

Strategic Communications Plan

Environmental Health and Safety

Environmental Health and Safety strives to provide reliable, innovative and proactive services to the campus community. EHS and the campus community work together. Our goal is to integrate safety and environmental regulatory compliance into the culture of our community while supporting academic and research excellence. The result is a safe and healthy environment with appropriate compliance, protection of assets and efficient execution of business processes.

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EHS MISSION

As a unit within the Division of Finance and Administration (DFA), [Environmental Health and Safety \(EHS\)](#) strives to provide reliable, innovative, and proactive services to the campus community. Our goal is to integrate safety and environmental compliance into the culture of our community while supporting academic and research excellence. The result is a safe and healthy environment with appropriate compliance, protection of assets, and efficient execution of business processes.

EHS VISION

Driving world-class environmental, health, and safety solutions to support a safe learning, research, and working environment.

PURPOSE OF THIS DOCUMENT

This Strategic Communication Plan aims to provide a strategy for communicating EHS services and compliance expectations to Campus stakeholders. A well-structured communication plan will assist EHS in utilizing its resources with greater efficiency and efficacy. It provides a mechanism to be more proactive in achieving its mission of “Driving world-class environmental, health, and safety solutions to support a safe learning and working environment.” An effective communication strategy implemented will increase Campus departments' ability to be in regulatory compliance and provide a safe and healthful work environment.

SCOPE OF THIS DOCUMENT

This plan applies to all EHS owned/controlled documents.

EHS COMMUNICATION METHODS

To effectively communicate EHS services and compliance expectations, all available communication strategies must be evaluated to determine the best use of available resources. The following are communication methods that are utilized to share EHS content with our various Campus stakeholders.

- 1. EHS Website:** Enhancements have been made to the EHS website to communicate our services more effectively. To increase the effectiveness of the EHS website and improve user experience, ongoing enhancements will be identified and implemented. The EHS website is the Campus’s standard for communicating EHS policies and procedures.
- 2. Campus Committee Meetings:** EHS participates in various Campus Committees meetings, which are an excellent venue to disseminate important information. EHS staff provides updates on organizational compliance and specific safety, environmental, and risk issues facing the committee stakeholders. These meetings include but are not limited to the Laboratory Safety Committee, Radiation Safety Committee, Bio-Safety Committee (IBC), etc.

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3. Leadership Meetings: Information that is important to disseminate and discuss at the executive level can be done at meetings with DFA, Office of Research, Student Affairs, or Facilities. Topics would include items of significant importance and applicable, select organizations. New and/or relevant regulatory requirements must be shared at the executive management level. The maximum level of compliance can only be achieved with the buy-in and support of top management. Campus Divisions are likely to make efforts to comply if their upper management is fully aware and committed to meeting regulatory compliance requirements. EHS has established quarterly and biannual status meetings with various organizational leaders; the annual schedule can be accessed at the following link: [Quarterly and Biannual EHS Check-ins](#)

4. Designated Safety Representatives: As part of our Campus [Safety on Site Program](#), each unit is requested to identify a Designated Safety Representative (SR) that has a direct communication line to departmental staff; they can be beneficial in assisting in communicating EHS programs and requirements. In addition, SR's have a reporting relationship to local/site management, so it is essential that EHS maintains an ongoing working relationship with the SR's. In many respects, SR's is EHS' link to the departments. Without this relationship, communications efforts would be less efficient. By working with SR's, EHS can have greater far-reaching access to the departments.

One of the responsibilities of the SRs is to assist departments to operate in a safe and healthful manner; EHS can offer important support services to them. Working together as a coherent team, EHS staff and SR's can effectively communicate important health and safety information to departments. To continue effective communications, EHS must communicate regularly with Campus departments and the SRs. It is important that EHS continues to conduct these meetings periodically to ensure that health and safety initiatives are being communicated.

5. Performance scorecards and audit/inspection reports: EHS staff draft several periodic compliance and performance scorecards (i.e., Fire/Life Safety, Injury Prevention, and Program Compliance initiatives) in addition to various inspection and audit reports (i.e., Laboratory Safety, Controlled Substances, Fire/Life Safety, Shop Safety, etc.,). These reports also serve to communicate EHS information. In addition, EHS staff can provide departments with training compliance and completion reports by utilizing the Campus Learning Management System (LMS).

6. Email communications (to specific groups): As a communication tool, email announcements are an option where appropriate, and compliance with UCI policy is maintained. Urgent matters of immediate interest or requirement immediate action would be candidates for email announcements.

DOCUMENT TYPES AND REVIEW FREQUENCY

This section outlines the updated approach to understand better and streamline EHS policies and procedures.

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EHS DOCUMENT FLOWCHART



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A. University of California Office of the Presidential (UCOP) Policies

Definition/Background: A governing principle applies to all university operations except those reserved to the Board of Regents, the Academic Senate (RSO 105.2), or the Academic Personnel Manual. A Presidential Policy:

- Applies across the University of California system
- Is warranted to ensure compliance with applicable federal, state, and local laws and regulations, University policies, and Board of Regents Bylaws, Standing Orders, and Policies
- Enhances the University's mission, promotes operational efficiencies and reduces risk to the University
- Endures from one Presidential administration to another and sets a course for the foreseeable future; and
- It is approved by the President or designated executive upon the recommendation of the Policy Steering Committee.

Developed By/Owner: UC Office of the President (UCOP)

Applies to: All University activities except those outlined above.

Requirement Category: Mandatory

EHS Review/Update Frequency: N/A

Additional Information: <https://policy.ucop.edu/>

B. Campus (UCI) Policy

Definition/Background: Policies and resources which guide or govern campus activities.

Developed By/Owner: UCI Operational Unit

Applies to: All campus activities.

Requirement Category: Mandatory

EHS Review/Update Frequency: Annually

Additional Information:

A Campus Policy is a document that provides specific Campus-wide EHS requirements to achieve compliance with published standards. An example of a Campus Policy is the Campus Controlled Substance Policy.

C. EHS Procedure/Program

Definition/Background: A document that outlines an EHS-related policy or regulatory requirements.

Developed By/Owner: EHS Executive Director and EHS Operational Unit

Applies to: All campus activities based on specific hazards/risks and compliance requirements.

Requirement Category: Mandatory

EHS Review/Update Frequency: Annually or when content changes/policy updated

Additional Information: An EHS procedure is intended to provide specific Campus-wide and departmental requirements to comply with published standards. An example of an EHS procedure is the Campus-wide Injury and Illness Prevention Plan (IIPP). EHS procedures can be found at the following link: [EHS Policies/Programs](#)

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D. EHS Manual (Specific EHS Policy or Procedure in a manual format)

Definition/Background: A document that outlines EHS-related Campus, departmental and individual requirements related to achieving/maintaining compliance with a specific EHS policy and procedure.

Developed By/Owner: EHS Executive Director and EHS Operational Unit

Applies to: All campus activities based on specific hazards/risks and compliance requirements.

Requirement Category: Mandatory

EHS Review/Update Frequency: Annually and when content changes/policy updated

Additional Information: The EHS Manuals intend to provide specific requirements for Campus departments to implement Campus Policy or EHS procedures. The manuals offer specific steps, forms, checklists, and clarification related to other mandatory requirements of the regulatory or Campus requirements outlined in the corresponding policy and procedure. An example of an EHS Manual is the Hazard Communication Program Manual, Hearing Conservation Program Manual, Respiratory Protection Program Manual, or Chemical Hygiene Plan.

E. EHS Reference Guide Document

Definition/Background: A document that describes how internal or external EHS activity should be carried out.

Developed By/Owner: EHS Operational Unit

Applies to: Related internal or external activities.

Requirement Category: Mandatory

EHS Review/Update Frequency: Every three years or when procedures are updated.

Additional Information: The intent of the EHS reference guide is to provide specific direction and clarification for Campus departments to implement Campus Policy or EHS procedures. The reference guides provide specific steps, checklists, and clarification related to mandatory requirements of the regulatory or Campus requirements outlined in the corresponding policy and/or procedure. The reference guide is similar to an EHS Manual but is intended to provide direction on requirements that do not necessitate (due to complexity, etc.) the development of an EHS Manual. An additional type of Reference Guide will be an EHS Job Aids, which would outline specific steps to complete certain EHS tasks (i.e., conduct an injury investigation or input data into LHAT, UC Inspect, and/or UC Chemicals). EHS Reference Guides can be found at the following link: [Safety Guidance Documents](#)

F. EHS Scorecards/Performance Reports

Definition/Background: A document, tool, or another resource that assists in the implementation and compliance with EHS policies, programs, regulatory requirements, and Campus-wide loss prevention/injury reduction activities.

Developed By/Owner: EHS Operational Unit

Applies to: Related campus activities.

Requirement Category: Informational Only.

EHS Review/Update Frequency: When content changes/policy updated

Additional Information: The EHS Scorecards/Performance Reports intend to provide Campus and department leadership with specific information related to ongoing performance and

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compliance activities within their respective areas of responsibility. An example of an EHS Scorecard is the Quarterly Fire and Life Safety Report and the Monthly Ergonomic Program Scorecard.

G. EHS Informational Document

Definition/Background: A document or other resource provides information about an EHS program or subject area.

Developed By/Owner: EHS Operational Unit

Applies to: Related campus activities.

Requirement Category: Informational Only

EHS Review/Update Frequency: When content changes

Additional Information: The EHS informational document intends to provide information to Campus stakeholders on various EHS activities, issues, and programs. Examples of Information Documents include EHS factsheets, SAFETY Bulletins, and EHS Safety Moments.

EHS STRATEGIC COMMUNICATION STRATEGY ACTION PLAN

Below are the actions that will be taken for the various communication methods identified.

- 1. Ongoing enhancement of the EHS Website:** The EHS website will be reviewed periodically (with a comprehensive review occurring in June of each year).
- 2. Implement Updated EHS Communication Tools:** Continue the development of EHS Scorecards, Reference Guides (Job-aids), and EHS Informational documents (EHS Fact Sheets and SAFETY Alerts).
- 3. Support Campus Newsletters:** Periodically, EHS will provide relevant articles/content to be included in the various Campus newsletters. Article topics will include current safety, health, and environmental issues on which departments and offices must act or be aware. Newsletter material will be added to the EHS webpage.
- 4. Attend select Committee Meetings:** EHS staff will have an ad hoc presence at various campus committee meetings on a monthly/quarterly basis (as needed). It may not be possible to be on the agenda every month, but EHS will attend select meetings, provide relevant EHS material and be accessible to promote current EHS initiatives and answer any questions that may arise.
- 5. Establish periodic meetings (quarterly/biannual) with key EHS stakeholders:** EHS staff will attend periodic leadership meetings to discuss current safety, health, and environmental topics relevant at the executive level. It may not be possible or necessary for EHS to be on the agenda every month, but EHS will meet with the specific campus executives to discuss numerous EHS performance measurement criteria and relevant EHS-related topics.

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- 6. Establish a biannual schedule for meeting with Department/Unit Safety Representatives:** EHS staff will establish biannual safety representatives' meetings to discuss current safety, health, and environmental topics of relevance at the departmental level.
- 7. Development and implementation of EHS Academy Program:** (FY 2023-24 Project) EHS will implement the UCOP EHS Academy Program to develop specific training programs for division/site representatives. Training programs will be designed specifically for EHS staff, SRs, and other Campus staff assigned EHS responsibility. Working with specific departments (Facilities Management and Housing), EHS will draft a department-specific training matrix outlining required safety and environmental training by job classification.
- 8. Communication via emails (to specific groups):** The use of mass email communications is more an exception than a rule since approval from DFA must be obtained. EHS will request mass email communication on an as-needed basis. The criteria for requesting mass email communication is a matter that is time-sensitive and is an urgent health and safety matter. EHS will work with campus stakeholders, business officers, and other Divisions to e-mail important information directly to affected groups.
- 9. Distribute SAFETY Bulletins:** EHS will continue developing and implementing Safety Alerts, Safety Moments, and Lessons Learned on an as-needed basis. Safety Bulletins will be utilized to send specific messages (on specific topics) to affected groups (i.e., Facilities personnel, SR, or Campus-wide). The Safety Bulletins program is a recognized brand/method within UCI, and EHS will continue to use the tool as appropriate.
- 10. Development of EHS-specific videos and micro learnings:** With UCOP and DFA (and other vendors), EHS will create and update specific training programs (as needed) to be included in the Campus Learning Management System.
- 11. Update/Refine EHS online Customer Service Survey:** EHS IT staff will develop an EHS customer Survey and generate quarterly quality control reports to EHS and DFA management.

APPENDIX A: EHS POLICY DEVELOPMENT GUIDE

What is a policy/procedure?

A “policy/procedure” is defined as; "a definite course or method of action selected from among alternatives and in light of given conditions to guide and determine present and future decisions." By clearly defining the purpose, scope, responsibilities, and requirements, an effective policy guides action. Policies also contribute to an organization's culture through the installation of norms and values.

When should a policy/procedure be developed?

Many EHS program areas and functions are already clearly defined by existing regulatory requirements. Policies should be developed to guide in areas of significant risk where no current regulatory requirements exist, where exceeding regulatory requirements is justified due to perceived risk, or where required by law.

What makes a policy/procedure effective?

Strong and effective Environmental Health and Safety policies form the foundation for successful and sustainable EHS programs. Policies can vary greatly in content and form. However, the overall style is not as important as the clarity with which they define functional responsibilities and authority.

To be effective, a policy should:

- Be consistent with the organization’s mission, objectives, and values,
- Be compliant with applicable legal and regulatory requirements,
- Be current and relevant,
- State responsibilities of individuals at all levels of the organization,
- Outline procedures for implementation of the policy,
- Include input from senior management and other stakeholders,
- Be regularly reviewed (plan, do check, act), and
- Outline measures and responsibilities for ensuring adequate funding and other resources for implementation are available.

What are the steps for creating an effective policy/procedure?

Step 1: Identify the Policy Need and Define Purpose

An organization should continually assess its activities, responsibilities, and the external environment to identify the need for policies and procedures. Ideally, policies and procedures should be developed to anticipate future needs or requirements (e.g., new regulatory requirements or emerging risks). However, often policies/procedures/guideline are developed after a loss or other event has occurred (e.g., accident, regulatory fines, lawsuit). Regardless of how the need arises, it is essential that the purpose of the policy be clearly defined before policy development. This will help ensure that the policy fully addresses the need clearly, comprehensively, and concisely.

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Step 2: Gather Information

Research and preparation are important phase of policy development. This process should include a review of related policies (local, UC, and external), regulations (federal, state, and local), and consensus standards such as those from the American National Standards Institute (ANSI) or National Fire Protection Association (NFPA). These resources will help guide the determination of what requirements should be included in the policy. This determination should also factor in best practices versus regulatory minimum and the overall impact on the organization.

Step 3: Outline Requirements

There should be a significant amount of planning and research to determine the main elements of this section. Once this section is selected, the policy statements are developed and detail what is required for policy conformity. EHS policy states what is expected (i.e., “will” and “shall”) versus a procedure that describes how the policy requirements will be met. “All employees will receive training annually” and “Each department will keep a list of chemicals present in the workplace” are examples of policy statements. Notice how the information specifies what is required but does not detail how it will be accomplished. Generally, this is the most robust section of the policy.

Unless a high degree of specificity is required, avoid overly specific or prescriptive. This allows for flexibility to make changes as circumstances warrant. One way to allow for flexibility and account for changes in related policies and laws is to reference external documents within the policy requirements. For example, “All use of respiratory protection equipment shall comply with Title 8 of the California Code of Regulations, Section 5144, and the UCSB Respiratory Protection Program Manual.” This method has two primary advantages; 1) changes to regulations are automatically covered under the existing policy, and 2) as the need arises, changes can be made to supporting documents without updating and reissue the policy.

Step 4: Outline Responsibilities

Clear, concise responsibilities make training, implementation, and enforcement more effective. Responsibility should be extended throughout the organizational structure to ensure policy objectives will become integrated into all activities. For example, a policy should specify:

- Legal responsibilities,
- Individual responsibilities (employees, supervisors, senior management),
- Accountability systems,
- Education and training requirements, and
- Corrective action and escalation procedures.

No matter how well written, the policy is no more than empty words if a plan does not exist to put the policy into effect throughout the organization. The policy/procedure can only be put into effect where:

- Responsibilities are clearly defined and assigned,
- Methods of accountability are established,
- Adequate provision of financial and other resources is provided, and

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- Responsibilities for carrying out the policy objectives are communicated and understood within the workplace.

Step 5: Draft the Policy/Procedure

Draft the policy using the standard campus format below as a template. Some things to keep in mind while drafting or reviewing a policy/procedure are:

- Ensure the policy's wording, length, and complexity are appropriate to those who will be expected to implement it. Policies should typically be written at an 8th-grade reading level.
- Use straightforward, explicit language, and avoid jargon and legal speak.
- Use terms consistently and define any special or technical terms.
- Keep policy requirements concise, and at a high level, policies that include a lot of procedural steps may make implementation difficult.
- Avoid including a lot of supporting detail in the policy. Guide the reader to the reference materials for policy justification.
- Proofread the policy and ensure it is grammatically correct.

Step 6: Consult with Appropriate Stakeholders

Once the policy has been drafted, it will be important to communicate with managers and supervisors who will be expected to apply the policy. This communication should include why the new policy or revisions are needed, address the impact the policy will have on the stakeholder's areas, and address any potential thoughts or concerns the stakeholders may have. Considerations from these meetings will lead to any necessary revisions before final policy review.

Step 7: Finalize/Approve Policy/Procedures

No policies/procedures should be published without proper review and approval.

For EHS specific policies/procedures please follow the EHS Administrative Services protocol for policy/procedure development.

For broader ranging Campus based policies/procedures please work with the EHS Executive Director and the Division of Finance and Administration related to protocols to get the higher level/broader policies/procedures published.

Additional Items to Consider when Reviewing a New or Existing Policy/Procedures

The following questions may be used when reviewing a new or existing policy/procedure:

- Does the policy /procedure achieve its stated purpose?
- Are the outcomes and/or principles and objectives expressed in the policy consistent with the University's principles, objectives, and resources?
- Is the policy/procedure consistent with other relevant University rules, policies, directives, guidelines, and procedures? Is the policy consistent with external codes of

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practice and best practice guidelines? Are there any recent or upcoming legal changes that may impact the policy/procedure?

- Is the policy/procedure being complied with? If not, why?
- Are people clear about their roles and responsibilities in the implementation of the policy/procedure?
- Are there any barriers to compliance, particularly at an operational level?
- Are the supporting procedures/guidelines consistent with the policy and effective in ensuring compliance? Is the delegation of duties logical and successive throughout the organization?
- Do line managers understand and accept the nature of their responsibilities?
- Are there procedures and controls in place that ensure accountability?
- Does it state who will review the policy/procedure and how often it will be reviewed.