

CALIFORNIA STATE UNIVERSITY, STANISLAUS

Injury and Illness Prevention Program

Per California Code of Regulations Title 8 §3203

PLAN REVIEW

This sheet should be completed each time the Injury and Illness Prevention Program (IIPP) is reviewed and/or modified. The Assistant Director of Environmental Health, Safety and Emergency Management is responsible to review and update this plan annually or more frequently as needed per CSU Chancellor's Executive Order 1039.

Date Created:	1991					
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Reviewed by:	Amy Thomas, Assistant Director of Safety & Risk Management					
Signature of Responsible Manager:	Signed copy on file with the UPD/Safety & Risk Management Office					
Were changes made to the IIPP document on this date?	YES					
If changes were made, to which section	as? (List below)					
1. Changed the title of Environmental I	1. Changed the title of Environmental Health, Safety and Emergency Management (EHSEM) to Safety & Risk					
Management (SRM) throughout the document.						
2. Updated Section 14.3 Material Safet	y Data Sheets					
3. Corrected typos and formatting						

TABLE OF CONTENTS

		page
1.0	Regulatory Authority	1
2.0	Administering Agency	1
3.0	Background	1
4.0	Scope	1
5.0	Policy	1
6.0	Objectives	1
7.0	Responsibilities [8 CCR 3203 (a) (1)&(2)] 7.1 University Administration [8 CCR 3203 (a) (2)] 7.2 Campus-wide Environmental Health & Safety Board 7.3 Environmental Health & Safety Department. 7.4 Deans, Directors, Department Chairs, Department Heads 7.5 Principal Investigators & Supervisors 7.6 Department Safety Coordinators (optional) 7.7 Employees [8 CCR 3203 (a) (2)] 7.8 Students	2 2 2 3 3 3 4 4 4
8 N	Compliance Guidelines [8 CCR 3203 (a) (2)]	4
	Safety Communications [8 CCR 3203 (a) (3)]	
10.0	0 Environmental Health & Safety Inspections [8 CCR 3203 (a) (4)]	5 5 5
11.(O Accident Investigation [8 CCR 3203 (a) (5)]	6
12.0	0 Hazard Control Procedures [8 CCR 3203 (a) (6)]	6
	12.1 Imminent Hazard Situations	6
13.0	D Employee Safety Training [8 CCR 3203 (a) (7)]	6 7 7 7

14.0 Record Keeping [8 CCR 3203 (b) (1)&(2)]	7
14.1 Campus Accidents, Injuries & Illness	7
14.2 Occupational Injuries & Illness	7
14.3 Material Safety Data Sheets (MSDS)	8
14.4 Employee Exposure Records	8
14.5 Medical Records	8
14.6 Employee Exposure & Medical Records Analyses	8
14.7 Documentation of Activities	8
15.0 General Safety Resources	9
15.1 Biological Safety	9
15.2 Chemical Hygiene & Lab Safety	9
15.3 Emergency Preparedness	9
15.4 Fire Safety	9
15.5 Hazard Communication [8 CCR 5194]	9
15.6 Workplace Ergonomics	9
15.7 General Office Safety	10
15.8 Hazardous Materials Management	10
15.9 Industrial Hygiene	10
15.10 Exposure Control Plan	10
15.11 Public Health & Sanitation	10
15.12 Defensive Driving	11
15.13 Workplace Violence Awareness	11
APPENDICES	
A. Campus Wide Health and Safety Committee Charter [8 CCR 3203 (c)]	12
B. Sample Inspection Charts	13
C Environmental Health and Safety Records Retention Schedule	15

1.0 Regulatory Authority

California Labor Code Section 6401.7 (Chapter 1369, Statues 1989); California Code of Regulations, Title 8, Section 3203; CSU Environmental Health and Safety Program Development and Administrative Guide.

2.0 Administering Agency

California Division of Occupational Safety and Health, Department of Industrial relations (Cal/OSHA).

3.0 Background

Due to increasing public concerns, both the legislative and various regulatory agencies have begun to establish stricter workplace controls to protect the health and safety of employees, students, and the general public. Non-compliance with increasingly stringent legislation and regulations, that are heavily enforced by regulatory agencies, has resulted in the issuance of heavy fines and penalties against employers and individuals in both the private and public sectors.

In California, Senate Bill 198, adopted during the 1989 legislative session, reminded employers that they are accountable for the safety and health of their workers. SB198 was codified in the California Insurance and Labor Codes on October 2, 1989. Later, on December 13, 1990, General Industry Safety Orders (GISO) section 3203 in the California Code of Regulations was amended regarding workplace Injury and Illness Prevention Programs (IIPP).

The amendments require every employer to establish, implement and maintain an effective injury prevention program including, but not limited to, a written program for identifying and evaluating hazards; procedures for correcting unsafe conditions; a system for communicating with employees; regularly scheduled safety meetings; employee training programs; compliance strategies; on-going documentation/recordkeeping; and identification of a person responsible for the program.

4.0 Scope

Although the provisions of this law and the implementing regulations apply only to employees, the University is committed to providing for the health and safety of students and the public as well.

5.0 Policy

- **5.1**. It is the policy of the University to maintain a campus environment for faculty, staff, students and the public that will not adversely affect their health and safety nor subject them to avoidable risks of accidental injury or illness, insofar as it is reasonably within its control to do so. No student or employee will be required to perform any task which is determined to be unsafe or unreasonably hazardous.
- **5.2.** To accomplish this, departments will provide facilities and equipment that meet all federal, state and local safety laws and regulations, and will promulgate appropriate policies, standards and procedures for governing campus health and safety programs.
- **5.3.** While the overall responsibility for campus health and safety rests with the President, the immediate responsibility for workplace health and safety belongs to each campus employee who performs a supervisory role. In addition, individual employees are responsible for preventing campus accidents. Accordingly, all faculty and staff are to ensure that safe and healthful conditions and practices are provided and followed within the areas under their control, and all members of the campus community are to cooperate fully with all aspects of the various campus health and safety programs.

6.0 Objectives

When properly designed and implemented, an effective Injury and Illness Prevention Program will assist management in determining what hazards exist in the workplace, how to correct hazards that may occur, and what steps to take to prevent them from recurring.

When the University has established an effective system for providing employee injury and illness prevention, the following objectives can be achieved:

- **6.1** Management is able to prevent many hazards from occurring through regular self-inspections.
- **6.2** Employees know to report potentially hazardous conditions without fear of reprisal and that their reports will be given prompt and serious attention.

- **6.3** Workplace equipment is maintained in safe and good working condition.
- **6.4** Management has established procedures to investigate workplace accidents, near-miss incidents and reported injuries and illness.
- **6.5** Hazards are corrected as soon as possible after they are identified.
- **6.6** Employees have received written general safety and health rules which apply to everyone.
- **6.7** The University has developed safe and healthful work practices for each specific job performed by its employees.
- **6.8** The University has established disciplinary procedures which help ensure that safety rules and work procedures are put into practice and enforced.
- **6.9** The University has established a written plan for what employees will do in case of emergency.

7.0 Responsibilities [8 CCR 3203 (a) (1)]

7.1 University Administration

The ultimate responsibility for establishing and maintaining effective policies regarding environmental health and safety issues specific to campus facilities and operations rests with the University President. General policies which govern the activities and responsibilities of the EH&S program are thereby established under the final authority of the President. The Assistant Director of Safety & Risk Management (SRM) is the designated implementor and administrator of the Injury & Illness Prevention Program.

Because of the wide diversity of operations within the University and the necessary differences in organizational structure within various departments, it is recognized that certain responsibilities and expressed procedures in this program cannot be equally applied. There are, therefore, some details which might be impossible or impractical for one department chair or department head to implement as directed while another would have no difficulty in applying every one. Departments will, therefore, have some latitude in formulating and implementing alternative methods when necessary as long as the total Injury and Illness Prevention Program objectives are not compromised.

7.2 Campus Wide Health and Safety Committee [8 CCR 3203 (C)]

The purpose of this committee is to achieve and maintain continuing communications on issues relating to occupational safety and health; to discuss, research and seek resolution for problems referred to it by campus employees; and to provide employees with the opportunity to voice concerns relating to hazards without fear of reprisal.

The University will operate in full compliance with the California Code of Regulations Title 8 Section 3203 (c) describing the use of labor/management safety and health committees. The Committee is authorized to make recommendations on those problems that have been discussed and researched, and make recommendations for resolution. In order to have a frank and open discussion, the Committee has no authority to settle any grievance being processed on campus.

Members of this committee will include members from a cross section of the various departments within the University and one individual from each of the employee unions represented by collective bargaining Units (as stipulated in Provision 23.8 of the Unit 2, 5, 7 and 9 contract, Section 28.9 of the Unit 6 contract, Section 37.8 of Unit 3 contract and 31.8 of Unit 4 contract). The committee will be chaired by the Assistant Director of Safety and Risk Management (SRM), or a designee.

The Campus Wide Health and Safety Committee responsibilities are:

- **a.** Meets on a quarterly basis;
- **b.** Prepares and makes available to the affected employees, written records of safety and health issues discussed at the committee meetings. Maintains records of meeting minutes for at least one (1) year.
- c. Reviews results of periodic, scheduled worksite inspections;
- **d.** Reviews results of occupational accident investigations and causes of incidents resulting in occupational injury, illness or exposure to hazardous substances; and where appropriate, submits suggestions to management for the prevention of future incidents:
- **e.** Reviews investigations of alleged hazardous conditions brought to the attention of any committee member. When determined necessary by the commit, the committee may conduct its own inspection and investigation to assist in remedial solutions;
- f. Submits recommendations to assist in the evaluation of employee safety suggestions; and
- g. Upon request, verifies corrective action taken in response to Cal/OSHA or other appropriate regulatory agency citations.

7.3 Safety and Risk Management (SRM) Office

It is the responsibility of the SRM through the Assistant Director to develop, maintain, and manage an Injury and Illness Prevention Program. As noted in Section 7.1, the Assistant Director of SRM is responsible for the administration of the IIPP. Further responsibilities are outlined below:

- a. Develop, implement and maintain the Injury and Illness Prevention Program.
- **b.** Provide consultation to Department Deans, Directors, Chairpersons, and Coordinators regarding program compliance, including but not limited to: issues of hazard identification and evaluation, procedures for correcting unsafe conditions, systems for communicating with employees, holding regularly scheduled safety meetings, providing employee training programs, regulatory compliance strategies, and recordkeeping.
- **c.** Provide centralized monitoring of campuswide activities, on a consultative basis, in the areas of biological safety, chemical hygiene, emergency preparedness, fire safety, hazard communication, hazard identification, hazardous materials management, industrial hygiene, occupational safety, pest management, public health and sanitation, radiation safety, risk management, and safety education and training.
- d. Maintain centralized environmental and employee monitoring records, allowing employee access as directed by law.

7.4 Deans, Directors, Department Chairs, Department Heads

It is the responsibility of Deans, Directors, Department Chairs and Department Heads to develop departmental procedures to ensure effective compliance with the Injury and Illness Prevention Program and other university health and safety policies as they relate to operations under their control. Specific areas include employee and student education and training, identification and correction of unsafe conditions, and recordkeeping. Specifically these individuals will:

- a. Develop or adopt written departmental procedures and ensure that each supervisor adheres to adopted procedures.
- **b.** Develop or adopt and implement an education and training program designed to instruct employees and students in general safe work practices as well as instructions specific to their job duties. Such education and training shall take place prior to the employee or student being assigned to potentially hazardous employment.
- c. Instruct or seek instruction for employees and students in the recognition and avoidance of unsafe conditions, including hazards associated with non-routine tasks and emergency operations. Permit only those employees or students qualified by training to operate potentially hazardous equipment. Do not assume that newly hired, newly assigned or reassigned employees or students comprehend all safety procedures associated with the new job duties.
- **d.** Develop and maintain a system of recordkeeping to document all employee and student education and training activities, including a system of sharing such records with the SRM Office. Such records should include, but not be limited to, employee and student injuries, incident reports, and complaints or grievances involving safety issues.
- e. Develop and maintain an inventory of hazardous materials present in all work areas within the department.
- **f.** When ordering suspected hazardous materials or equipment, request on the Requisition Form an MSDS (where one is not already available) or equipment safety procedure.
- **g.** Post in a conspicuous location appropriate safety notices or procedures.
- **h.** Develop methods, as appropriate, to inform outside contractors' employees who work in areas under department jurisdiction of the hazards to which those employees may be exposed.

7.5 Principal Investigators and Supervisors

- **a.** Develop or adopt local area procedures to ensure effective compliance with the Injury and Illness Prevention Program as it relates to operations under their control. Specific areas of responsibility include employee and student education and training, identification and correction of unsafe conditions, and recordkeeping.
- b. Develop or adopt and maintain written safety procedures which conform to campus and departmental guidelines.

- c. Ensure that each employee adheres to adopted procedures.
- **d.** Instruct or seek instruction for employees and students in the recognition and avoidance of unsafe conditions, including hazards associated with non-routine tasks and emergency operations. Permit only those employees or students qualified by training to operate potentially hazardous equipment. Do not assume that newly hired, newly assigned or reassigned employees or students comprehend all safety procedures associated with the new job duties.

7.6 Department Safety Coordinators (Optional)

Non-mandatory, Department Safety Coordinators (DSCs) are appointed by each Dean, Director, Department Chair or Department Head and are critical to the effective implementation of the Injury and Illness Prevention Program. The DSC will:

- a. Serve as liaison with SRM and other associated campus departments on health and safety issues.
- **b.** Arrange for education and training of employees as related to workplace hazards.
- **c.** Serve as a liaison for the department on matters pertaining to inspections, accident/injury investigations, personnel safety education and training, reports, technical consultants and as the primary department resource person for coordinating these activities.

7.7 Employees [8 CCR 3203 (a) (2)]

- **a.** Because of the number of potential hazards that may exist or be created in the work environment, employees must first use common sense and good judgment at all times. An Employee Safety Handbook is available online at: http://www.csustan.edu/DPS/Documents.html
- b. Employees are responsible for reading and complying with procedures and guidelines provided by their supervisors.
- c. Employees are encouraged to inform their supervisors of workplace hazards without fear of reprisal, including the reporting of near-miss incidents.
- **d.** Employees shall attend established education and training sessions and are expected to understand and comply with all applicable safety requirements. Failure to comply with established safety rules may be reflected in performance evaluations and may lead to disciplinary action.
- e. Employees are responsible for asking questions of their supervisors when there is concern about an unknown or hazardous situation.

7.8 Students

Students are expected to always adhere to safety practices presented by faculty, technical staff, student assistants, graduate assistants, or other authorized individuals. They must also report workplace hazards that become known to them, to their supervisors or other responsible parties.

8.0 Compliance Guidelines [8 CCR 3203 (a) (2)]

The safety and welfare of every individual on this campus is of utmost importance. To help insure that the health and safety policies and procedures are followed by everyone, normal disciplinary actions would be implemented against any individual (university employee or student) who disregards the safety of their fellow campus residents. The actions could include verbal or written reprimand and/or any other action up to and including termination or dismissal.

All employees shall adhere to safe and healthy work practices defined by established campus and departmental safety and health guidelines. Failure to do may result in diminished performance evaluations and/or disciplinary action may be implemented within authority and pursuant to collective bargaining unit agreements. Failure to comply with safe work practices may also lead to fines by Cal/OSHA, the EPA, and/or personal civil penalties.

9.0 Safety Communications [8 CCR 3203 (a) (3)]

Several methods of communicating with employees, on matters relating to health and safety, have been established. Managers and supervisor will encourage employees to report any unsafe or unhealthful conditions they discover without fear of reprisal.

9.1 Campus Wide Health and Safety Committee [8 CCR 3203 (C)]

The Campus Wide Health and Safety Committee has been established to achieve and maintain effective communications between labor and management and to resolve health and safety related problems (see Appendix A).

9.2 Department Safety Meetings (optional)

Non-mandatory, Department Safety Meetings are generally implemented in Departments where potentially serious occupational exposures may exist on a regular basis. Such Departments will conduct periodic safety meetings at which safety and health issues are freely and openly discussed by employees of the department. Management will attempt to schedule the meetings at a time when most employees can attend and will keep minutes to document who was in attendance and what topics were discussed.

9.3 Employee Safety Training

The University provides general training programs for employees on an on-going basis (see section 13.0). Included are such topics as First Aid/CPR, Fire Extinguisher training, Hazard Communication training and Defensive Driver Training.

Departments provide specific training programs for employees either on a periodic basis or prior to assignment on a new job or when work assignments change.

10.0 Health and Safety Inspections [8 CCR 3203 (a) (4)]

Potential occupational safety and health problems may exist within any workplace on campus. Therefore, the entire campus is subject to periodic inspection and review. Those areas with the greatest potential for problems will be inspected with greater frequency. Every workplace shall be inspected on a regular basis. Those areas with potentially greater hazards will be inspected more frequently as necessary by request or through risk assessments.

The inspections may be conducted by departmental members, members of the Campus Wide Health and Safety Committee, and/or the Safety & Risk Management (SRM) office.

Environmental Health and Safety inspections may be requested by contacting the SRM office at 667-3114, or by submitting a Health and Safety Inspection Request form available online at: http://www.csustan.edu/DPS/Documents.html

Inspection results will be sent to individual department authorities.

10.1 Scheduled Workplace Inspections

- **a.** It is the responsibility of each department to ensure that a regular and systematic inspection process be scheduled for all departmental areas.
- **b.** The frequency of workplace inspections is left up to the departments' discretion. SRM recommends that all areas be inspected on a semiannual basis. Those departments engaged in hazardous operations are encouraged to conduct more frequent inspections.
- c. Inspection documents are available from the SRM office. General safety inspection checklists are provided in Appendix B.
- **d.** SRM will conduct regular inspections of non-departmental public access areas (i.e. hallways, stairways, interior and exterior public assembly areas, classrooms, etc.)

10.2 Unscheduled Workplace Inspections

- **a.** Departments will conduct an inspection whenever new substances, processes, procedures or equipment which represents a new occupational safety and health hazard are introduced.
- b. Departments will conduct an inspection whenever notification of a new or previously unrecognized hazard is received.

- **c.** SRM will conduct periodic unscheduled inspections of all workplaces to help ensure the maintenance of a safe and healthful workplace.
- **d.** SRM, in conjunction with departmental representatives, will conduct a health and safety inspection in the event of an occupational injury, occupational illness, or exposure to hazardous substances as defined by Cal/OSHA.

11.0 Accident Investigation [8 CCR 3203 (a) (5)]

- 11.1 All injuries incurred on the job will be reported to the immediate supervisor of the injured employee who will complete a Supervisors Report of Injury and forward it to Human Resources (HR) and the SRM office.
- 11.2 "Serious" occupational injuries, illness or exposures to hazardous substances, as defined by Cal/OSHA, must be reported to Human Resources no later than 24 hours after they become known by the employer. A "Serious" injury is defined as hospitalization for more than 24 hours for other than observation, or the loss of a body part or permanent disfigurement. After notification from HR, SRM will contact Cal/OSHA as required by law. SRM, in conjunction with UPD personnel, will investigate illness and injuries as required.
- 11.3 Supervisors may contact the SRM office to request Health and Safety Investigation assistance.

12.0 Hazard Control Procedures [8 CCR 3203 (a) (6)]

Upon completion of scheduled or unscheduled inspections all findings will be prepared in writing and submitted to department chairs and SRM. Corrective action, or a suitable timetable for elimination of a hazard (where appropriate) is the responsibility of the department. SRM will, however, assist by obtaining expert corrective assistance and University-wide funding where appropriate and necessary.

12.1 Imminent Hazard Situations

Individuals conducting a safety inspection shall immediately notify the Department Chair/Head or the SRM Office, as appropriate, if a condition exists that presents an imminent hazard to health or safety. The Department Chair/Head shall inform all employees of any such imminent hazard(s) that cannot be immediately corrected and ensure that all necessary precautions are taken to prevent mishaps.

An imminent hazard is any condition or practice where there is reasonable certainty that a hazard exists that can be expected to cause death or serious physical harm immediately or before the hazard can be eliminated through normal corrective measures; e.g. an employee is working on an electrical line without shutting off the power. A conspicuous notice or "yellow tag" will be attached to the hazardous condition prohibiting use by employees or students of the area, machine, or equipment which presents the hazard. The notice may not be removed until the hazardous condition no longer exists, and required safeguards and safety devices are implemented. Only a UPD or Facilities Services official can remove a notice. Personnel who continue to use an item that has been so tagged, or who willfully remove a tag before the unsafe condition is corrected, are subject to severe disciplinary action. Entry or use may be allowed with the Assistant Director of SRM's knowledge and permission for the sole purpose of eliminating the hazardous condition.

13.0 Employee Safety Training [8 CCR 3203 (A) (7)]

Effective dissemination of safety information lies at the very heart of a successful Injury and Illness Prevention Plan. It is necessary to provide training for employees concerning general safe work practices as well as specific instruction with respect to hazards unique to each employee's job assignment. It is the policy of the California State University to provide training for employees in compliance with regulatory requirements. A general Employee Safety Handbook is available online at: http://www.csustan.edu/DPS/Documents.html

13.1 General Safe Work Practices

SRM has access to training programs designed to meet general safe work practice requirements. These programs are elements of larger programs which service broad campus needs. These programs include but are not limited to (see section 15.0 for further description):

Biological Safety Chemical Hygiene Emergency Preparedness

Fire Safety Hazard Communication Ergonomics
Public Health & Sanitation Exposure Control Defensive Driving

Campus Violence Prevention Hazardous Materials Management

13.2 Specific Safe Work Practices

Specialized training sessions dealing with an employee's unique job assignment must be developed or arranged for by each supervisor. It is the responsibility of each supervisor to understand his/her employee's job tasks and related hazards. Supervisors should refer to the Campus Training and Professional Development (CTPD) website for guidance on training required by regulation. The CTPD website address is: www.csustan.edu/ctpd/

13.3 Scheduled Training

- a. Each supervisor will ensure that all new employees receive general and specific training prior to assignment on a new job.
- **b.** Supervisors will ensure that employees are trained whenever new substances, processes, procedures or equipment are introduced to the workplace which represent a new hazard or whenever the supervisor receives notification of a new or previously unrecognized hazard.
- **c.** All training will be documented in writing. Topics, participants and dates will all be recorded and kept on file within each department, along with copies provided to the SRM office.

13.4 Long-Range Training Plan

A long range departmental training plan should be developed which sets priorities for training sessions, including a schedule of presentations. Consideration should also be given to frequency required for retraining employees. These refresher programs should also be incorporated in the long range plan. The SRM Office maintains a Master Safety Training calendar in accordance with local, state and federal regulations.

14.0 Recordkeeping [8 CCR 3203 (A) (1) & (2)]

Many standards and regulations of Cal/OSHA contain requirements for the maintenance and retention of records for occupational injuries and illness, medical surveillance, exposure monitoring, inspections, and other activities and incident relevant to occupational safety and health. See Appendix C for complete EH&S Records Retention Schedule.

14.1 Campus Accidents, Injuries and Illness

To properly protect the University, it is essential that all accidents, injuries and illness occurring either on University property or at off-campus University sponsored events are maintained and analyzed by UPD/SRM Department. Complete records of all incidents involving bodily injury and property damage accidents involving students and/or visitors are maintained and analyzed for accident prevention and campus liability purposes by UPD/SRM. It is essential that all such incidents be reported immediately and in writing to the University Police.

Reports of accident and injury incidents may be generated by the University Police (accidents involving the campus community, traffic accidents, state driver accidents, etc.), Housing Office (resident accidents, intramural sports, etc.), Athletic Department, and Student Health Services (student injuries, doctor's first report of industrial injury of illness, etc.).

Information from these records are available to departments for use in accident prevention efforts. In addition, departments should also maintain and analyze records of accidents occurring in their own area of operations.

14.2 Occupational Injuries and Illness

- **a.** The University will record and report within five (5) days every employee injury or illness unless disability resulting from such injury or illness does not last through the day or does not require medical service other than minor first-aid treatment.
- **b.** The University will maintain a log and summary of occupational injuries and illness.
- c. Records of occupational injuries and illness are kept in specified files and will be made available for review by Cal/OSHA at any time for a period of five (5) years. Accident, Injury and Illness Reporting, Investigation and Analysis Program details the methods by which this will be accomplished.
- **d.** The Cal/OSHA summary for the previous year will be posted in a conspicuous place on campus for review by employees.

e. Employee injuries and illness will be recorded and analyzed periodically. These statistics are first submitted to the CSU Office of the Chancellor and from there to the Governor's Safety and Worker's Compensation Program in Sacramento.

14.3 Material Safety Data Sheets (MSDSs)

MSDSs for each material or chemical in the workplace must be on-site and readily available to all employees. While accessibility to computers and online databases are acceptable, binders of hard-copy MSDSs are more readily available in most cases on campus. Supervisors of departments with access to chemicals for any work purpose are responsible to maintain or assign maintenance of the MSDS binder for their area. The binder must be readily accessible and available for inspection at any time.

The SRM office receives duplicate copies of any newly purchased chemicals and maintains a hard-copy binder categorized by responsible department.

14.4 Employee Exposure Records

Each employee exposure record will be preserved and maintained for at least 30 years except for certain background data to workplace monitoring and certain biological monitoring results. Such records include workplace monitoring or measuring of a toxic substance or harmful physical agent; biological monitoring results which directly assess the absorption of a toxic substance or harmful physical agent by body systems; material safety data sheets; and in the absence of the above, a chemical inventory or any other record which reveals where and when used and the identity of a toxic substance or harmful physical agent in accordance the Proposition 65 statutes and the Cal/OSHA requirements as noted in Title 8, Article 110. Departments using any regulated carcinogens have additional reporting and recordkeeping requirements under Cal/OSHA.

The University recognizes that employees, their designated representatives, and authorized representatives of the Chief of the Division of Occupational Safety and Health (Cal/OSHA) have a right of access to relevant exposure and medical records. Such access is necessary to yield both direct and indirect improvements in the detection, treatment and prevention of occupational disease. Whenever an employee or designated representative requests, in writing, access to a record, the University shall assure that access is provided in a reasonable time, place and manner.

Employee exposure to hazardous materials records may be obtained by contacting the Assistant Director of SRM at the UPD. Medical Records are accessible by contacting the Human Resources office. Any employee or designated employee representative may request, in writing, access to any legally obtainable information. The requested information will be provided within five (5) working days if available. Copies may be obtained by written request and will be completed within five (5) working days.

14.5 Medical Records

The medical record for each employee will be preserved and maintained for at least the duration of employment plus thirty (30) years except for certain health insurance claims records, first aid records, or the medical records of employees who have worked for less than one (1) year if they are provided to the employee upon termination of employment. Such records include medical and employment questionnaires or histories; the results of medical exams and lab tests; medical opinions, diagnoses, progress notes, and recommendations; first aid records; descriptions of treatments and prescriptions; and employee medical complaints.

14.6 Employee Exposure and Medical Record Analyses

Each analysis using exposure or medical records will be preserved and maintained for at least thirty (30) years.

14.7 Documentation of Activities

Essential records, including those legally required for workers' compensation, insurance audits and government inspections will be maintained for as long as required. The University will also keep records of steps taken to establish and maintain the Injury and Illness Prevention Program. They must include:

- **a.** Records of scheduled and periodic inspections to identify unsafe conditions and work practices. The documentation includes the name of the person(s) conducting the inspection, the unsafe conditions and work practices identified, and the corrective action(s) taken. These records will be maintained for at least three (3) years.
- **b.** Documentation of health and safety training for each employee. Specifically, employee name or other identifier, training dates, type(s) of training and the name of the training provider will be included. Records will be retained for at least three (3) years.

c. Training records will be kept in each department with copies provided to the SRM office, as appropriate.

15.0 General Safety Resources

Programs incorporated into the overall campus Injury and Illness Prevention strategy exist for which SRM has established oversight. This helps ensure that adequate environmental health and safety measures are taken. Existing programs are outlined below; specific elements are contained in the appendices noted.

15.1 Biological Safety

The Biological Safety program provides for the review of the University's teaching projects, research activities and facilities involving the acquisition, use, storage and disposal of biohazardous agents. The program provides the University's assurance of compliance with applicable institutional policies, NIH Guidelines, and state regulations regarding the use of infectious agents and toxin-producing agents that have the potential for causing disease in healthy individuals, animals or plants. The complete Exposure Control Plan and Biohazardous Waste Handling Guidance Chart are available online at: http://www.csustan.edu/DPS/Documents.html

15.2 Chemical Hygiene & Lab Safety

The Chemical Hygiene Plan (CHP) includes information on methods of safe handling and storage of reactive and toxic substances, as well as personal protection. Available toxicological information includes permissible exposure limits to certain chemicals, as well as effects of overexposure to various target organs.

Individual Chemical Hygiene Plans are maintained by Departments in the College of Natural Sciences and the College of the Arts. The University Chemical Hygiene Plan Template is available from the Assistant Director of Safety & Risk Management.

Faculty who are Principle Investigators and SRM staff members conduct walkthrough surveys of lab spaces for the purpose of advising the research staff and students about physical and chemical hazards routinely found in research lab settings. Problems connected with chemical storage, waste management, earthquake preparedness, electrical hazards, personal protection, etc. are focused upon.

15.3 Emergency Preparedness

The campus Emergency Preparedness program provides for a consistent and adequate means of handling a variety of emergencies. University personnel, students and the public are informed of and included in the preparedness and response strategy. The campus Emergency Operations Plan (available online at: http://www.csustan.edu/DPS/Documents.html) outlines the actions to be taken by the University in response to emergency situations. The goals of this Plan are the preservation of life, the protection of property, and continuity of campus operations. More information is available at: www.csustan.edu/emergency

15.4 Fire Safety

The written Fire Safety program establishes practices and procedures to control potential fire hazards and ignition sources; installation and maintenance of fire protection equipment and systems; regular portable fire extinguisher inspections and maintenance; and employee training on the use of fire extinguishers and fire protection procedures. The complete Fire Safety Program is available online at: http://www.csustan.edu/DPS/Documents.html

15.5 Hazard Communication

The written Hazard Communication Program describes hazardous substances used in each workplace, a system of labeling containers, MSDSs for each hazardous substance used, and a comprehensive training program for employees who use hazardous materials.

15.6 Workplace Ergonomics

If an employee of CSU Stanislaus has discomfort perceived to be from job related workstations then the following are some basic guidelines/options for ergonomic evaluations. These options are to assist your department in making a clear decision on actions needed to alleviate said discomfort.

- a. An employee with a perceived ergonomic concern due to consistent use of a Computer workstation (Video Display Terminal) should first communicate with their supervisor.
 - 1) If the Supervisor is in agreement to have basic evaluation by on-campus means, then proceed to #2.
 - 2) If the perception is that the employee is "injured," due to ergonomic concerns, then a "Supervisor's Report of Injury" form must be completed and a recommendation may be made to see a doctor and pursue a workman's comp report (filed

with HR). Once a doctor's prescription has been made, then the SRM office may assist with referrals to vendors of the prescribed equipment. If it is a matter of altering duties etc, SRM can also assist a supervisor with ideas to accommodate modified duty.

- b. If it is believed that the perceived discomfort, at a consistently used workstation, might be corrected by ergonomic improvements, a supervisor may contact SRM and request an ergonomic consultation.
 - 1) SRM responds to these requests by referring the supervisor and employee to a reliable online self-assessment. http://www.ergonomics.ucla.edu/seval_gen.cfm
 - 2) They are instructed to perform self-evaluations then assess/implement based on determined improvement ideas.
 - 3) In most cases, the self-evaluation remedies the situation without personal review.
- c. If after implementing improvements that were learned through the self-assessment, the employee still has discomfort or problems, then the supervisor may request an in-person workstation assessment.
 - 1) SRM will contact the employee for an appointment and perform a full evaluation (measuring chair height, distances etc.) with the supervisor and employee present.
 - 2) A full report will be prepared and given to the supervisor and employee with recommendations for ergonomic adjustments and/or product specifications.
 - 3) SRM would continue to work with the supervisor and the employee to remedy the situation as best possible.
 - 4) Any/all implementation of resulting recommendations is up to the supervisor and said department to manage and fund.

15.7 General Office Safety

Each employee shall, at all times, observe safe working methods and procedures and assist in orienting new employees in these practices. See Appendix B for general safety guidance for all employees.

15.8 Hazardous Materials Management

A written Hazardous Material Management Program provides that employees are trained in the safe handling and storage practices of hazardous chemicals; adequate safety equipment is provided in the workplace and properly maintained; employees are required to use personal protective equipment and clothing when handling chemicals; hazardous materials are properly labeled and stored; safe emergency response procedures have been established; ventilation equipment is properly used and maintained; and hazardous waste are managed in a safe and efficient manner.

15.9 Industrial Hygiene

The campus Industrial Hygiene program incorporates the consultation of third-party industrial hygiene experts for personal monitoring and environmental testing in order to identify, monitor and control potentially harmful substances and physical agents in the campus environment. Specific attention is paid to such areas as noise, personal protective equipment and clothing, medical monitoring, ergonomics, indoor air quality, and exposure to toxic materials.

15.10 Exposure Control Program

The goal of this program is to limit occupational exposure to blood and other potentially infectious materials since any exposure could result in transmission of blood borne pathogens which could lead to disease or death. The primary feature of this program is a written Exposure Control Plan which incorporates the following major components:

Exposure Determination
Post-Exposure Evaluation and Follow-up
Tags, Labels and Bags
Laundry Practices
Training and Education of Employees and Students

Control Methods Infectious Waste Disposal Housekeeping Practices Record Keeping

The written campus Exposure Control Plan (available online at: http://www.csustan.edu/DPS/Documents.html) outlines the actions to be taken by the University in response to and prevention of employee and student exposure to infectious materials

15.11 Public Health and Sanitation

The Public Health and Sanitation program provides for regular inspections of all housing and food establishments on campus to ensure that operations and facilities are in conformance with state and local public health codes. The swimming pool water is monitored by Facilities Services staff to guard against the presence of harmful bacteria.

15.12 Defensive Driving

The privilege of driving for State University business is extended only to those who meet a certain criteria, and it is necessary in the scope of their job at California State University, Stanislaus. Complete Risk Management guideline, forms and procedures for California State University, Stanislaus is available online at http://www.csustan.edu/FinancialServices/RiskManagement/index.html. The complete CSU Driving Policy Guidelines can be found online at: http://www.calstate.edu/HRAdm/Policies/csumy policy guideline.pdf.

Permission to drive for University business is granted when the following criteria is met:

- Employees/Volunteer Employees age 18 and over
- Valid State Drivers License
- DMV record meets Risk Management standard for University Drivers
- Completed Defensive Driver Course provided by the State Dept. of General Services.
- · Authorized in writing by a Unit or Program Manager (Dean, Director, etc.) authorized to grant such approval

15.13 Campus Violence Awareness

Civility, understanding, and mutual respect towards all persons are intrinsic to the existence of a safe and healthy workplace. Threats of violence or acts of violence not only impact the individuals concerns, but also the mission of the University to foster higher education through open dialogue and the free exchange of ideas. California State University, Stanislaus prohibits violent acts or threats of violence, and any member of the campus community who commits a violent act or threatens to commit a violent act is subject to disciplinary action and/or civil or criminal prosecution as appropriate.

California State University, Stanislaus has zero tolerance for violence against any member of the workforce, other persons in the workplace, or property.

For the purpose of this policy, violence and threats of violence include, but are not limited to:

- a. Any act that is physically assaultive; or
- b. Any threat, behavior or action which is interpreted by a reasonable person to carry the potential:
 - 1) To harm or endanger the safety of other;
 - 2) To result in an act of aggression; or
 - 3) To destroy or damage property.

Established personnel and UPD procedures will serve as the mechanism for resolving situations of violence or threats of violence. Each allegation of violence or threat of violence will be taken seriously. Individuals are encouraged to report violence, acts of violence, threats of violence, or any other behavior which by intent, act or outcome harms another person or property, to their supervisor, the office of Human Resources (209-667-3351) or University Police Services (209-667-3114).

APPENDICES

Appendix A – Campus Wide Health and Safety Committee Charge

I. PURPOSE

- A. To achieve and maintain continuing communications on issues relating to occupational safety and health.
- B. To discuss, research and seek resolution for problems referred to it by campus employees.
- C. To provide employees with the opportunity to voice concerns relating to hazards without fear of reprisal.

II. SCOPE

- A. The University will operate in full compliance with the California Code of Regulations Title 8 Section 3203 (c) describing the use of labor/management safety and health committees.
- B. The Committee is authorized to make recommendations on those problems that have been discussed and researched, and make recommendations for resolution.
- C. In order to have a frank and open discussion, the Committee has no authority to settle any grievance being processed on campus.

III. MEMBERSHIP

- A. Members of this committee will include members from a cross section of the various departments within the University and one individual from each of the employee unions represented by collective bargaining Units (as stipulated in Provision 23.8 of the Unit 2, 5, 7 and 9 contract, Section 28.9 of the Unit 6 contract, Section 37.8 of Unit 3 contract and 31.8 of Unit 4 contract).
- B. The committee will be chaired by the Assistant Director of Environmental Health, Safety and Emergency Management (EHS/EM), or a designee.

IV. RESPONSIBILITIES

- A. Meets on a quarterly basis;
- B. Prepares and makes available to the affected employees, written records of safety and health issues discussed at the committee meetings. Maintains records of meeting minutes for at least one (1) year.
- C. Reviews results of periodic, scheduled worksite inspections;
- D. Reviews results of occupational accident investigations and causes of incidents resulting in occupational injury, illness or exposure to hazardous substances; and where appropriate, submits suggestions to management for the prevention of future incidents;
- E. Reviews investigations of alleged hazardous conditions brought to the attention of any committee member. When determined necessary by the commit, the committee may conduct its own inspection and investigation to assist in remedial solutions;
- F. Submits recommendations to assist in the evaluation of employee safety suggestions; and
- G. Upon request, verifies corrective action taken in response to Cal/OSHA or other appropriate regulatory agency citations.

Appendix B – Sample Inspection Charts

GENERAL OFFICE SAFETY	YES	NO
Have employees been trained in pertinent safe work practices and procedures for their workplace?		
Are employees familiar with appropriate emergency phone numbers and procedures?		
Are first aid kits readily available?		
Are all work areas and walkways clear and free of obstruction and extreme clutter?		
Have tripping hazards been eliminated?		
Are boxes or heavy objects stored on low surfaces (low risk of falling)?		
Are loaded bookshelves bolted to the wall (earthquake safety)?		
Are file cabinet drawers kept closed when not in use (avoid tripping hazard)?		
Are safe lifting techniques used?		
Are Video Display Terminals (VDTs, computer screens) maintained at eye level to the user?		
Are VDTs tilted or anti-glare?		
Are VDTs ~18" from the user's eyes?		
Are Material Safety Data Sheets (MSDSs) available for all hazardous substances employees may encounter?		

FIRE SAFETY	YES	NO
Are extension cords continually used? [no allowed per CFC 8506]	MUST CORRECT	
Are any extension cords or power strips plugged into one another (piggy-backed)? [not allowed per CFC 8506]	MUST CORRECT	
Are any fire extinguishers or fire alarm pull stations obstructed within 36"? [not allowed per CBC 1001]	MUST CORRECT	
Are there any items stored within 18" from the ceiling? [not allowed per 19 CCR 3.14, 3.19]	MUST CORRECT	
Is a portable space heater used inside a campus building? [19 CCR 3.14, Governor's Order 1992] * The only conditions allowed are if heaters are provided with tip-over protection, are shut-off and unplugged when area is unoccupied, AND Supervisor(s) are made aware of the use and provide regular checks.	MUST CORRECT	
Are there any candles or candle warmers present? [not allowed per 19 CCR 3.14]	MUST CORRECT	
Are any flammable liquids kept outside a proper flammable storage cabinet? [no allowed per CFC 7902.5.9]	MUST CORRECT	
Are emergency procedures and contact numbers readily visible to employees?		MUST CORRECT

HAZARDOUS SUBSTANCE COMMUNICATION (HazComm)	YES	NO
Is there a list of hazardous substances used in your workplace?		
Is each hazardous substance container labeled with product identity and a hazard warning?		
Is there a Material Safety Data Sheet (MSDS) readily available for each hazardous substance present?		
Were employees trained regarding hazardous substances? Including:		
■ An explanation of MSDSs, how to obtain and use?		
■ An explanation of "right-to-know?"		
• Identification of hazardous substances present and the written HazComm program?		
■ The physical and health hazards of substances in the work area, how to detect their presence and		
the location of such hazards?		
How employees will be informed of hazardous materials locations (labeling, etc.)?		

LABORATORY SAFETY	YES	NO
Are bench tops kept clean and dry from spills?		
Are areas under sinks kept clear of debris?		
Are chemicals properly stored in cabinets, drawers and shelves?		
Is each hazardous substance container labeled with product identity and a hazard warning?		
Are hood flow rates checked for proper ventilation?		
Are hazardous chemicals stored under hoods when in use?		
Are all aisles kept clear of chairs and other obstructions/debris?		
Are window ledges not used for storage of chemical or projects?		
Is the floor kept dry to prevent slipping?		
Are chairs or stools properly maintained?		
Are safety glasses, face shields, and protective clothing used when handling hazardous substances?		
Are compressed gas cylinders stored upright and strapped down?		
Is broken glassware disposed of in proper containers?		
Is a "No Smoking, No Eating, No Drinking" sign posted in the lab?		
Is tubing used properly and in good condition?		
Are all mechanical devices guarded on moving parts?		
Is all lab equipment kept in good condition?		
Are refrigerators used ONLY for the storage of chemical and not food?		
Are emergency eyewash fountains and showers checked regularly?		
Are reactive chemicals stored separately?		
Is there a Material Safety Data Sheet (MSDS) readily available for each hazardous substance present?		

PERSONAL PROTECTIVE EQUIPMENT (PPE)	YES	NO
Is PPE provided, used and maintained wherever it is necessary?		
Is employee/student-owned protective equipment adequate and properly maintained?		
Are eye and face protection available where debris or flying objects could be a hazard?		
Are earplugs or muffs provided and worn during noisy conditions?		
Are hard hats or safety shoes available where falling objects could be a hazard?		
Are approved safety glasses required to be worn at all times in areas where there is a risk of eye injuries?		
Are employees who use corrective lenses in working environments with harmful exposures, required to wear only approved safety glasses, protective goggles, or to use other medically approved precautionary procedures?		
Are protective gloves, aprons, shields, or other means provided against cuts, corrosive liquids and chemicals?		
Are hard hats inspected periodically for damage to the shell and suspension system?		
Is appropriate foot protection required where their risk of foot injuries from hot, corrosive, poisonous substances, falling objects, crushing or penetrating actions?		
Are approved respirators provided for regular or emergency use when needed?		
Is all protective equipment maintained in a sanitary condition and ready for use?		
Do you have emergency eye wash facilities and quick drench shower within a work area where persons are exposed to injurious substances?		
Where special equipment is needed for electrical workers, is it available?		
When lunches are eaten on the premises, are they eaten in areas where there is no exposure to toxic materials or other health hazards?		

Appendix C – EH&S Records Retention Schedule

EH&S records are maintained as per CSU Executive Order 1031 and University Policy. The following table shows the records retention schedule items that pertain to the Injury and Illness Prevention Program.

Record Identifier	Records F-		ord Va Operati Fisca Lega Histor V - Vita	onal al al ical		Retention Source Authority	Retention Period ¹		
3.0			0	F	L	Н	٧		
3.1	Hazardous Materials Shipping Papers - Shipper requirements	Assistant Director of Environmental Health, Safety and Emergency Management			Х			49 CFR §§ 172.201(e), 174.24, 176.24, 177.817(f)	2 years after the material is accepted by the initial carrier
3.2	Hazardous Materials Shipping Papers - Receiver requirements	AD of EHS/EM			Х			49 CFR §§ 172.201(e), 174.24, 176.24, 177.817(f)	1 year
3.3	Hazardous Waste Shipping papers	AD of EHS/EM			Х			49 CFR §§ 172.201(e), 174.24, 176.24, 177.817(f)	3 years per 22 CCR 66262.40(9), 66264.71 (b) (6) (CSUF)
3.4	Hazardous Waste Facility Inspections	AD of EHS/EM			Х			22 CCR 66364.15 (d) (CSUF)	3 years
3.5	Hazardous Waste Manifests	AD of EHS/EM			Х			CCR Title 22 §66262.40(a) and 66264.71(b)(6)	3 Years
3.6	Medical Waste Generator Records - Small Quantity Generators	AD of EHS/EM			Х			CA HSC 117975	2 years
3.7	Medical Waste Generator Records - Large Quantity Generators	N/A			Х			CA HSC 117975	3 years
3.8	Environmental Remediation Records	FACILITIES SERVICES	Х					40 CFR, CCR Title 22, 23, 25, 27 (CSUF)	10 Years
3.9	IH Equipment Records: purchase, repair, and calibration	AD of EHS/EM, FACILITIES SERVICES	Х					CSU Best Practice	Purchase and Repair Records - Duration of Equipment. Calibration Records - Permanent
3.10	Exposure Monitoring Data	AD OF EHS/EM			Х			CCR Title 8 §3204 (b)(2)& (d)(1)(b)	Permanent
3.11	Medical Monitoring, such as those required for the hearing conservation program, respiratory protection, and asbestos and lead specific requirements. Typically comes as a confirmation/permission from a doctor.	AD OF EHS/EM			Х			CCR Title 8 §3204 (d)(1)(a)	30 years after the separation of the employee
3.12	Personal Exposure Monitoring (Associated with employee exposure to toxic substances or harmful physical agents).	AD OF EHS/EM			Х			CCR Title 8 §3204 (d)(1)(b)	30 years after the separation of the employee
3.13	Radiation & Dosimetry Exposure Reports. Typically comes as a confirmation/permission from a doctor.	N/A	Х		Х			10 CFR 20.2106	30 years after the separation of the employee
3.14	Radioactive Material historical inventories; storage and use locations	N/A	Х		Х			17 CCR 30293	Originals 3 Years after the transfer or disposal of the radioactive source
3.15	Radioactive Material License and Amendments	N/A	Х		Х			17 CCR 30194	Originals 30 Days after expiration
3.16	Radioactive Material, Laser, and Controlled Substance Use Authorizations	DEPT. OF PHYSICS	Х		Х			CSUF APM 527, 526; ANSI Z 136.1	Permanent
3.17	Agency Inspection Records	AD OF EHS/EM	Х					40 CFR, CCR Title 22, 23, 25, 27 (CSUF)	3-5 years - dependent upon the agency
3.18	Confined Space Entry Permits	FACILITIES SERVICES			Х			CCR Title 8 §5157(e)(6)	1 year
3.19	Pesticide Monthly Use Reports	FACILITIES SERVICES			Х			CCR Title 3 §6624 (f)	2 years

3.20	CPR Training Records	AD OF EHS/EM	X		CSU Best Practice	1 year
3.21	Defensive Driver Training	AD OF EHS/EM		Х	SAM MM07-05 CSU Use of University and Private Vehicles Policy Guidelines pp4-5	4 years
3.22	First Aid training records	AD OF EHS/EM		X	29 CFR 1910.1030	3 years
3.23	Hazardous waste training records	AD OF EHS/EM		Х	CCR Title 22 §66264.16 (e)	As long as employee remains at the facility or for three years following departure.
3.24	Employee training records, excluding hazardous waste training records	AD OF EHS/EM, DEPARTMENT SUPERVISORS, HUMAN RESOURCES	Х		CCR Title 8	3 years
3.25	Student training records	ACADEMIC DEPARTMENTS	Х		CSU Best Practice	3 years
3.26	Injury Reports (OSHA 300, 301, 300A)	HUMAN RESOURCES, EHS/EM	Х	Х	CCR Title 8 §14300.33(a)	5 years following the end of the calendar year the records cover
3.27	Injury Reports reported to Police	UPD, AD OF EHS/EM		X	CSU Best Practice	7 years
3.28	Air Pollution Control District requirements	AD of EHS/EM, FACILITIES SERVICES		Х	Local APCD rules - citation numbers are dependent on the district	5 years
3.29	Respirator Fit Test Records	FACILITIES SERVICES		X	CCR Title 8 §5144(m)(2)(B)	Until next fit test is administered. Fit tests are required annually.
3.30	Employee Tenant Asbestos Notifications (annual notification)	AD OF EHS/EM		X	CCR Title 8 §1529(n)(6)	As Long as the Asbestos Containing Material (ACM) is in the building
3.31	Water quality data under Sanitary Sewer Permit	FACILITIES SERVICES		X	Non-industrial wastewater discharge permit issued by city	3 years
3.32	Water quality data under Regional Water Quality Control Board Orders	FACILITIES SERVICES		Х	Waste Discharge Order No. R3-2003- 035	Not Specified
3.33	Hazardous Waste Exception Report	AD OF EHS/EM		X	Title 22, CCR § 66262.40(b)	3 years
3.34	Biennial Report	AD OF EHS/EM		X	Title 22, CCR § 66262.40(b)	3 years
3.35	Laboratory analysis results for hazardous waste determinations	AD OF EHS/EM		Х	Title 22, CCR § 66262.40(c)	3 years
3.36	Employee "pull" notices (DMV Reports)	AD OF EHS/EM	Х		CVC 1808.1 (CSUF)	4 years
3.37	Regulatory Agency required plans	AD OF EHS/EM		Х	40 CFR, CCR Title 22, 23, 25, 27 (CSUF)	3 years
3.38	Regulatory Agency permits	AD of EHS/EM, FACILITIES SERVICES		Х	Title 25: 40510 & 44344; Title 22, 23, 27 (CSUF)	3 years
3.39	IIPP periodic inspection records	AD OF SRM, DEPARTMENT SUPERVISORS	Х	Х	CCR, Title 8, 3202 (b)(1)	1 year
3.40	Asbestos survey records	FACILITIES SERVICES, EHS/EM	Х	Х	40 CFR, Part 763	Life of the building
3.41	Lead inspection/risk assessment records	FACILITIES SERVICES	Х	Х	CCR, Title 17, 36000 (b)	Required: 3 years Recommended: Life of the building.