Policy 2.1:Demonstrations on Campus Issued: June 1, 2001

1. Statement of Purpose

The right of free speech and expression is basic to our system of law and fundamental to the purpose of a University. Included in this right is the privilege to peacefully present views and positions and to attempt, without coercion, to convince others of the correctness of those views. The exercise of these rights will be protected by the full authority of this institution.

Rights do not, however, exist in a vacuum, and those of different persons and groups often come into conflict. To assure the continued exercise of these rights, to preserve the opportunity for free and open discourse within our campus community, and to protect persons and property, rules and regulations have been established governing conduct within the confines of the campus. These principles are consistent with State of Illinois Statute (Ch. 313 Sec. 21.2-2) and with Board of Trustees policies (Section VI, Sub-section E). Accordingly, activities which disrupt the proper functioning of the campus, or which threaten the rights, persons, or property of others will not be permitted. Interference with the conduct or performance of a scheduled campus event or regular instructional activities will be considered disruptive.

These regulations are essential to the protection of the rights of each student, faculty, visitors, and staff member. Violations will be dealt with in an appropriate manner, which may include criminal prosecution, disciplinary proceedings, or both.

2. Location of Demonstrations

Demonstrations on property owned or operated by Chicago State University may take place only at the following locations: main campus, outside of building on campus property. Demonstrations in other locations are strictly prohibited. Activities which restrict access to, egress from, or passage through public areas of the campus, or which threaten a breach of the peace in such public areas are not permitted. Orders to disperse, issued by the Senior Vice President for Administrative and External Affairs or his/her designee, shall be obeyed.

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3. Specific activities which are prohibited:

- 1. Harassing or otherwise interfering with orderly conduct of classes or other University activities.
- 2. Harassing or otherwise interfering with activities of University employees or visitors.
- 3. Noise-making activity or congestion that disturbs classes or any other scheduled event or University activity.
- 4. Damage to property or littering of University premises,
- 5. Obstruction of automobile and pedestrian traffic.
- 6. Blocking of entrances to buildings and driveways.
- 7. Blocking of passageways and/or stairwells.

4. Enforcement

1. Violations

Alleged violations of this policy by students should be reported to the Office of Student Affairs. In cases where faculty and/or other employees are involved, the Provost and Vice-President for Administrative Affairs (or their designees) should be informed. Non-University constituents will be dealt with in accordance with the Board of Trustees policies and/or Illinois Law Compiled Statues. The aid of the Police Department may be requested to ensure compliance with this policy.

2. Penalties

Failure to comply with a cease and desist directive may lead to arrest and prosecution and/or result in enforcement of sanctions through the Student Conduct Code, or in the case of employees, other disciplinary actions as

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provided for in employee rules or bargaining unit agreements. Non-University constituents will be dealt with in accordance with the provisions of the Illinois Law Compiled Statues.

Policy 2.2:Workplace Safety Procedures Involving Hazardous Chemicals Issued: June 1, 2001

1. Purpose

The purpose of this program is to implement the Illinois Toxic Disclosures to Employees Act (often called the Illinois Right-To-Know Law). By providing information on the hazards of the chemicals used in the workplace, injuries and illnesses potentially caused by those chemicals can be reduced. The program is comprised of three elements:

- 1. Maintaining files of all Material Safety Data Sheets.
- 2. Labeling all hazardous chemicals in the workplace.
- 3. Training all employees who are exposed to these chemicals.

2. Responsibilities of the Employer

- 1. To develop and implement a written Hazard Communication Program that will satisfy the requirements of the Illinois Right-to-Know Law.
- 2. To enforce all provisions of this program in our workplace.
- 3. To train all current and future employees in the hazards of the chemicals to which they are exposed in their work areas and to familiarize them with the requirements of this program.
- 4. To designate a person who will be responsible for implementing and enforcing the provisions of this program.
- 5. To maintain a list of emergency phone numbers of the persons most familiar with chemical hazards associated with the various workplaces on the Chicago State campus.
- 6. To keep the appropriate local and state governmental agencies apprised of potential chemical hazards present on the Chicago State campus.

3. Responsibilities of the Employees

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To comply with all occupational safety and health standards, including the requirements of this program, which are applicable to the employee's actions and conduct in the workplace.

4. Hazard Determination

- 1. Material Safety Data Sheets (MSDS) will be obtained for all chemicals coming onto the campus. This applies to all chemicals whether they are purchased from outside vendors or are donated to the school as samples or gifts. The responsibility for ascertaining that an MSDszzS is on file within a work area lies with the supervisor of the work area in which the chemical is to be used. The supervisor that orders chemicals must specify on the requisition the department to which the chemicals will be delivered. This will allow Public Safety to route the MSDSs to the respective departments.
- 2. Hazard determinations for chemicals will be based on the information presented in the MSDSs provided by the suppliers of the chemicals. If new and significant hazard information becomes available for a given chemical or if new MSDSs are received from outside suppliers,, this information will be incorporated into this program within a reasonable period.
- 3. A designated Safety Supervisor will maintain an up-to-date file of Material Safety Data Sheets received for the entire campus.
- 4. A separate file containing the MSDSs for all chemicals found in that workplace will be maintained in each workplace by the appropriate supervisor or foreman.
 - This file is to be open to inspection by any employee within the workplace.
- 5. A list of all hazardous chemicals in use on campus will be kept with this written program.
- 6. The MSDS files will be reviewed at least annually by the Safety Supervisor to assure that the proper MSDSs are kept and are up-to-date.

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5. Container Labeling

- 1. Due to the diversity of conditions found across the Chicago State campus in the various workplaces, it would be difficult to devise a labeling standard that would meet all foreseeable circumstances. Therefore, each department will devise its own labeling system which will meet the following minimum criteria:
 - a. The person in charge of receiving for the department or workplace shall insure that the supplier's label is intact and legible when it first arrives on campus.
 - b. For any chemicals which are determined to be hazardous, the following information must be supplied on the original label or on a label added at the time of receipt within the department or workplace:
 - 1. Chemical name, accepted common name or a list of constituents of a mixture, or trade name.
 - 2. For trade names and mixtures, the intended use of the material must be listed along with the name of the person who formulated the mixture or the company which supplied the material.
 - 3. Specific physical and health hazards involved with the symptoms of contact or overexposure to the chemical, and appropriate first-aid measures.
 - 4. A list of special precautions and protective equipment to be used when working with the chemical.
 - 5. The four digit international hazardous material code number must be on the container. The four digit number allows emergency service personnel to verify the health and safety hazards.

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- c. If any portion of a hazardous chemical is transferred from a labeled container to a different container, the new container must also be labeled with the same information unless the following conditions apply:
 - 1. The new container is unlike any other in the workplace and:
 - 2. The chemical will be used only by the person who transferred it to the new container and:
 - 3. The chemical will be completely used up within the day or work period, or any remaining chemical will be returned to a properly-labeled container.
- d. If any portion of the chemical will remain after use as a hazardous waste requiring special disposal procedures, the original container must be labeled to that effect with special labels provided by the responsible department. The container in which the chemical residue is collected must also be labeled with its contents and hazard class.
- 2. Notices shall be posted in each workplace which describe that department's container-labeling system.

6. Training

- 1. The Safety Supervisor, the department supervisors, and the foreman, if applicable, will be jointly responsible for the training of the employees within the respective departments as to the provisions of this Hazard Communication Program and in the safe handling of the chemicals within the various workplaces.
- 2. All new employees will receive training in the provisions of this program before beginning work at Chicago State.
- 3. All current employees who have not received training in this program or who are moving to another department will receive instruction in the provisions

Policy 2.2:Workplace Safety Procedures Involving Hazardous Chemicals (Continued) Issued: June 1, 2001

of this program at the earliest possible time.

- 4. The Safety Supervisor, the department supervisor, or another designated and qualified person will provide instruction in the provisions of the Hazard Communication Program which will include, but not be limited to, the following information:
 - a. The purpose of the program and the responsibilities assigned under the program.
 - b. How to read and interpret Material Safety Data Sheets and where the MSDSs are located within the respective departments.
 - c. The type of instruction the employee will receive from his supervisor and the employee's obligation to behave in a safe and responsible manner.
 - d. The employer's responsibility to provide a safe working environment and the provisions which have been made to provide that environment.
- 5. The departmental supervisor, foreman, or another designated and qualified person will provide instruction to each employee in the safe handling and use of each chemical found within the workplace before that employee is allowed to work with that chemical. This training will include, but is not limited to, the following information:
 - a. The proper use and fit of any protective equipment or clothing required when handling any given chemical.
 - b. The effect of overexposure to or contact with the chemical and the first-aid measures which should be followed.
 - c. The procedures to follow should a chemical be spilled or otherwise accidentally released to the environment.

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- d. Any known hazardous combinations of the given chemical with any materials in the workplace.
- 6. In laboratories where a great number of chemicals may be encountered, the training must, at minimum, cover the provisions of (Sec. f., 5) above for each chemical class found in the laboratory. All special hazards found in the individual laboratories must be identified and covered in the training.
- 7. The Safety Supervisor will work with the department supervisors to develop training material appropriate to each workplace.
- 8. The department supervisors are responsible for identifying non-routine tasks involving hazardous chemicals for which employees have not been trained. Special safety instructions will be given before the task is begun.
- 9. Written training records will be kept for each employee receiving training under this program. The records will have the following information:
 - a. The employee's name and department.
 - b. The name of the person presenting the training material.
 - c. The specific topics covered in the training which would include a list of chemicals covered at that session.
 - d. The date an which the training was presented.
 - e. The signatures of both the employee and the person presenting the training.
- 10. Copies of each training record will be kept on file in the employee's departmental file. The supervisor and employee should review her/his training file on a yearly basis to ensure that the information is accurate.

7. Outside Contractors

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- 1. It is the responsibility of the person requesting the work to determine what hazardous chemicals, if any, the employees of a contractor may be routinely exposed to while on the job site.
- 2. The contractor must provide Chicago State with copies of MSDSs on all hazardous chemicals that the employees of the contractor will be routinely exposed to while on the job site. The contractor will be provided with MSDSs for any chemicals used by Chicago State in the area where the contractor will be working. A signed statement indicating that this information has been received must be obtained from the contractor.

Policy 2.3: Bloodborne Pathogen Policy and Exposure Control Plan Issued: June 1, 2001

Introduction

Effective January 13, 1 993 the Illinois Department of Labor formally adopted the federal Occupational Safety and Health Administration's (OSHA) Occupational Exposure to Bloodborne Pathogens Standards and Rules, which now apply to public employers in Illinois, including state universities. These Standards and rules directly relate to those CSU employees with occupational exposure to blood and other infectious materials as defined below

Adoption of Applicable State & Federal Standards

Chicago State University hereby adopts as a policy of the University, through incorporation by reference, the applicable general policies and procedures as described in the federal Occupational Safety and Health Administration's (OSHA) Occupational Exposure to Bloodborne Pathogens Standards and Rules, 29 CFR Chapter XVII 1910.1030. This policy and plan shall be reviewed and updated annually and whenever necessary by the Campus Safety Committee, to reflect new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure. Specific schedules relating to Hepatitis B vaccinations and post-exposure evaluation and follow-up are found in specific sections as noted.

Exposure Determination

Generally, certain CSU job classifications such as Health Service nurses, Exercise Science staff, athletic trainers, police officers, building service workers, and Day Care Center workers have initially been determined to fall into the category of those who may be exposed to bloodborne pathogens during the normal course of their employment. Inclusion of these job classifications may be revised, expanded or deleted at any time. Any CSU employee who feels they may be subject to this exposure as a regular part of their employment duties can immediately petition the Personnel Department for consideration in determining the inclusion of their job classification in this exposure control job classification listing.

Tasks and procedures in which occupational exposure occurs and that are performed by employees in the job classifications stipulated in the CSU exposure determination listing (above) include, but are not limited to:

Policy 2.3: Bloodborne Pathogen Policy and Exposure Control Plan (Continued) Issued: June 1, 2001

- 1. Exposure to and handling of biomedical and epidemiologically active pathogens in the course of health care evaluations conducted by the Center for Exercise Science;
- 2. Standard emergency medical services and first aid treatment used by Health Service nurses, police officers, child care center staff, and athletic trainers or recreational services staff members when providing emergency medical aid to those persons coming under their care;
- 3. Any law enforcement tasks relating to infectious materials exposure in the apprehension, custody, processing and transport of suspects and prisoners;
- 4. Any routine maintenance or building service duties involving the clean up or other necessary handling of materials that exhibit the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

Engineering & Work Practice Controls

The university adopts by reference, the standard applicable engineering and work practice controls specified in Occupational Exposure to Bloodborne Pathogens standards and Rules, 29 CFR Ch. XVII 1910.1030. According to this section, the university advises the use and provides the issuance, through the individual departments, of any necessary personal protective equipment which includes, but is not limited to: gloves, face shields or eye protection, disposal materials, and emergency medical pocket masks and resuscitation equipment. At a minimum, "universal precaution concepts" as described in the act, shall be observed to prevent contact with blood or other potentially infectious materials. Accordingly, under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials. All potentially infectious waste materials must be properly bagged and disposed.

Hepatitis B Vaccinations

The University makes available at no cost to the employee, the Hepatitis B vaccine and vaccination series to all employees who have occupational exposure, and post-exposure evaluation and follow-up to all employees who have had an exposure incident. All current and new employees covered by this plan will have this series of vaccinations made available within ten (I 0) working days of the adoption of this policy or upon initial work assignment,

Policy 2.3: Bloodborne Pathogen Policy and Exposure Control Plan (Continued) Issued: June 1, 2001

unless the employee has previously received the complete Hepatitis B vaccination series, or antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons. Employees may decline to accept the Hepatitis B vaccination series, but must sign and file a statement of waiver with the Health Service Office.

If an employee initially declines the Hepatitis B vaccination, but at a later date while still covered under the standard decides to accept the vaccination, the University shall make available the Hepatitis vaccination at that time.

Evaluation of Exposure Incidents

All reports of an actual or suspected exposure incidents must immediately be made to the Health Service Office, or the Police Department, when the Health Service Office is closed. Following such a report, the university shall follow the medical evaluation, documentation, identification, collection, testing, post-exposure prophylaxis, and counseling standards and procedures adopted in 29 CFR Ch. XVII 1910.1030 through the University Policy on Worker's Compensation procedures.

Communication of Hazards to Employees

Supervisors of employees determined to be covered under this plan shall see that all standards and procedures relating to proper labels and signs for blood or other potentially infectious material and waste are followed per the applicable provisions of 29 CFR Ch. XVII 1910.1030.

Information and Training Programs

The University's Personnel Department in cooperation with the Health Service Office, and as necessary an outside consultant, will offer Bloodborne Pathogen training for all affected employees at no cost and during working hours. Training is provided:

- E. for new employees, within ten (10) days time of the initial assignment to tasks where occupational exposure may take place. Such new employees will be scheduled for training through the Personnel Department, and
- F. at least annually thereafter for all current employees,

Policy 2.3: Bloodborne Pathogen Policy and Exposure Control Plan (Continued) Issued: June 1, 2001

G. additional training is provided when changes such as modification of tasks or procedures or the institution of new tasks or procedures affect the employee's occupational exposure.

Recordkeepping

The Health Service Office, in cooperation with the Personnel Department, establishes and maintains an accurate record for each employee with occupational exposure, and includes all reporting elements as described in 29 CFR Ch. XVII 1910.1030.

Policy 2.4: Security Awareness Guidelines Issued: June 1, 2001

While the Key Control Policy outlines the arrangements for controlling and restricting access to buildings and to areas within buildings, space occupants should be aware of security issues over control of equipment and records, which are housed in classrooms, offices and other areas. These are as follows:

- 1. Whenever areas are found unsecured, all authorizing signatories will be notified by Public Safety. The immediate supervisor of the person or department involved is responsible for taking appropriate steps to insure that the incident is not repeated.
- 2. Keys to cabinets, desks, lockers, and drawers within departments and behind lockable doors are uncontrolled keys, and security control is the responsibility of the department.
- 3. In general, it is the policy of the University that all equipment valued in excess of \$250.00, should be secured by means other than just the security provided by the door locking system. Non-movable equipment should be secured by the appropriate size anchor pad. Small moveable equipment should be secured in a locked cabinet or desk on a daily basis. Keys to all security devices used on campus (i.e., anchor pads), are the property of the individual departments. The purchase of such security devices is the responsibility of the requesting department.
- 4. Sensitive records should be stored in locked cabinets that should remain locked at all times. Access to these storage areas should be limited to authorized personnel on an "as needed" basis. When possible and feasible, sensitive records should be stored in fireproof cabinets.
- 5. Engineering and maintenance personnel will require access to all spaces that contain or allow access to mechanical equipment. For this reason, these rooms or spaces are not to be utilized for storage of unsecured equipment. In cases where departments have been assigned mechanical access space and where storage of movable and/or unsecured equipment is required, such equipment should be secured in a caged portion of the room.
- 6. The University will not be responsible for the security of personal items brought onto campus; the responsibility for these items remains with the owner.