Policy Process Council

Agenda
1. Greetings and Introductions
2. Council Role
3. Status of Policy
4. Other Business and Adjourn

Invited Guest
Dr. Michael Sanseviro, Associate Vice President and Dean of Students, Student Affairs.

Representative | Attended | Representing
--- | --- | ---
Jeffrey Bernard | Yes | Staff Senate
Ray Burgos | Yes | Strategic Communication and Marketing
Tammy DeMel | Yes | University Relations
Joan Duncan, Ph.D. | Yes | University Advancement and Development
Fatimot Ladipo | Yes | Government Relations
Lectra Lawhorne | Yes | Information Technology and Services
Tamara Livingston, Ph.D. | Yes | Administrators Council
Ron Matson, Ph.D. | Yes | Academic Affairs and Deans Council
Bob Mattox, Ph.D. | Yes | Student Policy
Douglas Moodie, Ph.D. | No | Faculty Senate
Nwakaego Nkumeh, J.D. | Yes | Legal Affairs
Susan Paraska | Yes | Institutional Effectiveness, Chair
Alice Pate, Ph.D. | Yes | Chairs and Directors Assembly
Ed Posaski | Yes | Athletics Department
Lily Roche | Yes | Student Government Association
Diane Walker, J.D. | No | Student Affairs
Christine Ziegler, Ph.D. | Yes | Research
Pending | No | Business and Finance

1. Greetings and Introductions

Chair opened the meeting and each of the attending Fall 2016 Council representatives introduced themselves.
2. Policy Process Council Role

Chair provided brief background of the Policy Process Council using the Policy at KSU website as reference for Council’s oversight and management of policy review and approval process.

3. Status of Policy

   a. Revised Policy based on mandated requirements.

      1) The **Sexual Misconduct Policy** was revised effective July 1, 2016 based on changes made by the Board of Regents of the University System of Georgia in May 2016. **Erika Gravett**, Executive Director of Institutional Equity and Title IX Officer is presenting to the elected and administrative governance bodies and sharing information on the impact of the revised policy. Erika will be present to the Council in October. For information about the revised policy, please view it online at [https://policy.kennesaw.edu/content/sexual-misconduct-policy](https://policy.kennesaw.edu/content/sexual-misconduct-policy). FAQs (Attch 1) for the policy are included with this agenda that describe impacts and changes associated with this revision.

      2) Board of Regents Policy 4.6.5, **Standards for Institutional Student Conduct Investigation and Disciplinary Proceedings**, was revised effective July 1, 2016. Diane Walker, Assistant Dean for Conduct and Compliance, is the lead for implementation of the required changes.

         **Dr. Michael Sanseviro** said the change focused on procedures and training. The new procedures ensure due process by providing a full hearing that is appropriate to the level of review for the violation. For KSU this was not a major change. One of the changes concerned training of panel members. Hearing panel members must now be trained by individuals external to the Department of Student Conduct and Academic Integrity (but within the University) to mitigate any perception of undue influence on panel decisions.

         i. The revised USG policy may be read at: [http://www.usg.edu/policymanual/section4/policy/C332/#p4.6.5_standards_for_institutional_student_conduct_investigation](http://www.usg.edu/policymanual/section4/policy/C332/#p4.6.5_standards_for_institutional_student_conduct_investigation).


      3) The **Unmanned Aerial System and Other Aircraft Policy** was revised effective August 29, 2016 based on changes by the regulatory agency. Andy Altizer, Director of Emergency Management, is the lead for the policy and associated procedures. The policy is online at [https://policy.kennesaw.edu/content/unmanned-aerial-system-and-other-aircraft-policy](https://policy.kennesaw.edu/content/unmanned-aerial-system-and-other-aircraft-policy). Information about unmanned aerial systems and procedures for requesting permission are available on the Department of Public Safety website at [http://police.kennesaw.edu/uas/index.php](http://police.kennesaw.edu/uas/index.php).
b. New policy.

1) **Programs Serving Minors** (Attch 2) was approved by the Board of Regents at its August 10, 2016 meeting. Presidents of all USG institutions must develop procedures and submit them before January 1, 2017. At present, this requirement is in the Office of the President. A copy of the Chancellor’s memo and policy information is included for your review.

The Division of Legal Affairs is the lead for this new policy and for the new procedures. **Nwakaego Nkumeh**, Legal Affairs, said that since the institutional policy/procedures are due January 1, 2017, presentation of that information would need to be occur in November 2016 to ensure time for the interim president to review and sign. Since representatives of the elected and administrative bodies are Council members, the Chair asked them to please send the date in November on which Legal Affairs staff could present information about this new policy and proposed procedures.

**Follow-up:** Chair sent an email requesting a date for presentation in November 2016 to the governance bodies for Legal Affairs.

2) The **Risk Management of Experiential Learning Policy** (Attch 3) is in a holding status. The WellStar College of Health and Human Services requested an update of the status for continuing with this proposed policy.

**Follow-up:** The Chair sent an email to Provost Ken Harmon, Dr. K.C. White (VP-Student Affairs), and Ms. Julie Peterson (Interim Chief Business Officer) asking for a review of the current propose policy and a decision or guidance on proceeding or not.

4. **Other Business and Adjourn**

**Dr. Tamara Livingston** presented information and a demonstration of **Scholarly Online Access Repository (SOAR)** a new resource provided by the KSU Archives. The main SOAR Web page is at [https://soar.kennesaw.edu/](https://soar.kennesaw.edu/) and a direct link to KSU policies is [https://soar.kennesaw.edu/handle/11360/1895](https://soar.kennesaw.edu/handle/11360/1895). The direct link to the section of SOAR with access to policies is a stable URL, meaning it won't change over time so it may be added as a bookmark.

Dr. Livingston invited Council representatives to visit the site on their own and offer feedback on its usability. She also offered that a collection may be established in SOAR for shared governance committees and other official bodies or committees to archive their agendas, minutes, bylaws, and other records of enduring value. Please feel free to share this information and also to contact her directly by email at tlivings@kennesaw.edu or by phone at (470) 578-6989.

**Remaining Fall 2016 Meetings:**
- October 25, 2016, Marietta Campus, Q Building, Room 204
- November 15, 2016, Kennesaw Campus, Town Point, Room 4130

**Meeting attendance and participation.** Please do not send delegates to Council meetings. Meeting information is provided in advance of each meeting and meeting summaries are made available to Council representatives generally within one week following a meeting. Should you not be able to attend a meeting, we will find a time to meet with you.
Q: What are the most significant changes with this newly revised policy?
A: There are several significant changes as described below.

- The Investigator is no longer the fact-finder in student cases. The fact-finder in student cases is a three-person staff/faculty panel.

- University individuals defined as “Responsible Employees” (any administrator, supervisor, faculty member or other person in a position of authority) and student employees who serve in a supervisory, advisory, or managerial role (teaching assistants, residential assistants, student managers, orientation leaders, etc.) must report complaints of or information regarding sexual misconduct to the Title IX Coordinator at 470-578-2614 or eeo@kennesaw.edu. The University System of Georgia will conduct web-based training for those identified as Responsible Employees.

- During the investigative process, each party is allowed to have an advisor of their choice (this could be an attorney) with them at all meetings and may also have up to two family members attend all meetings.

Q: What is the process for handling sexual misconduct cases?
A: The Office of Institutional Equity receives reports of sexual misconduct and, upon receipt of reports, conducts investigations and engages in the resolution process. The Office of Institutional Equity coordinates possible remedial actions or other responses reasonably designed to minimize the recurrence of the alleged conduct as well as mitigate the effects of any misconduct.

Please refer to this information:

Q: What is the composition of the hearing panels?
A: Members of hearing panels are KSU faculty and staff. Currently there are three faculty and 17 staff members available for panels. Factors such as race, gender, college, and department are considered in order to provide a range of perspectives. Panelists must complete a two-day training session before serving on a panel. Panel members are also required to attend quarterly trainings. KSU is working to build an ongoing list of volunteers who can commit to the training and service for more than one year.

Q: Who currently serves on the hearing panels? How can we help?
A: The panelists are mostly staff. Initially, we had seven faculty members and 13 staff members volunteer. Due to conflicts, only three faculty members completed the training. Ideally we need more faculty as panelists. Based on the past year’s caseload, we need enough panelists to conduct 54 hearings. Because of the time and financial investment (institution) in training, the
Office of Institutional Equity invites and strongly encourages panel members to continue their service in successive years.

Q: How does this new, revised policy (July 2016) impact protection of students?
A: Students are now able to present their case to a trained three-person panel versus a single qualified investigator.

Q: As Chairs and Directors, are we to inform students who are teaching assistants?
A: No, online training will be provided to all employees including student employees who serve in a supervisory, advisory, or managerial role. This training includes teaching assistants, student managers, orientation leaders, etc.

Q: What is the selection process for hearing panel members?
A: Last year’s panel members were invited to serve this year (2016-2017). Ten of the 12 agreed to serve again. The immediate need for additional panelists was communicated to the KSU Title IX Coordinator on May 23, 2016 for a Board of Regents’ policy that was effective on July 1, 2016. Due to the immediate need, panelists were selected from among faculty and staff senate representatives in addition to current and former Student Conduct and Academic Integrity (SCAI) panel members. Training was held on July 25 and July 26, 2016. It was conducted by the sole entity designated by the Office of the Attorney General for the State of Georgia to provide sexual misconduct training to University System of Georgia institutions. There are currently 20 staff and faculty eligible to serve as panel members.

Q: What are the statistics for KSU for sexual misconduct reports and cases? How do they compare to other USG institutions?
A: KSU’s Office of Institutional Equity handles reports and cases for sexual misconduct, including sexual discrimination, sexual harassment, dating violence, domestic violence, and stalking. For sexual misconduct, this office received 68 reports and investigated 34 cases in FY2015-2016. Of the 34 cases investigated, 32 involved students. Reporting may increase as awareness increases. KSU does not have statistics to compare to other USG institutions. The number of students and employees at an institution impacts the number of complaints. The Office of Institutional Equity also receives reports of and investigates equal opportunity claims of harassment and discrimination.
**August 23, 2016**

Presidents
University System of Georgia
sent via email

Dear Presidents:

The Board of Regents (BOR) of the University System of Georgia (USG) met on August 10, 2016 in Atlanta, Georgia. During this meeting, a new policy was approved governing programs and activities serving non-student minors. The safety and well-being of these visitors to our campus is of the highest concern. The USG is committed to best practices that will provide a safe and healthy environment for all who participate, volunteer or work in these activities. This new policy will further our efforts to promote the safety and welfare of those who participate in these programs.

During this meeting, the BOR also approved revisions to the Internal Audit Charter and the Compliance and Ethics Charter. The Internal Audit Charter was revised to reflect the responsibility of the USG Chief Audit Officer to provide formal input into the performance evaluations of institutional chief auditors. The Compliance and Ethics Charter was revised to reflect the assignment of the Enterprise Risk Management and Compliance and Ethics functions to the Vice Chancellor of Organizational Effectiveness.

Attached as an exhibit is a document which shows the language of the new policy provision, background information and also guidance on required actions by each institution. The exhibit also provides additional information on the approved revisions to the charters. Please share widely with the appropriate offices on your campus to include the athletic department, academic affairs, student affairs, business affairs, facilities, legal affairs, human resources, and internal audit. Questions about the policy change should be directed to the Office of Organizational Effectiveness and questions about internal auditor performance evaluation should be directed to the Office of Internal Audit & Compliance.

Sincerely,

Henry M. Huckaby
Chancellor

Enclosure

cc: Dr. Steve Wrigley, Executive Vice Chancellor for Administration
Dr. Micheal Crafton, Interim Executive Vice Chancellor and Chief Academic Officer
Sam Burch, Vice Chancellor for Legal Affairs and Secretary to the Board
Marion Fedrick, Vice Chancellor for Human Resources
John Fuchko, III, Vice Chancellor for Internal Audit & Compliance / Chief Audit Officer
Jim James, Vice Chancellor for Facilities
Dr. Joyce Jones, Vice Chancellor for Student Affairs

"Creating A More Educated Georgia"
www.usg.edu
Shelley Nickel, Vice Chancellor of Fiscal Affairs and Planning and Treasurer to the Board
Charlie Sutlive, Vice Chancellor for Communications
Kimberly Ballard-Washington, Associate Vice Chancellor for Legal Affairs
Kenyatta Johnson, Executive Director of Enterprise Risk Management
Wesley Horne, Director of Ethics and Compliance
Institutional Representatives for Youth Programs Initiative
I. **Policy Change: Board Policy 12.9 – Programs Serving Minors**

**A. Background:**
USG institutions offer a variety of athletic camps, science camps, clinics, after-school programs, enrichment classes and activities which bring non-student minors onto campus. These activities are more abundant during the summer when school is not in session. These programs and activities are of great educational value and serve to benefit both the institution and the larger community. These programs and activities provide institutions with the opportunity to challenge, educate and mentor young people and to introduce them to their campus in a positive and meaningful way.

The safety and well-being of these visitors to our campuses is of the highest concern. As many of these visitors are young, a special duty of care and supervision is required. The USG is committed to best practices that will provide a safe and healthy environment for all who participate, volunteer or work in these activities. This policy will require institutions with programs serving minors to implement controls designed to enhance the protection of minors.

**B. Effective Date:**
Institution presidents shall submit a copy of their institutional procedures by January 1, 2017. The new policy will become effective for programs starting on or after May 1, 2017.

**C. Board Policy 12.9 Programs Serving Minors**
University System of Georgia (USG) institutions periodically conduct, sponsor or host programs designed to serve minors who are not enrolled as students, including but not limited to camps, clinics, after school programs and activities. Employees and volunteers associated with these programs who are reasonably anticipated to have direct contact or interaction with minor program participants must be appropriately pre-screened and trained. Institution presidents are responsible for establishing institution-level procedures to implement these requirements consistent with this policy and with any implementing procedures established by the Chancellor or the Chancellor’s designee. Institution presidents shall submit a copy of their institutional procedures as directed by January 1, 2017. This policy will become effective for programs starting on or after May 1, 2017.

**D. Implementing Procedures**
The policy approved by the Board of Regents requires each institution to establish procedures to implement the requirements of this policy. Institutions will maintain the
flexibility to tailor its procedures to best suit the needs of their campus. While the new BOR policy directly addresses prescreening and training, institutions should use this opportunity to incorporate best practices in all areas. Accordingly, each campus should include the following threshold requirements in their procedures:

1. **Code of Conduct**: Each institution should develop a Code of Conduct for program staff and volunteers that addresses appropriate behavior and prohibited conduct when interacting with minors. This code should include the general prohibition against being alone with minors.

2. **Program Registration**: Each institution should maintain a registry of authorized programs.

3. **Program Requirements**: Prior to being authorized, programs must have properly considered the following:
   - Training requirements,
   - Proper screening and background checks of staff and volunteers,
   - Supervision ratios,
   - Safety and security planning,
   - Response protocols for injury, illness, participant misconduct, and staff misconduct,
   - Transportation needs,
   - Housing needs,
   - Participation requirement forms,
   - Licensing requirements of state and federal agencies.

4. **Training**: Each institution should develop and maintain a training program that addresses mandatory reporting requirements, responsibilities and expectations, relevant institutional policies, safety and security procedures, and Staff Code of Conduct.

5. **Screening & Background Investigations**: Institutions should conduct background investigations and appropriate screening of all staff and volunteers working in programs for non-student minors in accordance with the USG Human Resource Administrative Practice Manual. Personnel in charge of screening volunteers should be aware of the inherent limitations of background checks and should seek to utilize other screening methods, when possible, to include in-person interviews and reference checks.

6. **Facility Use Agreement / License Agreement**: Institutions licensing, leasing, or allowing the use of institutional facilities by non-USG entities for programs serving non-student minors must include language in a binding written agreement requiring the non-USG entity to comply with institutional policies on background checks, training and minimum insurance requirements. In accordance with Board of Regents Policy 9.10.6.3, the form used for such agreements must be USG-approved.

**E. Review of Institution Policies Due January 1, 2017**

As directed in the policy, institution presidents shall submit a copy of their institutional procedures as directed by January 1, 2017. The institutional procedures should be sent to the John Fuchko, Vice Chancellor for Organizational Effectiveness.
F. Forms & Helpful Links
A revised facility use/license agreement, sample youth program forms and helpful links will be provided under separate cover to the institutional representatives for the Programs Serving Minors initiative.

G. Additional Information
For additional information, please contact Kenyatta Johnson, Executive Director of Enterprise Risk Management (404) 962-3028 or Wesley Horne, Director of Ethics & Compliance at (404) 962-3034.

II. Internal Audit Charter Revision

A. Background
The Internal Audit Charter defines the purpose, authority, and responsibility of the University System of Georgia internal audit function. Internal audit professional standards require internal audit functions to maintain a charter outlining the audit function's roles, responsibilities, and authorities. This charter is to be approved by the governing board. The charter was last approved in January 2016. This charter revision reflects that the chief audit officer has the responsibility to provide formal input to the performance evaluations of institutional chief auditors. Institutional chief auditors currently report dually to their respective president and to the USG chief audit officer; however, the chief audit officer's role with respect to performance evaluations is not formally defined and varies among institutions. The proposed change to the charter will ensure a consistent approach across the USG while strengthening the technical audit oversight provided by the USG chief audit officer.

B. Internal Audit Charter
The Internal Audit Charter is provided on the following page. The new language is highlighted in yellow.

III. Compliance and Ethics Charter Revision

A. Background
The Compliance and Ethics Charter defines the purpose, authority, and responsibility of the University System of Georgia compliance and ethics function. The federal standards governing compliance programs states that the “organization’s governing authority shall be knowledgeable about the content and operation of the compliance and ethics program and shall exercise reasonable oversight with respect to the implementation and effectiveness of the compliance and ethics program.” A charter is a recognized tool to enhance oversight of the compliance and ethics function. The charter was last approved in January 2016. This charter revision reflects the assignment of the enterprise risk management and compliance and ethics functions to the Vice Chancellor for Organizational Effectiveness.

B. Compliance & Ethics Charter
The Compliance and Ethics Charter is provided on the following pages. The new language is highlighted in yellow.
1. Policy Purpose Statement

This policy defines Kennesaw State University’s (KSU or the University) framework for identifying, assessing, and mitigating risks associated with University sponsored experiential learning programs sponsored by KSU and to ensure the safety and security of participating students, faculty, and staff.

2. Background

Experiential learning refers to structured student learning designed to occur outside the traditional classroom and that is formally recognized or supported by the University sponsored for academic purposes. This type of learning includes activities such as internship, practicum, study abroad, cooperative education (co-op), clinical education, student teaching, field experience, and service-learning and volunteer.

Experiential learning is an integral part of the academic experience and many of KSU’s degree programs. It provides a learning experience for participating students and offers numerous benefits to students, KSU, and the participating partners. For participating students, experiential learning offers a valuable way to enhance their university experience and develop fundamental skills. For the University, the enhanced education experience can improve student admission and retention. Experiential learning also offers KSU opportunity to build partnerships with its community. For community partners, experiential learning offers the opportunity to participate in the education of the labor forces from which they access and recruit.
The benefits of experiential learning notwithstanding, such programs present challenges and risks to students, faculty, and the University. The kinds of risk associated with experiential learning activities include, but are not limited to, physical or emotional harm to a student; reputational risk to the University; and physical damage to property (University, student, and others). Such risks must be evaluated and managed by the University to ensure the benefits of experiential learning are not compromised.

KSU recognizes that the faculty, staff, and/or program leads are the primary source of knowledge and information to identify and prioritize potential risks and solutions for their experiential learning programs/activities. Additionally, some experiential learning programs/activities vary in size and scope and merit varying levels of risk assessment and management. With respect to faculty and staff liability, the State of Georgia policy states that “officers and employees shall not be subject to lawsuit or liability arising from the performance or nonperformance of their official duties of functions.” Even with this liability coverage, faculty, staff, and/or program leads should be cognizant that some experiential learning programs/activities may have inherent risks that require additional insurance coverage for faculty, staff, and/or students. (See Section 7 Associated Policies/Regulations for Georgia State Tort Claims Policy; Policy Number TCP-401-14-16.)

3. Scope

This policy covers the risk management for experiential learning programs/activities that are formally recognized or supported by the University sponsored for academic purposes. This policy and it applies to participating students, faculty, and staff involved in designing, assigning, and managing, and participating in experiential learning programs whether those programs/activities are held on or off KSU campuses and sites.

This policy does not govern the academic design or approval of experiential learning. Therefore, academic matters such as the educational goals of the experience, related assessment methods, the determination of academic credit, etc. are governed by other policies of the University.

4. Exclusions or Exceptions

The policy does not govern:

- Independent student activity or student employment that is not a part of an academic learning experience organized or recognized by the University.
- Volunteer activities by KSU faculty or staff, unless those activities are considered part of their official duties and functions.
- This policy does not govern the academic design or approval of experiential learning. Therefore, academic matters such as the educational goals of the experience, related assessment methods, the determination of academic credit, etc. are governed by other policies of the University.

5. Definitions and Acronyms

Clinical education: Entails the practice of learned didactic and experiential skills, most frequently in health care and legal settings, under the supervision of a credentialed practitioner.

Cooperative education: Special program offered by a department or school in which students alternate work and study, usually spending a number of weeks in study (typically full-time) and a
Coordinator: Refers to the KSU faculty or staff member designated to oversee an experiential learning program/activity. The Coordinator shall be typically appointed by the head of the academic or administrative unit involved in the activity (e.g., a department chair, a director, a dean, etc.). At KSU may also be used interchangeably with the terms “program lead,” “program manager,” “project investigator,” and “project manager” by departments and academic units for their experiential learning programs/activities.

Experiential learning: Refers to activities in which a student learns though experience, usually by actively applying knowledge, and which are formally recognized or supported by the university. Examples of experiential learning include, but are not limited to, internships, co-ops, practica, clinical education, student teaching, field experience and service learning. Experiential learning can happen on campus or off campus. For the purposes of this policy, experiential learning does not encompass independent activities or employment by a student which is not a part of an academic learning experience organized or recognized by the university.

Field work: Supervised student research or practice carried out away from the institution and in direct contact with the people, natural phenomena, or other entities being studied; especially frequent in fields including anthropology, archaeology, sociology, social work, earth sciences, and environmental studies.

Internship: Sustained work experience in a student’s field of interest assessed by a faculty member and supervised by an employer who is not the faculty member. Work can be part-time or full-time, paid or unpaid, on-campus or off-campus. The design of the internship determines whether or not the student may earn academic credit or have a formal transcript notation.

Practicum: A course or student exercise involving practical experience in a work setting (whether paid or unpaid) as well as theoretical study, including supervised experience as part of professional pre-service education.

Program lead; Program manager; Project investigator; and Project manager: See “coordinator” definition above.

Service learning: A course or competency-based, credit-bearing educational experience in which students (a) participate in an organized service activity that meets identified community needs and (b) reflect on the service activity in such a way as to gain further understanding of course content, a broader appreciation of the discipline, and (c) an enhanced sense of civic responsibility.

Student teaching: A student in pre-professional and pre-service teacher education who is gaining required and evaluated experience in supervised teaching.

Study abroad: Students earn academic credit for coursework that occurs outside of one of the fifty states or the District of Columbia.

University sponsored: Formally recognized and supported by the University through public endorsement, funds, and/or resources.
Policy

Faculty and/or staff designated as coordinators of KSU eKSU faculty, staff, and students are required to comply with University policies and procedures while involved in activities held off-campus, including experiential learning programs/activities. Prior to initiating any University-sponsored experiential learning programs and activities, faculty and staff are required to:

- Complete a “KSU Risk Checklist for Experiential Learning” to identify and assess risks associated with the required learning activity and take reasonable steps to ensure identified risks are eliminated, significantly reduced, or have mitigation strategies in place. High-level risks and determine mitigation solutions. More extensive and program specific risk assessment tools provided by the academic or administrative unit where the experiential learning program/activities reside may be used in lieu of this checklist.
- Review risks for their experiential learning programs at minimum each fiscal year;
- Maintain the original completed checklists in their program files for seven years; and
- Produce the risk checklist documentation for audit purposes.

The Office of Enterprise Risk Management (OERM) and the Division of Legal Affairs (DLA) can assist and advise on those matters. The KSU International Risk Management Committee, chaired by the Vice Provost for Global Affairs in the Division of Global Affairs also provides risk management support for international and education study abroad programs. The head of the academic or administrative unit involved in the experiential learning activity is responsible for ensuring the faculty and staff have been informed of the existence of this risk management policy. The head of the academic or administrative unit involved in the experiential learning activity is responsible for ensuring that the risk assessment is completed prior to the start of any experiential learning programs or activities.

Procedures

The following departments are the resources available at KSU to provide advice and support to KSU faculty and staff involved in KSU experiential learning programs. These departments are also responsible for managing their related department specific procedures to support KSU experiential learning programs. Links to procedures currently available to support risk management for experiential learning programs are provided below in Section 8 Procedures Associated with this Policy:

- Risk management, risk assessment, insurance coverage procedures are managed by the Office of Enterprise Risk Management (OERM).
- Legal review procedures for contracts and risks are managed by the KSU Division of Legal Affairs (DLA).
- Environmental health and safety procedures are managed by the KSU Environmental Health and Safety department (EHS).
- Experiential learning program design and related procedures are managed by respective department program heads and the Office of the Provost and Vice President for Academic Affairs (AAF.)
- International and education abroad program design and related procedures are managed by respective department program heads and the Division of Global Affairs (DGA). DGA disseminates information on worldwide travel conditions to KSU sites abroad and other risk entities through collaboration of the KSU International Risk Management Committee, chaired
This partnership supports collaboration on information related to matters of international health, safety, and security in support of our programs as well as our students, faculty, and staff.

- Student development, life, conduct and other services and related procedures are managed by the Division of Student Affairs (DSA).

### 6. Associated Policies/Regulations

- [BOR Policy for Education Abroad Emergency Medical Insurance](#)
- [BOR Policy Manual, 7.15 Risk Management Policy](#)
- [BOR Policy Manual, 7.16 Compliance Policy](#)
- [BOR Policy Manual, 9.12.4 Environmental and Occupational Safety Policy](#)
- [Georgia State Tort Claims Policy; Policy Number TCP-401-14-16](#)
- [Georgia Tort Claims Act (O.C.G.A 50-2-20)](#)
- [KSU Environmental and Occupational Safety Policy](#)
- [USDOL-WHD Fact Sheet #71: Internship Programs Under The Fair Labor Standards Act](#)

### 7. Procedures Associated with this Policy

- [BOR Guidelines on Personal Safety](#)
- [KSU Concern Reporting Website](#)
- [KSU Division of Global Affairs Risk Management](#)
- [KSU Education Abroad Security and Risk Management Protocol](#)
- [KSU Experiential Learning Risk Management Checklist (proposed/in development)](#)
- [KSU Guiding Principles Internships and Co-Op Participation](#)
- [KSU Insurance Information for Students (proposed/in development)](#)
- [KSU Red Flag Reporting](#)
- [KSU Institutional Guidelines on Education Abroad](#)
- [KSU Environmental Health and Safety Incident Reporting and Investigation](#)
- [KSU Risk Management Experiential Learning Checklist (proposed/in development)](#)
- [KSU Risk Management Personal Safety Guidelines (proposed in development)](#)

### 8. Forms Associated with this Policy

- [KSU Guidelines and Risk Management Personal Safety Form (proposed/in development)](#)
- [USG Legal Affairs Documents (Sample Agreements)](#)

### 9. Violations

Individuals in violation of this policy are subject to a range of sanctions, including but not limited to disciplinary action, dismissal from the University, and/or legal action.

### 10. Review Schedule

This policy is reviewed annually by the vice president and CIO/CBO/Chief Business Officer or his/her designate(s).
### Action Log [for Policy Process Council action]

<table>
<thead>
<tr>
<th>Date</th>
<th>Action</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>September 8, 2014</td>
<td>Request for information on liability and policy on issues concerning students injured at off campus site in conjunction with unpaid academic-related internship.</td>
<td>Interim Dean Monica Nandan and Dr. David Mitchell, WellStar College of Health and Human Services</td>
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<tr>
<td>February 27, 2014</td>
<td>First meeting to review purpose, scope, and overall policy requirement.</td>
<td>Dr. Monica Nandan and Dr. Beverly Maddox (WellStar College); Stephen Ndiritu (EHS); Jermaine Johnson (Legal); Janet Nash (Strategic Safety and Security); Amanda Long (Student Affairs); and Susan Paraska (Office of Institutional Effectiveness).</td>
</tr>
<tr>
<td>Through August 2015</td>
<td>Policy Development Meetings</td>
<td>Co-chairs: Dr. Monica Nandan and Mr. Stephen Ndiritu. Group members: Andrew Newton and Jermaine Johnson (Legal Affairs); Maria Britt (AVP-Operations); Janet Nash (Risk Management); Amanda Long (Student Affairs); Dr. Beverly Mattox (WellStar College); and Susan Paraska (Policy Process Council).</td>
</tr>
<tr>
<td>08/19/2015</td>
<td>Office of the AVP for Operations</td>
<td>Maria Britt and Kathy Maschke reviewed and edited policy for Dr. Hinds' review. Procedures and related forms form respective departments should be maintained separate from this policy document.</td>
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<tr>
<td>08/20/2015</td>
<td>VP for Operations and CIO/CBO Division</td>
<td>Dr. Hinds provided okay to proceed to next steps in governance process for this policy.</td>
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<tr>
<td>11/10/2015</td>
<td>Updates to policy based on feedback received to date and updating links to include DGA risk management and other related information.</td>
<td>Advance proposed copy distributed to University Safety Council so they can attend future governance bodies presentations and provide feedback to <a href="mailto:policy@kennesaw.edu">policy@kennesaw.edu</a> Also submitted to Susan Paraska for final Policy Council review and scheduling for governance bodies presentations.</td>
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<tr>
<td>01/06/2016</td>
<td>Removed broken links for new items in sections 7 and 8 and made corrections in these areas; will provide actual links once documents are finalized and available on website.</td>
<td>Kathy Maschke</td>
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<tr>
<td>01/13/2016</td>
<td>Expanded Advisory Group, including additional academic and faculty participants as recommended by Safety Council, met and provide feedback for additional edits.</td>
<td><strong>Attendees (A-Z first Name):</strong> Maria Britt (MB) Kathy Maschke (KM) Paula Bechtler (PB) Janet Nash (JN) Andrew Newton (AN) Renee Butler (RB)</td>
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</table>
Dr. Joya Carter-Hicks (JCH)  
Joel Fowler (JF)  
Brad Herring (BH)  
Mark Hiatt (MH)  
Dr. Thierry Leger (TL)  
Dr. Jon Preston (JP)  
Dr. Vanessa Robinson-Dooley (VRD)

**Invited Absent (A-Z first Name):**  
Dr. Jesse Benjamin  
Carmen Skaggs

### Responsible Office – Required Review and Approval Actions:

<table>
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<th>Responsible Office</th>
<th>1st Reading Date</th>
<th>2nd Reading Date</th>
<th>Concurrence Date</th>
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<td>Vice President Sign off</td>
<td>Dr. Randy Hinds</td>
<td>08/20/2015</td>
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**KSU Governance Body**  
Administrators’ Senate  
Chairs’ and Directors’ Assembly  
Deans’ Council  
Faculty Senate  
Staff Senate  
Student Government Association†  
University Council

President’s Cabinet

Presidential Approval Date:

† SGA review and comment if students are included in the policy scope statement.