	Environmental Health and Safety Document and Record Management
Environmental Health & Safety Department	

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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

The Environmental Health and Safety (EHS) Department is responsible for documenting and maintaining records of EHS operations and activities on campus.

KSU units are responsible for documenting EOS-related actions and activities to include incidents, training, corrective measures, and equipment or facilities repair and maintenance.

4. Definitions

Controlled document – 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

EHS Department coordinates the development and review of EOS policies and procedures inaccordance with the KSU policy guidelines as defined at https://policy.kennesaw.edu/.

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.

EOS policies and procedures must be reviewed:

- At a pre-determined frequency as indicated on the policy or procedure.
- Upon request by the University Safety Council (USC) or University leadership.
- Following changes to relevant legislation or standards.
- Following changes to University operations or organizational structure(s) significantly affecting responsibilities of EOS or units with EOSMS responsibilities.
- Following identification of systems deficiencies during EOSMS reviews or EOS audits.

1) Policy Review and Approval

The EHS Department develops a draft version of new or revised policies. It is then forwarded to KSU unit managers and the USC for a review and comment period of at least 14 days.

The 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 of Administration.

Following an internal review, the proposed policy is submitted to the University's Policy Council for review. Upon its review, the Policy Council submits the draft or revised document to the 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) Programs and Review and Approval

The EHS Department develops a draft version of new or revised program. It is then forwarded to KSU unit managers for a review and comment period of at least 14 days.

The EHS Department compiles unit and committee feedback and prepares a revised draft. Following an internal review, the proposed policy is submittedto the Director of University's Policy Council for review. The draft or revised document is then submitted to the USC for its review and approval. Upon approval, Program is published on the EHS website at ehs.kennesaw.edu.

3) Corrections

The EHS Department is responsible for correcting information that does not substantially affect the procedure, such as:

- Title or name changes.
- Reference changes, such as to legislation or standards.
- Typographical errors.

4) Environmental and Occupational Safety-Related Documentation

Academic departments and administrative units may develop department and unit-specific EOS-related documents. Where available, the unit's Safety Committee should assist as needed. These documents must be:

- Drafted by sufficiently qualified person(s).

- Consistent with KSU EOS policies and procedures.

- Consistent with the KSU Policy Council requirements.

- Reviewed accordingly (recommended at least annually).

5) Standard Operating Procedures and Work Instructions

Supervisors and managers, in consultation with staff and students under their supervision, may develop standard operating procedures (SOPs) or EOS work instructions for specific tasks or operations. They may use the template developed by the EHS Department.

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.

6) Guidance Material

EHS Department coordinates the development and review of EOS alerts, bulletins, and guidance.

The EHS department ensures that those delegated responsibility to draft guidance material are appropriately trained.

B. Identification and Traceability

This section pertains to all controlled documents within the scope of the EOSMS and includes policies, procedure, guidelines, and forms.

Controlled documents should have sufficient control and identification information, including a document number, an effective date, and a review date to allow the document to be readily identifiable and traceable.

Heads of academic departments and administrative units must ensure their forms, templates, and records contain sufficient document control and identification information.

C. Record Management

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.

Academic departments and administrative units should document and maintain records of EOS related activities performed, including information such as accidents and incidents, inspections, repairs, and training. Copies should be made available to the EHS Department upon request.

The Facilities Division must document and maintain records of any EOS related repairs, maintenance, or inspections they conduct or contract out to a third party. Such records include, but are not limited to elevators, refrigerants, ventilation systems, and emergency generators. Copies should be made available to the EHS Department upon request.

The Campus 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.

Third parties, such as KSU contractors, vendors, and the KSU Foundation must ensure that EOS records are managed in accordance with, Federal, State, University, 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.