- ii. EHS Department compiles unit and committee feedback and prepares a revised draft for review by the leadership of the Facilities Division and the office of the vice president for Operations.
- iii. Following an internal review and updated as needed, the proposed policy is submitted to KSU's shared governance bodies for review as outlined in the KSU policy guidelines. Upon approval EOS policies and procedures are published on the KSU policy website.

2) Corrections to EOS Procedures

- i. EHS Department is responsible for correcting information that does not substantially affect the procedure, such as:
 - o title or name changes;
 - o reference changes, such as to legislation or standards;
 - o typographical errors.

3) EOS-related Documentation Developed by KSU Units

- i. Academic departments and administrative units may develop department/unit-specific EOS-related documents and, where available, the unit's Safety Committee should assist as needed.
- ii. The department/unit-specific documents must be:
 - a. Drafted by sufficiently qualified person(s)
 - b. Consistent with KSU EOS policies and procedures
 - c. Consistent with the KSU Policy Council requirements
 - d. Reviewed accordingly (recommended at least annually)

4) Standard operating procedures and EOS work instructions

- i. Supervisors and managers, in consultation with staff and/or students under their supervision, may develop SOPs or EOS work instructions for specific tasks or operations. They may use the template developed by the EHS department.

- ii. Supervisors and managers must ensure SOPs or EOS work instructions contain document control information as outlined in Section B (Identification and traceability of EOS documents) below.

5) EHS Guidance Material

- i. EHS Department coordinates the development and review of EOS alerts, bulletins and guidance.
- ii. EHS department ensures that those delegated responsibility to draft guidance material are appropriately trained.

B. Identification and traceability of EOS documents

- i. Within the scope of the EOSMS, all “controlled documents” include policies, procedure, guidelines and forms.
- ii. Controlled documents should have sufficient control and identification information, including a document number, an effective date, a review date, to allow document to be readily identifiable and traceable.
- iii. Heads of academic departments and administrative units, including Supervisors and managers must ensure department/unit-specific forms, templates, and records contain sufficient document control and identification information.

C. EOS Record Management

- i. The EHS Department should maintain overall University records pertaining to EOS and EOSM, including, but not limited to, audit and inspection reports, exposure assessment, waste disposal, training, incident reports, regulatory compliance inspections, permits and certifications.
- ii. Academic departments and administrative units should document and maintain records of EOS related activities performed in the department/unit including information such as accidents and incidents, inspections, repairs and training and provide copies to EHS department when requested.
- iii. The Facilities Division must document and maintain records of any EOS related repairs, maintenance or inspections (including but not limited to, elevators, refrigerants, fume hoods, emergency showers) that they conduct or contract out to a third party. The Division should provide copies of any EOS related documents or records to the EHS Department if required.
- iv. Auxiliary Services department must document and maintain records of any EOS related matters or inspections including but not limited to self-inspections or Board of Health inspection report, permits and licenses, incident reports and training.
- v. Third parties, such as KSU contractors, vendors and KSU Foundation must ensure that environmental and occupational safety records are managed in accordance with, Federal, State’s, KSU and Board of Regents (BOR) records management requirements.

D. Assessment and Review

The EHS Department will conduct an assessment, at least annually, of this procedure and recommend modifications or changes to ensure its currency and state of compliance.