

TEMPLE UNIVERSITY

POLICIES AND PROCEDURES MANUAL

Title: Temple University Laboratories - Visitors and Volunteers Policy and Process

Policy Number: 04.62.12

Issuing Authority: President

Responsible Officer: Chief Compliance Officer

Date Created: March 1, 2011

Date Last Amended/Reviewed: April 3, 2017

Date Scheduled for Review: March 1, 2018

Reviewing Office: Executive Vice President

Scope of Policy & Rationale

Temple University benefits from the presence of visitors and volunteers who come to the university for limited periods of time to participate in research and laboratory programs and activities.

This policy sets forth standards and procedures designed to permit these visits to be carried out in a safe, professional and responsible manner. All visitors and volunteers are subject to Temple University policies and procedures when on university property, as well as all federal, state and local laws that may apply. All employees who bring visitors into the workplace are subject to Temple University Standards of Conduct regarding visitors.'

¹ Temple University Standards of Conduct re: Visitors

Rule 8.14 Prohibits Employees from:

- a) Bringing unauthorized persons into any building on the work site or on Temple grounds during work hours in any manner that interferes with the performance of an employee's or a co-worker's assigned duties and/or productivity.
- b) Bringing unauthorized persons into any building on the work site or on Temple grounds during work hours in any manner that interferes with the normal operation of the University.
- c) Bringing unauthorized persons into any building on the work site or on Temple grounds during work hours when directed not to by a supervisor or by Temple University.

It is important to the safety of members of the university community on each campus that access to any areas with hazardous materials/environments² or laboratory animals be restricted to persons who have received appropriate training³ and who can sufficiently understand and communicate adequately to the proper authorities if an emergency, such as a chemical spill, occurs.

All sponsors, hiring managers and/or department administrators are directly responsible for their visitors and volunteers to complete the Temple University Visitor Courtesy Card Request Form and, for those who will have direct patient contact or access to personally identifiable patient information, the Temple University and Temple University Health System HIPAA PRIVACY/SECURITY Agreement. This includes but is not limited to any visitor (non-employee) who will require access to Temple University Physician's electronic medical records (EMR) as well access into research or clinical trials.

Definitions

Covered Persons

A. This policy and the protocol adopted herein cover access to laboratories by

"**Visitors**," which include the following categories of persons:

² The term "hazardous" materials includes but is not limited to: chemicals, pharmaceuticals, radio-pharmaceuticals, biological agents and toxins listed BL-2 or higher; handling hazardous chemicals, lasers, machines, glass blowing etc. and radioactive material of a type and sufficient amount to require that the laboratory entrance be posted with the appropriate warning sign. Anyone with a question as to whether a particular agent is hazardous should contact the Department of Environmental Health and Radiation Safety at (215) 707-2520 (voice), (215) 707-1600 (fax).

"Hazardous environments" are environments that may cause harm to individuals without proper training and protective equipments (machine shop, laser use areas, glass blowing, mechanical rooms, etc.)

³ Appropriate training may include but is not limited to:

General Laboratory Safety; Chemical Hygiene and Hazard Communication; Blood borne Pathogens and Universal Precautions; Radiation Safety or Radiation Awareness Training; Emergency Response and Personal Protective Equipment. See Guidelines for Entering Hazardous Environments below.

(i) Persons who are neither paid, nor permanent members of the Temple University faculty nor other permanent full-time or part-time employees of Temple University. It includes, for example, faculty visitors from other universities and research institutions; adjuncts; visitors from business organizations and governmental entities; inspectors, including federal, state or local officials;

(ii) **Volunteers** who perform services for Temple University without promise, expectation or receipt of compensation and/or benefits for services rendered; and

(iii) Those employees or students at Temple University whose presence in a laboratory with hazardous materials or animals is not part of their normal employment at the university or a part of their supervised course work.

B. The term "Visitor" does not include:

(i) Emeritus university faculty, provided such faculty are current with all appropriate safety training and necessary inoculations; or

(ii) Supervised work in laboratories by persons enrolled in educational programs approved by the dean of the school and/or the budget unit head before engaging the volunteer to work.

C. **Minors**

In addition to the above guidelines, special provisions apply to minors, which are defined as individuals less than eighteen years of age, who perform research-related activities in university laboratories and those who are visitors to the labs for strictly observational purposes:

In addition to the Temple University Visitor Courtesy Card Request Form and Temple University and Temple University Health System HIPAA PRIVACY/SECURITY Agreement referred to above, the attached Parental Consent Form and Consent For Medical Treatment Form must be filled out and signed by a parent or legal guardian of the minor volunteer or observer prior to performing any research related activities. These forms are available through Human Resources and the Office of Risk Management.

For purposes of this policy:

No one under the age of fourteen is allowed in any university laboratory unless special arrangements are made with the Department of Environmental Health and Radiation Safety and the department chairperson, including training provided by the Department of Environmental Health and Radiation Safety; appropriate waivers and parental/guardian consent forms signed and dated.

No one under the age of eighteen is allowed to be alone in a laboratory.

No one under the age of eighteen may handle human blood, human cell lines or any other material defined as "other potentially infectious materials" by OSHA.

No one under the age of eighteen may handle radioactive materials.

No one under the age of eighteen may work with animals.

No one under the age of eighteen may handle samples derived from animals that have been exposed to BSL-2 agents (e.g., human cell-lines, viruses, etc.).

Questions relating to these specific guidelines should be directed to the Human Resources Office at the relevant campus.

The Department of Risk Management should be consulted to discuss any liability concerns. The visitor or volunteers sponsor, hiring manager and/or department administrator must complete the Temple University Visitor/Courtesy Card Request Form prior to allowing any person on campus to visit or volunteer.

Procedures

Training

Any visitor and/or volunteer who will have access to any hazardous environment at the university must undergo environmental health and safety training through the Temple University Department of Environmental Health and Radiation Safety (EHRS). EHRS has established guidelines for all persons, including volunteers, for entering hazardous environments. See Guideline for Entering Hazardous Environments No 1.9 Revised 03/2011. If the visitor is a city, state or federal inspector (for example from USCIS, FBI, OSHA, EPA, accrediting and/or licensing agency) and they will only be observing or passing through a hazardous environment, as long as they are escorted by authorized Temple University personnel they do not need to undergo environmental health and safety training. They do, however, need to register with the Human Resources Department and obtain the requisite Visitor/Courtesy Card before entering any University building.

GUIDELINE FOR ENTERING HAZARDOUS ENVIRONMENTS

The access to university premises, identified as laboratories, workshops, mechanical rooms, warehouses and other work areas housing potentially dangerous materials (chemical, biological, radiological, physical), conditions, machinery or processes, are

limited to the authorized university staff and students or other persons on official or related business.

Access to these areas are prohibited until persons entering into these areas are appropriately trained and adequately protected from hazards and are informed about the safety and emergency procedures relevant to their activities and presence.

The entrance to hazardous areas is prohibited for:

- Individuals who have not received safety training commensurate with the potential hazards present and are not under the direct and constant supervision of the laboratory director/supervisor and/or their designee.
- Individuals under the age of 14, unless special arrangements are made with the Department of Environmental Health and Radiation Safety and the academic department chairperson, including training provided by the Department of Environmental Health and Radiation Safety and appropriate waivers and parental/guardian consent forms are signed and dated.
- There are several restrictions and approvals necessary for visitors and volunteers performing specific types of work. The following restrictions and approvals are required where applicable:

Visitors and Volunteers:

- May not work with human subjects without the prior approval of the university's Institutional Review Board (IRB);
- May not work with patient records or protected health information without completing HIPAA training;
- May not work with research animals without the prior approval of the university's Institutional Animal Care and Use Committee (IACUC);
- May not work with recombinant DNA or infectious agents without prior approval from the University Bio-safety Committee - the individual should be listed as a visitor or volunteer on the protocol submitted by the sponsoring principal investigator
- It is the responsibility of any person sponsoring a visitor or volunteer to ensure that the individual understands and is compliant with all requirements contained in this guideline. It is also the sponsor's responsibility to ensure that the laboratory/facility is in full compliance with all applicable university safety policies and procedures. In the event that the visitor/volunteer or the laboratory is not compliant with the requirements in this guideline, the visitor/volunteer may be removed from the laboratory and no longer granted permission to perform research activities in a Temple University laboratory. You may contact the Department of Environmental

Health and Radiation Safety with any questions or concerns regarding the content of this guideline at (215) 707-2520 **(voice)**; (215) 707-1600 **(fax)**.

This guideline is intended to protect the health and well being of university employees and to avoid exposing unauthorized individuals to a hazardous environment. Please contact EHRS at (215) 707-2520 if you have any questions.

Notes

- 1. Dates of official enactment and amendments**
March 1, 2011
- 2. History**

Supersedes
- 3. Cross Reference**

APPENDIX

TEMPLE UNIVERSITY PARENT GUARDIAN CONSENT AND RELEASE FORM

Parent/Legal Guardian Name

Date

Address

Address

Dear Parent/Legal Guardian:

This consent and release form is required as part of an application for Minor's Name to participate in an program and/or visit or volunteer in a laboratory at Temple University in the Department of Department Name. Your child will work under the direct supervision of Name and Title in Building name and location of lab.

Individual laboratories vary in the inherent types of potential hazards present. While participating in this program, your child may need to work around animals, biological materials, pharmaceuticals, chemicals, or other potentially hazardous materials. As part of [his or her] project, Minor's Name will work with or perform the following:

Briefly describe proposed lab activities - include potentially hazardous materials the student will work with in the laboratory, as well as a specific description of any work involving animals that will be performed by the student.

All educational plans for minors in laboratories are reviewed by the Temple University Department of Environmental Health and Radiation Safety (EHS) to determine that the project is appropriate for a minor student, that appropriate safety precautions are in place and all training requirements are identified and completed before the lab activity begins.

EHS provides safety training to all personnel who may work with or in the vicinity of potentially hazardous materials - your child will be required to attend laboratory safety training, and may also be required to attend additional training sessions, depending on the nature of his or her particular project. If you have further question on these topics, please call Dr. Lily Lodhi at 215.707.2540.

Sincerely,

Supervisor or Program Director

Contact Information

TEMPLE UNIVERSITY PARENTAL GUARDIAN CONSENT AND RELEASE FORM

By signing this consent and release, I consent to the conditions as outlined above. In addition, I further understand that Temple University's facilities are being made available to Minor's Name as an educational opportunity and that he or she is not a student, employee, or affiliate of Temple University. I further understand that Temple University laboratories may contain hazardous substances and equipment and that Minor's Name may be subjected to potential risks that could result in illnesses or injuries. Minor's Name and I understand these risks and assume them knowingly and willingly.

I agree, on behalf of my family, heirs and personal representatives, to assume all risks and responsibilities surrounding Minor's Name's use of and access to Temple University laboratories. To the maximum extent permitted by law, I release, hold harmless and agree to indemnify Temple University, its officers, directors, faculty, staff, or agents from and against any claim, loss, or liability for injury to person or property which Minor's Name may suffer, or for which Minor's Name may be liable to any other person, during his or her use of and access to the laboratories resulting from any cause, including but not limited to, negligence by Temple University, its officers, directors, faculty, staff, students or agents.

Minor's Name (PRINT):

Parent's/Legal Guardian's Name (PRINT): _____

Parent's/Legal Guardian's Name (Signature):

Parent's Contact Information: _____

Date:

TEMPLE UNIVERSITY Consent for Medical Treatment

MEDICAL MATTERS: I hereby warrant that to the best of my knowledge, my child is in good health, and I assume all responsibility for the health of my child. Of the following statements pertaining to medical matters, sign only those in accordance with your wishes:

Emergency Medical Treatment: In the event of an emergency, I hereby give permission to transport my child to a hospital for emergency medical or surgical treatment. I wish to be advised prior to any further treatment by the hospital or doctor. In the event of an emergency, if you are unable to reach me at the above numbers, contact:

NAME & RELATIONSHIP:

-----PHONE-----
FAMILY DOCTOR _____ PHONE _____
FAMILY HEALTH PLAN CARRIER: _____
POLICY NUMBER: _____

1) Signature _____ Date _____

Medications: My child is taking medication at present. My child will bring all such medications necessary, and such medications will be well labeled. Names of medications and concise directions for seeing that the child takes such medications, including dosage and frequency of dosage are as follows:

2) Signature _____ Date _____

No medication of any type whether prescription or nonprescription may be administered to my child unless the situation is life-threatening and emergency treatment is required.

3) Signature _____ Date _____

Special Medical Information:

Allergic reactions (medications, foods, plants, insects, etc.) _____

Immunizations: Date of last tetanus/diphtheria immunization _____

Any physical limitations? _____

Has child recently been exposed to contagious disease or conditions, such as mumps, measles, chickenpox, etc.? If so, date and disease or condition. _____

You should be aware of these special medical conditions of my child. _____

