New Employee Orientation

RowanSOM Faculty and Staff

Office of Human Resources
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I. PREVENTION OF HOSTILE WORKPLACE ENVIRONMENTS

Policy:

NEW JERSEY STATE
POLICY PROHIBITING DISCRIMINATION IN THE WORKPLACE

I. POLICY

a. Protected Categories

The State of New Jersey is committed to providing every State employee and prospective State employee with a work environment free from prohibited discrimination or harassment. Under this policy, forms of employment discrimination or harassment based upon the following protected categories are prohibited and will not be tolerated: race, creed, color, national origin, nationality, ancestry, age, sex/gender (including pregnancy), marital status, civil union status, domestic partnership status, familial status, religion, affectional or sexual orientation, gender identity or expression, atypical hereditary cellular or blood trait, genetic information, liability for service in the Armed Forces of the United States, or disability.

To achieve the goal of maintaining a work environment free from discrimination and harassment, the State of New Jersey strictly prohibits the conduct that is described in this policy. This is a zero tolerance policy. This means that the state and its agencies reserve the right to take either disciplinary action, if appropriate, or other corrective action, to address any unacceptable conduct that violates this policy, regardless of whether the conduct satisfies the legal definition of discrimination or harassment.

b. Applicability

Prohibited discrimination/harassment undermines the integrity of the employment relationship, compromises equal employment opportunity, debilitates morale and interferes with work productivity. Thus, this policy applies to all employees and applicants for employment in State departments, commissions, State colleges or universities, agencies, and authorities (hereafter referred to in this section as “State agencies” or “State agency”). The State of New Jersey will not tolerate harassment or discrimination by anyone in the workplace including supervisors, co-workers, or persons doing business with the State. This policy also applies to both conduct that occurs in the workplace and conduct that occurs at any location which can be reasonably regarded as an extension of the workplace (any field location, any off-site business-related social function, or any facility where State business is being conducted and discussed).

This policy also applies to third party harassment. Third party harassment is unwelcome behavior involving any of the protected categories referred to in (a) above that is not directed at an individual...
but exists in the workplace and interferes with an individual’s ability to do his or her job. Third party harassment based upon any of the aforementioned protected categories is prohibited by this policy.

II. PROHIBITED CONDUCT

a. Defined

It is a violation of this policy to engage in any employment practice or procedure that treats an individual less favorably based upon any of the protected categories referred to in I(a) above. This policy pertains to all employment practices such as recruitment, selection, hiring, training, promotion, transfer, assignment, layoff, return from layoff, termination, demotion, discipline, compensation, fringe benefits, working conditions and career development. It is also a violation of this policy to use derogatory or demeaning references regarding a person’s race, gender, age, religion, disability, affectional or sexual orientation, ethnic background, or any other protected category set forth in I(a) above. A violation of this policy can occur even if there was no intent on the part of an individual to harass or demean another.

Examples of behaviors that may constitute a violation of this policy include, but are not limited to:

- Discriminating against an individual with regard to terms and conditions of employment because of being in one or more of the protected categories referred to in I(a) above;

- Treating an individual differently because of the individual’s race, color, national origin or other protected category, or because an individual has the physical, cultural or linguistic characteristics of a racial, religious, or other protected category;

- Treating an individual differently because of marriage to, civil union to, domestic partnership with, or association with persons of a racial, religious or other protected category; or due to the individual’s membership in or association with an organization identified with the interests of a certain racial, religious or other protected category; or because an individual’s name, domestic partner’s name, or spouse’s name is associated with a certain racial, religious or other protected category;

- Calling an individual by an unwanted nickname that refers to one or more of the above protected categories, or telling jokes pertaining to one or more protected categories;

- Using derogatory references with regard to any of the protected categories in any communication;

- Engaging in threatening, intimidating, or hostile acts toward another individual in the workplace because that individual belongs to, or is associated with, any of the protected categories; or
• Displaying or distributing material (including electronic communications) in the workplace that contains derogatory or demeaning language or images pertaining to any of the protected categories.

b. Sexual Harassment

It is a violation of this policy to engage in sexual (or gender-based) harassment of any kind, including hostile work environment harassment, quid pro quo harassment, or same-sex harassment. For the purposes of this policy, sexual harassment is defined, as in the Equal Employment Opportunity Commission Guidelines, as unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when, for example:

- Submission to such conduct is made either explicitly or implicitly a term or condition of an individual’s employment;

- Submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individual; or

- Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

Examples of prohibited behaviors that may constitute sexual harassment and are therefore a violation of this policy include, but are not limited to:

- Generalized gender-based remarks and comments;

- Unwanted physical contact such as intentional touching, grabbing, pinching, brushing against another's body or impeding or blocking movement;

- Verbal, written or electronic sexually suggestive or obscene comments, jokes or propositions including letters, notes, e-mail, text messages, invitations, gestures or inappropriate comments about a person’s clothing;

- Visual contact, such as leering or staring at another's body; gesturing; displaying sexually suggestive objects, cartoons, posters, magazines or pictures of scantily-clad individuals; or displaying sexually suggestive material on a bulletin board, on a locker room wall, or on a screen saver;

- Explicit or implicit suggestions of sex by a supervisor or manager in return for a favorable employment action such as hiring, compensation, promotion, or retention;

- Suggesting or implying that failure to accept a request for a date or sex would result in an adverse employment consequence with respect to any employment practice such as performance evaluation or promotional opportunity; or

- Continuing to engage in certain behaviors of a sexual nature after an objection has been raised by the target of such inappropriate behavior.
III. EMPLOYEE RESPONSIBILITIES

Any employee who believes that she or he has been subjected to any form of prohibited discrimination/harassment, or who witnesses others being subjected to such discrimination/harassment is encouraged to promptly report the incident(s) to a supervisor or directly to the State agency’s Equal Employment Opportunity/Affirmative Action Officer or to any other persons designated by the State agency to receive workplace discrimination complaints.

All employees are expected to cooperate with investigations undertaken pursuant to VI below. Failure to cooperate in an investigation may result in administrative and/or disciplinary action, up to and including termination of employment.

IV. SUPERVISOR RESPONSIBILITIES

Supervisors shall make every effort to maintain a work environment that is free from any form of prohibited discrimination/harassment. Supervisors shall immediately refer allegations of prohibited discrimination/harassment to the State agency’s Equal Employment Opportunity/Affirmative Action Officer, or any other individual designated by the State agency to receive complaints of workplace discrimination/harassment. A supervisor’s failure to comply with these requirements may result in administrative and/or disciplinary action, up to and including termination of employment. For purposes of this section and in the State of New Jersey Model Procedures for Processing Internal Complaints Alleging Discrimination in the Workplace (Model Procedures), a supervisor is defined broadly to include any manager or other individual who has authority to control the work environment of any other staff member (for example, a project leader).

V. DISSEMINATION

Each State agency shall annually distribute the policy described in this section, or a summarized notice of it, to all of its employees, including part-time and seasonal employees. The policy, or summarized notice of it, shall also be posted in conspicuous locations throughout the buildings and grounds of each State agency (that is, on bulletin boards or on the State agency’s intranet site). The Department of the Treasury shall distribute the policy to State-wide vendors/contractors, whereas each State agency shall distribute the policy to vendors/contractors with whom the State agency has a direct relationship.

VI. COMPLAINT PROCESS

Each State agency shall follow the Model Procedures with regard to reporting, investigating, and where appropriate, remedying claims of discrimination/harassment. See N.J.A.C. 4A:7-3.2. Each State agency is responsible for designating an individual or individuals to receive complaints of discrimination/harassment, investigating such complaints, and recommending appropriate remediation of such complaints. In addition to the Equal Employment Opportunity/Affirmative Action Officer, each State agency shall designate an alternate person to receive claims of discrimination/harassment.

All investigations of discrimination/harassment claims shall be conducted in a way that respects, to the extent possible, the privacy of all the persons involved. The investigations shall be conducted in
a prompt, thorough and impartial manner. The results of the investigation shall be forwarded to the respective State agency head to make a final decision as to whether a violation of the policy has been substantiated.

Where a violation of this policy is found to have occurred, the State agency shall take prompt and appropriate remedial action to stop the behavior and deter its reoccurrence. The State agency shall also have the authority to take prompt and appropriate remedial action, such as moving two employees apart, before a final determination has been made regarding whether a violation of this policy has occurred.

The remedial action taken may include counseling, training, intervention, mediation, and/or the initiation of disciplinary action up to and including termination of employment. Each State agency shall maintain a written record of the discrimination/harassment complaints received. Written records shall be maintained as confidential records to the extent practicable and appropriate.

VII. PROHIBITION AGAINST RETALIATION

Retaliation against any employee who alleges that she or he was the victim of discrimination/harassment, provides information in the course of an investigation into claims of discrimination/harassment in the workplace, or opposes a discriminatory practice, is prohibited by this policy. No employee bringing a complaint, providing information for an investigation, or testifying in any proceeding under this policy shall be subjected to adverse employment consequences based upon such involvement or be the subject of other retaliation.

Following are examples of prohibited actions taken against an employee because the employee has engaged in activity protected by this subsection:

- Termination of an employee;
- Failing to promote an employee;
- Altering an employee’s work assignment for reasons other than legitimate business reasons;
- Imposing or threatening to impose disciplinary action on an employee for reasons other than legitimate business reasons; or

Ostracizing an employee (for example, excluding an employee from an activity or privilege offered or provided to all other employees).

VIII. FALSE ACCUSATIONS AND INFORMATION

An employee, who knowingly makes a false accusation of prohibited discrimination/harassment or knowingly provides false information in the course of an investigation of a complaint, may be subjected to administrative and/or disciplinary action, up to and including termination of employment. Complaints made in good faith, however, even if found to be unsubstantiated, shall not be considered a false accusation.
IX. CONFIDENTIALITY

All complaints and investigations shall be handled, to the extent possible, in a manner that will protect the privacy interests of those involved. To the extent practical and appropriate under the circumstances, confidentiality shall be maintained throughout the investigatory process. In the course of an investigation, it may be necessary to discuss the claims with the person(s) against whom the complaint was filed and other persons who may have relevant knowledge or who have a legitimate need to know about the matter. All persons interviewed, including witnesses, shall be directed not to discuss any aspect of the investigation with others in light of the important privacy interests of all concerned. Failure to comply with this confidentiality directive may result in administrative and/or disciplinary action, up to and including termination of employment.

X. ADMINISTRATIVE AND/OR DISCIPLINARY ACTION

Any employee found to have violated any portion or portions of this policy may be subject to appropriate administrative and/or disciplinary action which may include, but which shall not be limited to: referral for training, referral for counseling, written or verbal reprimand, suspension, reassignment, demotion or termination of employment. Referral to another appropriate authority for review for possible violation of State and Federal statutes may also be appropriate.

XI. TRAINING

All State agencies shall provide all new employees with training on the policy and procedures set forth in this section within a reasonable period of time after each new employee’s appointment date. Refresher training shall be provided to all employees, including supervisors, within a reasonable period of time. All State agencies shall also provide supervisors with training on a regular basis regarding their obligations and duties under the policy and regarding procedures set forth in this section.

Issued: December 16, 1999
Revised: June 3, 2005
Revised: August 20, 2007
See N.J.A.C. 4A:7-3.1
Provision:

Pay Transparency Nondiscrimination Provision
The contractor will not discharge or in any other manner discriminate against employees or applicants because they have inquired about, discussed, or disclosed their own pay or the pay of another employee or applicant. However, employees who have access to the compensation information of other employees or applicants as a part of their essential job functions cannot disclose the pay of other employees or applicants to individuals who do not otherwise have access to compensation information, unless the disclosure is (a) in response to a formal complaint or charge, (b) in furtherance of an investigation, proceeding, hearing, or action, including an investigation conducted by the employer, or (c) consistent with the contractor’s legal duty to furnish information.
Discussion:

Harassment and Discrimination

Federal, state and local laws prohibit harassment and discrimination in the workplace or classroom on the basis of the nineteen protected classes (these protected classes are listed on page 9 of this document). All of these are actionable forms of discrimination, meaning the victim of harassment or discrimination can file a lawsuit against the perpetrator of the harassment or discrimination.

Sexual Harassment involves instances in which a person in a relationship perceives the other person to be making sexual advances. This does not have to involve direct requests for sexual favors; harassment can include subtle innuendo, inappropriate (demeaning) comments, touching, jokes, references to sex or sexuality, etc. Rowan University adheres to the policies and procedures set forth in The State of New Jersey Policy Prohibiting Discrimination in the Workplace (Issued: December 16, 1999 Revised: 2007, See N.J.A.C.4A:7-3.)

Sexual Harassment, as currently defined under the laws, refers to two types of sexual harassment that can occur in the workplace or classroom.

A. Quid pro Quo occurs when an employee’s or student’s advancement, job assignment, continued employment, and/or academic standing are conditional upon sexual favors.

B. Hostile work/classroom environment in general consists of conduct that is sufficiently pervasive to alter the conditions of employment/enrollment and creates an abusive working/classroom environment. It occurs when workplace/classroom conduct of a sexual nature interferes with an employee’s/student’s work/academic performance. Conditions and criteria constitute a hostile work/classroom environment are:
   1. The discrimination is intentional because of an individual’s sex,
   2. The discrimination is severe or pervasive and regular,
   3. The discrimination detrimentally affects the complainant,
   4. The discrimination would detrimentally affect a reasonable person of the same sex in that position; and,
   5. THE EMPLOYER KNEW OR SHOULD HAVE KNOWN OF THE HARASSMENT AND FAILED TO take PROMPT AND EFFECTIVE REMEDIAL ACTION.

An employee/student who is not the target of the harassment, but works in an atmosphere that is made offensive by the pervasive sexual conduct in the workplace/classroom, may also be the victim of hostile work/classroom environment.

Discriminatory Harassment is another form of harassment in which a hostile workplace or classroom environment can exist even if it is not based on one’s gender. It can include the protected classes mentioned previously because the courts look at discriminatory harassment on a case by case basis.

Sexual and Discriminatory Harassment include any unwelcome or unwanted attention, and other verbal, visual or physical conduct or other form of offensive behavior directed toward a person
because of or on account of his or her sex, race, color, religion, pregnancy, national origin, mental or physical disability, citizenship status, familial or veteran status, age, sexual or affectional orientation, gender identity or expression (transgender individuals, transsexuals, transvestites, or androgynous individuals), or such conduct that may be offensive based on these protected classes and including indirect exposure to:

- submission to or rejection of such conduct by an individual is used as a basis or factor in decisions affecting the terms or conditions of employment/academic standing of any individual; or
- submission to such conduct is made either explicitly or implicitly a term or condition of an individual’s employment/academic standing; or
- such conduct has the purpose or effect of unreasonably interfering with an individual’s work/academic performance; or
- such conduct creates an intimidating, hostile or offensive work/classroom environment.

Examples

Any form of discrimination based on sex, race, color, religion, pregnancy, national origin, mental or physical disability, citizenship status, familial or veteran status, age, sexual or affectional orientation, gender identity or expression (transgender individuals, transsexuals, transvestites, or androgynous individuals) to include all the protected classes:

- communication or display of offensive material capable of a stereotypical or discriminatory meaning;
- offensive remarks containing stereotypical or discriminatory references, including unwelcome comments about an individual’s body, appearance, manner, speech or dress capable of stereotypical or discriminatory meaning;
- racial, religious, ethnic, or other stereotypical or discriminatory jokes or inappropriate use of racial, religious, ethnic or discriminatory language capable of stereotypical or discriminatory meaning;
- the display in the workplace of objects, drawings, screensavers, or pictures which create an intimidating or hostile work environment;
- other unwelcome and unwanted conduct of a stereotypical or discriminatory nature, such as name calling, and racial religious or ethnic innuendoes; and,
- removing accommodations or corrective devices provided to or used by an individual with a disability.

Employee Obligation to Report

If you witness, or learn of by other means, these types of behavior you are obliged to notify the Associate VP of Employee & Labor Relations (Ext. 4139) or the Office of Equity & Diversity (Ext. 5440). Both are located in Linden Hall. This notification is necessary to protect the victim as well as the University and University employees/students. When an offense is reported, a confidential investigation will be conducted by the Associate VP of Employee and Labor Relations and the Office of Equity & Diversity. While this policy falls under State and Federal guidelines and applies to protected classes as listed in the laws, Rowan wishes to foster an atmosphere of civility in the workplace.
Procedures:

NEW JERSEY STATE
PROCEDURES FOR INTERNAL COMPLAINTS ALLEGING DISCRIMINATION IN THE WORKPLACE

1. All employees and applicants for employment have the right and are encouraged to immediately report suspected violations of the State Policy Prohibiting Discrimination in the Workplace, N.J.A.C. 4A:7-3.1.

2. Complaints of prohibited discrimination/harassment can be reported to either Dr. Johanna Velez-Yelin, the EEO/AA Officer, or to any supervisory employee of Rowan University. Complaints may also be reported to Mr. Robert Zazzali, Vice President of Employee and Labor Relations.

3. Every effort should be made to report complaints promptly. Delays in reporting may not only hinder a proper investigation, but may also unnecessarily subject the victim to continued prohibited conduct.

4. Supervisory employees shall immediately report all alleged violations of the State of New Jersey Policy Prohibiting Discrimination in the Workplace to Dr. Johanna Velez-Yelin, EEO/AA Officer. Such a report shall include both alleged violations reported to a supervisor, and those alleged violations directly observed by the supervisor.

5. If reporting a complaint to any of the persons set forth in paragraphs 2 through 4 above presents a conflict of interest, the complaint may be filed directly with the Department of Personnel, Division of EEO/AA, P.O. Box 315, Trenton, NJ 08625. An example of such a conflict would be where the individual against whom the complaint is made is involved in the intake, investigative or decision making process.

6. In order to facilitate a prompt, thorough and impartial investigation, all complainants are encouraged to submit a New Jersey Department of Personnel Discrimination Complaint Processing Form (DPF-481). An investigation may be conducted whether or not the form is completed.

7. Rowan University shall maintain a written record of the discrimination/harassment complaints received. Written records shall be maintained as confidential records to the extent practicable and appropriate. A copy of all complaints (regardless of the format in
which submitted) must be submitted to the Department of Personnel, Division of EEO/AA, by the University’s EEO/AA Officer, along with a copy of the acknowledgement letter(s) sent to the person(s) who filed the complaint and, if applicable, the complaint notification letter sent to the person(s) against whom the complaint has been filed. If a written complaint has not been filed, the EEO/AA Officer must submit to the Division of EEO/AA a brief summary of the allegations that have been made. Copies of complaints filed with the New Jersey Division on Civil Rights, the U.S. Equal Employment Opportunity Commission, or in court also must be submitted to the Division of EEO/AA.

8. During the initial intake of a complaint, the EEO/AA Officer or authorized designee will obtain information regarding the complaint, and determine if interim corrective measures are necessary to prevent continued violations of the State’s Policy Prohibiting Discrimination in the Workplace.

9. At the EEO/AA Officer’s discretion, a prompt, thorough, and impartial investigation into the alleged harassment or discrimination will take place.

10. An investigatory report will be prepared by the EEO/AA Officer or his or her designee when the investigation is completed. The report will include, at a minimum:

   a. A summary of the complaint;
   b. A summary of the parties’ positions;
   c. A summary of the facts developed through the investigation; and
   d. An analysis of the allegations and the facts.

   The investigatory report will be submitted to Dr. Ali Houshmand, who will issue a final letter of determination to the parties.

11. The President will review the investigatory report issued by the EEO/AA Officer or authorized designee, and make a determination as to whether the allegation of a violation of the State’s Policy Prohibiting Discrimination in the Workplace has been substantiated. If a violation has occurred, the President will determine the appropriate corrective measures necessary to immediately remedy the violation.

12. The President will issue a final letter of determination to both the complainant(s) and the person, against whom the complaint was filed, setting forth the results of the investigation and the right of appeal to the Merit System Board as set forth in Paragraphs 13 and 14, below. To the extent possible, the privacy of all parties involved in the process shall be maintained in the final letter of determination. The Division of EEO/AA, Department of Personnel shall be furnished with a copy of the final letter of determination.

   a. The letter shall include, at a minimum:
      1. A brief summary of the parties’ positions;
      2. A brief summary of the facts developed during the investigation; and
      3. An explanation of the determination, which shall include whether:
         i. The allegations were either substantiated or not substantiated; and
ii. A violation of the State’s Policy Prohibiting Discrimination in the Workplace did or did not occur.

b. The investigation of a complaint shall be completed and a final letter of determination shall be issued no later than 120 days after the initial intake of the complaint referred to in Paragraph 8, above, is completed.

c. The time for completion of the investigation and issuance of the final letter of determination may be extended by Rowan University’s President for up to 60 additional days in cases involving exceptional circumstances. The President shall provide the Division of EEO/AA and all parties with written notice of any extension and shall include in the notice an explanation of the exceptional circumstances supporting the extension.

13. A complainant who is in the career, unclassified or senior executive service, or who is an applicant for employment, who disagrees with the determination of President Houshmand, may submit a written appeal, within twenty days of the receipt of the final letter of determination from the President, to the Merit System Board, PO Box 312, Trenton, NJ 08625. The appeal shall be in writing and include all materials presented by the complainant at the University level, the final letter of determination, the reason for the appeal and the specific relief requested.

a. Employees filing appeals which raise issues for which there is another specific appeal procedure must utilize those procedures. The Commissioner may require any appeal, which raises issues of alleged discrimination and other issues, such as examination appeals, to be processed using the procedures set forth in this section or a combination of procedures as the Commissioner deems appropriate. See N.J.A.C. 4A:2-1.7.

b. The Merit System Board shall decide the appeal on a review of the written record or such other proceeding as it deems appropriate. See N.J.A.C. 4A:2-1.1(d).

c. The appellant shall have the burden of proof in all discrimination appeals brought before the Merit System Board.

14. In a case where a violation has been substantiated, and no disciplinary action recommended, the party(ies) against whom the complaint was filed may appeal the determination to the Merit System Board at the address indicated in Paragraph 13 above, within 20 days of receipt of the final letter of determination by Rowan University.

a. The burden of proof shall be on the appellant.

b. The appeal shall be in writing and include the final letter of determination, the reason for the appeal, and the specific relief requested.

c. If disciplinary action has been recommended in the final letter of determination, the party(ies) charged may appeal using the procedures set forth in N.J.A.C. 4A:2-2 & 3.
15. The Director of the Division of EEO/AA shall be placed on notice of, and given the opportunity to submit comment on, appeals filed with the Merit System Board of decisions on discrimination complaints, regardless of whether or not the complaint was initially filed directly with the Director of EEO/AA.

16. Any employee or applicant for employment can file a complaint directly with external agencies that investigate discrimination/harassment charges in addition to utilizing this internal procedure. The time frames for filing complaints with external agencies indicated below are provided for informational purposes only. An individual should contact the specific agency to obtained exact time frames for filing a complaint. The deadlines run from the date of the last incident of alleged discrimination/harassment, not from the date that the final letter of determination is issued by the University.

Complaints may be filed with the following external agencies:

Division on Civil Rights
N.J. Department of Law & Public Safety
(Within 180 days for violation of the discriminatory act)

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<th>Trenton Regional Office</th>
<th>Paterson Regional Office</th>
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<tr>
<td>140 East Front Street</td>
<td>100 Hamilton Plaza, Suite 800</td>
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<tr>
<td>6th Floor, P.O. Box 090</td>
<td>Paterson, NJ 07505-2109</td>
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<tr>
<td>Trenton NJ 08625-0090</td>
<td>(973) 977-4500</td>
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</table>

<table>
<thead>
<tr>
<th>Newark Regional Office</th>
<th>United States Equal Employment Opportunity Commission (EEOC)</th>
</tr>
</thead>
<tbody>
<tr>
<td>31 Clinton Street, 3rd floor</td>
<td>(Within 300 days of the discriminatory act)</td>
</tr>
<tr>
<td>P.O. Box 46001</td>
<td>National Call Center – 1 800-669-4000</td>
</tr>
<tr>
<td>Newark, NJ 07102</td>
<td></td>
</tr>
<tr>
<td>(973) 648-2700</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Atlantic City Office</th>
<th>*Newark Area Office</th>
</tr>
</thead>
<tbody>
<tr>
<td>26 Pennsylvania Avenue</td>
<td>One Newark Center, 21st Floor</td>
</tr>
<tr>
<td>3rd Floor</td>
<td>Raymond Blvd at McCarter Highway (Rt.21)</td>
</tr>
<tr>
<td>Atlantic City, NJ 08401</td>
<td>Newark, New Jersey 07102-5233</td>
</tr>
<tr>
<td>(609) 441-3100</td>
<td>(973) 645-6383</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Camden Regional Office</th>
<th>**Philadelphia District Office</th>
</tr>
</thead>
<tbody>
<tr>
<td>One Port Center, 4th Floor</td>
<td>801 Market Street, Suite 1300</td>
</tr>
<tr>
<td>2 Riverside Drive, Suite 402</td>
<td>Philadelphia, PA 19107-3127</td>
</tr>
<tr>
<td>Camden, NJ 08103</td>
<td>(215) 440-2600</td>
</tr>
<tr>
<td>(856) 614-2550</td>
<td></td>
</tr>
</tbody>
</table>

* Newark Area Office has jurisdiction over the State of New Jersey Counties of Bergen, Essex, Hudson, Hunterdon, Mercer, Middlesex, Monmouth, Morris, Passaic, Somerset, Sussex, Union and Warren.

** The Philadelphia District Office has jurisdiction over the State of New Jersey, Counties of Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, Ocean and Salem.

Issued: December 16, 1999
Revised: June 3, 2005
Revised: August 20, 2007
See N.J.A.C. 4A:7-3.2
**State of New Jersey**
**Division of Equal Employment Opportunity and Affirmative Action**

**Discrimination Complaint Processing Form**

**INSTRUCTIONS:** This complaint form should be filed with the Equal Employment Opportunity/Affirmative Action Officer or the alternate designee for the State department, agency, commission, or State college/university where you work or applied for employment.

For detailed information on the complaint process, see the State of New Jersey Model Procedures for Processing Internal Complaints Alleging Discrimination in the Workplace (Model Procedures) on Page 2 of this form.

<table>
<thead>
<tr>
<th>1. Name:</th>
<th>2. Name of State Dept., Agency, Commission or College:</th>
<th>3. Telephone (Work):</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Home Address:</td>
<td>8a. Full name, title, and telephone number of person(s) you believe discriminated against:</td>
<td></td>
</tr>
<tr>
<td>8. Date(s) of discriminatory action(s):</td>
<td>8c. Complainant's Status (Check applicable box):</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Employee</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Job Applicant</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Vendor/Contractor</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Other (Please specify)</td>
</tr>
</tbody>
</table>

**9. Basis of Discrimination:**

- Age
- Affectional/Sexual Orientation
- Ancestry
- Atypical Hereditary Cellular or Blood Trait
- Color
- Creed
- Disability
- Domestic Partnership Status
- Education
- Ethnicity
- Family Status
- Gender Identity or Expression
- Genetic Information (including refusal to submit to or provide results of a genetic test)
- Liability for Military Service
- Marital Status/Civil Union Status
- National Origin
- Race
- Religion
- Sex/Gender (including pregnancy)
- Sexual Harassment
- Retaliation (for having filed a discrimination complaint, participating in a complaint investigation, or for opposing a discriminatory practice)

10a. Explain why you feel you have been discriminated against:  

☐ CHECK IF ADDITIONAL SHEETS ARE ATTACHED

10b. Were the actions or behavior you are complaining about directed at, or said to, you ___ and/or another party ___ (third party harassment)?

10c. Was the incident reported to anyone? Yes ____ No ____ If yes, who and when?

10d. What remedy or resolution are you seeking?

10e. If appropriate, as determined by the EEO Officer, are you willing to attempt to resolve your complaint through mediation or another alternative dispute resolution (ADR) process?  

☐ YES  ____  NO  ____

10f. Complainant's Signature:  

Date:

11. Have you filed a discrimination complaint with the

- N.J. Division on Civil Rights?  
- U.S. Equal Employment Opportunity Commission?

☐ YES  ____  NO  ____

12. Have you filed a grievance on the issues / personal actions described?

☐ YES  ____  NO  ____

13. Completion of this part is voluntary. The information is to be used only for State and Federal record keeping and reporting requirements:

**SEX:**  

- Male  
- Female

**RACE:**  

- American Indian or Alaska Native  
- Asian  
- Black or African American  
- Native Hawaiian or Other Pacific Islander  
- White  
- Hispanic or Latino  
- Not Hispanic or Latino

**ETHNICITY:**

**Note:** In addition to filing an internal complaint, a complainant has a right to use external complaint filing procedures available under State law (with the NJ Division on Civil Rights) and federal law (with the US Equal Employment Opportunity Commission). Detailed information is contained in the Model Procedures found on Page 2 of this form.

**DO NOT WRITE BELOW THIS LINE**

EEO/AA Officer  

Signature:  

Date:  

New Jersey Department of the Treasury  

Division of EEO/AA  

Revised 03-05-13

P.O. Box 315  

Trenton NJ 08625-0315  

609-777-919  

eecaa@treas.state.nj.us

- 15 -
NEW JERSEY STATE
MODEL PROCEDURES FOR INTERNAL COMPLAINTS ALLEGING
DISCRIMINATION IN THE WORKPLACE

Each State department, commission, State college or university, agency and authority (hereafter referred to in this section as “State agency”) is responsible for implementing this model procedure, completing it to reflect the structure of the organization, and filing a copy of the completed procedure with the Department of the Treasury, Division of EEO/AA.

1. All employees and applicants for employment have the right and are encouraged to immediately report suspected violations of the State Policy Prohibiting Discrimination in the Workplace, N.J.A.C. 4A:7-3.1.

2. Complaints of prohibited discrimination/harassment can be reported to either Dr. Johanna Velez-Yelin, the EEO/AA Officer, or to any supervisory employee of the State agency. Complaints may also be reported to Mr. Robert Zazzali, Vice President of Employee and Labor Relations.

3. Every effort should be made to report complaints promptly. Delays in reporting may not only hinder a proper investigation, but may also unnecessarily subject the victim to continued prohibited conduct.

4. Supervisory employees shall immediately report all alleged violations of the State Policy Prohibiting Discrimination in the Workplace to Dr. Johanna Velez-Yelin EEO/AA Officer. Such a report shall include both alleged violations reported to a supervisor, and those alleged violations directly observed by the supervisor.

5. If reporting a complaint to any of the persons set forth in paragraphs 2 through 4 above presents a conflict of interest, the complaint may be filed directly with the Division of EEO/AA, P.O. Box 315, Trenton, NJ 08625. An example of such a conflict would be where the individual against whom the complaint is made is involved in the intake, investigative or decision making process.

6. In order to facilitate a prompt, thorough and impartial investigation, all complainants are encouraged to submit a Division of EEO/AA Discrimination Complaint Processing Form. An investigation may be conducted whether or not the form is completed.
7. Each State agency shall maintain a written record of the discrimination/harassment complaints received. Written records shall be maintained as confidential records to the extent practicable and appropriate. A copy of all complaints (regardless of the format in which submitted) must be submitted to the Department of the Treasury, Division of EEO/AA, by the State agency’s EEO/AA Officer, along with a copy of the acknowledgement letter(s) sent to the person(s) who filed the complaint and, if applicable, the complaint notification letter sent to the person(s) against whom the complaint has been filed. If a written complaint has not been filed, the EEO/AA Officer must submit to the Division of EEO/AA a brief summary of the allegations that have been made. Copies of complaints filed with the New Jersey Division on Civil Rights, the U.S. Equal Employment Opportunity Commission, or in court also must be submitted to the Division of EEO/AA.

8. During the initial intake of a complaint, the EEO/AA Officer or authorized designee will obtain information regarding the complaint, and determine if interim corrective measures are necessary to prevent continued violations of the State Policy Prohibiting Discrimination in the Workplace.

9. At the EEO/AA Officer’s discretion, a prompt, thorough, and impartial investigation into the alleged harassment or discrimination will take place.

10. An investigatory report will be prepared by the EEO/AA Officer or his or her designee when the investigation is completed. The report will include, at a minimum:

   a. A summary of the complaint;
   b. A summary of the parties’ positions;
   c. A summary of the facts developed through the investigation; and
   d. An analysis of the allegations and the facts.

   The investigatory report will be submitted to Dr. Ali Houshmand, President, who will issue a final letter of determination to the parties.

11. The President will review the investigatory report issued by the EEO/AA Officer or authorized designee, and make a determination as to whether the allegation of a violation of the State Policy Prohibiting Discrimination in the Workplace has been substantiated. If a violation has occurred, the President will determine the appropriate corrective measures necessary to immediately remedy the violation.

12. The President will issue a final letter of determination to both the complainant(s) and the person against whom the complaint was filed, setting forth the results of the investigation and the right of appeal to the Civil Service Commission, as set forth in Paragraphs 13 and 14, below. To the extent possible, the privacy of all parties involved in the process shall be maintained in the final letter of determination. The Department of the Treasury’s Division of EEO/AA shall be furnished with a copy of the final letter of determination.

   a. The letter shall include, at a minimum:

      1. A brief summary of the parties’ positions;
2. A brief summary of the facts developed during the investigation; and
3. An explanation of the determination, which shall include whether:
   I. The allegations were either substantiated or not substantiated; and
   ii. A violation of the State Policy Prohibiting Discrimination in the Workplace did or did not occur.

b. The investigation of a complaint shall be completed and a final letter of determination shall be issued no later than 120 days after the initial intake of the complaint referred to in Paragraph 8, above, is completed.

c. The time for completion of the investigation and issuance of the final letter of determination may be extended by the State agency head for up to 60 additional days in cases involving exceptional circumstances. The State agency head shall provide the Division of EEO/AA and all parties with written notice of any extension and shall include in the notice an explanation of the exceptional circumstances supporting the extension.

13. A complainant who is in the career, unclassified or senior executive service, or who is an applicant for employment, who disagrees with the determination of the President, may submit a written appeal to the New Jersey Civil Service Commission (“NJCSC”), Division of Merit System Practices and Labor Relations, Written Record Appeals Unit, P.O. Box 312, Trenton, NJ 08625-0312, postmarked or delivered within 20 days of the receipt of the determination from the President. The appeal shall be in writing and include all materials presented by the complainant at the State agency level, the final letter of determination, the reason for the appeal and the specific relief requested. Please be advised that there is a $20 fee for appeals. Please include a check or money order along with the appeal, payable to NJCSC. Persons receiving public assistance and those qualifying for NJCSC Veterans Preference are exempt from this fee, to the Civil Service Commission PO Box 312, Trenton, N.J. 08625.

a. Employees filing appeals which raise issues for which there is another specific appeal procedure must utilize those procedures. The Civil Service Commission Chair may require any appeal, which raises issues of alleged discrimination and other issues, such as examination appeals, to be processed using the procedures set forth in this section or a combination of procedures as the Chair deems appropriate. See N.J.A.C. 4A:2-1.7.

b. The Civil Service Commission shall decide the appeal on a review of the written record or such other proceeding as it deems appropriate. See N.J.A.C. 4A:2-1.1(d).

c. The appellant shall have the burden of proof in all discrimination appeals brought before the Civil Service Commission.

14. In a case where a violation has been substantiated, and no disciplinary action recommended, the party (ies) against whom the complaint was filed may appeal the determination to the Civil Service Commission at the address indicated in Paragraph 13 above, within 20 days of receipt of the final letter of determination by the State agency head or designee.
a. The burden of proof shall be on the appellant.

b. The appeal shall be in writing and include the final letter of determination, the reason for the appeal, and the specific relief requested.

c. If disciplinary action has been recommended in the final letter of determination, the party(ies) charged may appeal using the procedures set forth in N.J.A.C. 4A:2-2 and 3.

15. The Division of EEO/AA shall be placed on notice of, and given the opportunity to submit comments on, appeals filed with the Civil Service Commission of decisions on discrimination complaints, regardless of whether or not the complaint was initially filed directly with the Division of EEO/AA.

16. Any employee or applicant for employment can file a complaint directly with external agencies that investigate discrimination/harassment charges in addition to utilizing this internal procedure. The time frames for filing complaints with external agencies indicated below are provided for informational purposes only. An individual should contact the specific agency to obtain exact time frames for filing a complaint. The deadlines run from the date of the last incident of alleged discrimination/harassment, not from the date that the final letter of determination is issued by the State agency head or designee.

Complaints may be filed with the following external agencies:

**Division on Civil Rights**
**N. J. Department of Law & Public Safety**
*(Within 180 days for violation of the discriminatory act)*

Trenton Regional Office
140 East Front Street
6th Floor, P.O. Box 090
Trenton NJ 08625-0090
(609) 292-4605

Newark Regional Office
31 Clinton Street, 3rd floor
P.O. Box 46001
Newark, NJ 07102
(973) 648-2700

Atlantic City Office
26 Pennsylvania Avenue
3rd Floor
Atlantic City, NJ 08401
(609) 441-3100
Camden Regional Office
One Port Center, 4th Floor
2 Riverside Drive, Suite 402
Camden, NJ 08103
(856) 614-2550

United States Equal Employment Opportunity
Commission (EEOC)
(Within 300 days of the discriminatory act)
National Call Center – 1 800-669-4000

*Newark Area Office
One Newark Center, 21st Floor
Raymond Blvd at McCarter Highway (Rt.21)
Newark, New Jersey 07102-5233
(973) 645-4684

**Philadelphia District Office
801 Market Street, Suite 1300
Philadelphia, PA 19107-3127
(215) 440-2600

*Newark Area Office has jurisdiction over the State of New Jersey Counties of Bergen, Essex, Hudson, Hunterdon, Mercer, Middlesex, Monmouth, Morris, Passaic, Somerset, Sussex, Union and Warren.

**The Philadelphia District Office has jurisdiction over the State of New Jersey, Counties of Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, Ocean and Salem.

Issued: December 16, 1999
Revised: June 3, 2005
Revised: August 20, 2007
Revised: March 24, 2010
Revised: February 8, 2011
Revised: November 15, 2011 See N.J.A.C. 4A:7-3.2
Laws and Orders:

Major Laws and Orders Regulating Nondiscrimination in Employment:

Title VII of the Civil Rights Act of 1964, as amended
Prohibits discrimination by employers against any individual with respect to hiring, discharge, compensation, and all terms, conditions, and privileges of employment because of race, color, religion, sex, or national origin.

Presidential Executive Order No. 11246 (1965), as amended
Prohibits discrimination by federal contractors against any employee or applicant for employment on the basis of race, color, religion, sex, or national origin. Requires the employer to take affirmative action to expand employment opportunities for women and members of minority groups and to eliminate practices which have the effect of excluding or limiting their employment. Also requires a written affirmative action plan, including goals for overcoming the underutilization of minorities and women in the employer’s workforce.

Section 503, Rehabilitation Act (1973)
Prohibits discrimination by federal contractors against any employee or applicant for employment because of physical or mental disability regarding any position for which he or she is qualified. Requires the employer to take affirmative action to employ, promote, and otherwise treat qualified individuals with disabilities without discrimination based on their disability. Also requires a written affirmative action plan, but hiring goals need not be established. Affirmative action does require that an employer take steps to accommodate a qualified worker with a disability unless accommodation poses an undue hardship.

Prohibits discrimination by federal contractors against applicants or employees because they are special disabled veterans or veterans of the Vietnam era in regard to any position for which they are qualified. Requires that employers take affirmative action to employ, advance in employment, and otherwise treat special disabled veterans and Vietnam era veterans without discrimination based on their disability or veteran’s status. Also requires a written affirmative action plan, but hiring goals need not be established.

Age Discrimination in Employment Act of 1967, as amended
Prohibits employers from failing or refusing to hire, or from discharging, or from otherwise discriminating against any individual aged 40 or over with respect to compensation and all terms, conditions, and privileges of employment because of the individual’s age. Exceptions to the prohibition against forced retirement include certain high-level executives and public safety personnel.

New Jersey Law Against Discrimination, as amended (1945)
Prohibits job discrimination on the basis of race, creed, color, national origin, ancestry, age, marital status, affectional or sexual orientation, sex, atypical hereditary cellular or blood trait, liability for service in the Armed Forces of the United States, or familial status. The law also
applies to physical disability unless the nature and extent of the disability “reasonably precludes the performance of the particular employment.”

Equal Pay Act of 1963, as amended
Prohibits employers from discriminating on the basis of sex in paying salaries for equal work requiring equal skill, effort, and responsibility and performed under similar working conditions.

Title I of the Americans with Disabilities Act (1990)
Prohibits employers from discriminating against any qualified employee or applicant for employment because of a physical or mental disability. In addition, it requires employers to make reasonable accommodations for qualified individuals with disabilities unless doing so would impose an undue hardship.

The **Lilly Ledbetter Fair Pay Act of 2009** is an Act of Congress enacted by the 111th United States Congress and signed into law by President Barack Obama on January 29, 2009.

The bill amends the Civil Rights Act of 1964 stating that the 180-day statute of limitations for filing an equal-pay lawsuit regarding pay discrimination resets with each new discriminatory paycheck. The law was a direct answer to the Ledbetter v. Goodyear Tire & Rubber Co, a U.S. Supreme Court decision holding that the statute of limitations for presenting an equal-pay lawsuit begins at the date the pay was agreed upon, not at the date of the most recent paycheck, as a lower court had ruled.

**Additional Laws and Orders Regulating Nondiscrimination in Employment**

Civil Rights Act of 1866
Prohibits racial discrimination in all aspects of contractual relationships.

Immigration Reform and Control Act of 1986
Prohibits national origin or citizenship status discrimination.

Title VI of the Civil Rights Act of 1964
Prohibits discrimination on the basis of race, color, or national origin in any program or activity that receives federal financial assistance. Employment discrimination is covered by Title VI if the primary objective of the financial assistance is the provision of employment or where employment discrimination causes or may cause discrimination in providing services under such programs.

Title IX of the Education Amendments to the Higher Education Act of 1965 (1972)
Prohibits discrimination on the basis of sex in any educational program or activity that receives federal financial assistance. Title IX applies to employees as well as students and, therefore, prohibits employment discrimination on the basis of sex in educational institutions.

Age Discrimination Act of 1975
Prohibits discrimination on the basis of age by recipients of federal financial assistance.

Section 504, Rehabilitation Act, 1973
Prohibits discrimination on the basis of disability in any program or activity receiving federal assistance.

Family and Medical Leave Act of 1993
Requires employers to provide to eligible employees unpaid, job-protected leave of up to 12 weeks in a 12-month period for the serious health condition of an employee or a covered family member and for child care upon birth, adoption, or placement of a foster child. Prohibits discrimination against employees who exercise their leave rights.

New Jersey Family Leave Act
Requires employers to provide to eligible employees unpaid, job-protected leave of up to 12 weeks in a 24-month period for the serious health condition of a covered family member and for child care upon birth or adoption of a child. Prohibits discrimination against employees who exercise their leave rights.

Employment and Education Law Web Sites:

http://www.eeoc.gov
http://www.dol.gov
http://www.state.nj.us/personnel/EEO/laws.htm
http://www.state.nj.us/labor/
II. EQUAL ACCESS/EQUAL OPPORTUNITY

Equal Employment Opportunity Policy Statement

It is the policy of Rowan University to ensure equal employment opportunity in accordance with all applicable local, state and federal regulations and guidelines. Employment discrimination against employees and applicants due to race, color, religion, gender (including sexual harassment), sexual orientation, gender identity, national origin, disability, age, military status, veteran status, and any other category protected by applicable law, is illegal.

Managers and employees will comply with local, state and federal equal employment laws, rules, regulations and guidelines. Any employee that deliberately violates this policy will be subject to disciplinary action up to and including termination of employment.

Employees or applicants who believe that Rowan University has discriminated against them in employment should report it immediately to the Office of Equity and Diversity in Linden Hall. It is important to note that employees and applicants may raise such concerns without fear of reprisal or retaliation.

Discussion:

Rowan University is an equal access (ADA)/equal opportunity (EEO) employer and committed to recruit, employ, and promote personnel without regard to race, color, sex, creed, age, religion, national origin and all protected classes in compliance with all Federal and State legislation and regulations pertaining to non-discrimination. Further, the University incorporates opportunities for the physically handicapped as a part of equal access/equal opportunity employment.

The employees of the University are expected to teach or work with other employees, and to supervise or be supervised in their work by other employees without regard to any protected classes or physical handicap.

Rowan University is committed to provide equal educational opportunities to all prospective students and enrolled students regardless of protected class. This commitment to equal access/equal opportunity includes the following: recruitment, admission, programs and activities, facilities, counseling and testing, financial assistance, and placement. This concept includes educational opportunities for the physically handicapped.

Authority: Title VI and VIII, 1964 Civil Rights Act; Executive Order; Title IX, 1972 Education Amendments; Section 504, 1973 Rehabilitation Act, 1990 Americans With Disabilities Act, PL 1975, C127(NJAC 17:27).
EEO Plan

Recruitment – Rowan University will exercise good faith efforts to recruit a diverse group of employees and provide equal opportunity for all protected class members.

Selection – Rowan University will utilize a hiring process that is fair and does not have an adverse impact on members of the protected classes. Prospective employees will not be excluded from the hiring process due to race, color, religion, gender (including sexual harassment), sexual orientation, gender identity, national origin, disability, age, military status, veteran status, and any other category protected by applicable law.

Employee Orientation – Rowan University will provide newly hired employees with basic employment information, including available fringe benefits and company policies and procedures. Employees will not be denied fringe benefits and/or opportunities for promotion based on race, color, religion, gender (including sexual harassment), sexual orientation, gender identity, national origin, disability, age, military status, veteran status, and any other category protected by applicable law.

Training – Rowan University makes every effort to train its employees about its equal employment opportunity obligations under state law.

Employee Evaluation – Rowan University will conduct performance evaluations without regard to race, color, religion, gender (including sexual harassment), sexual orientation, gender identity, national origin, disability, age, military status, veteran status, and any other category protected by applicable law.

Employee Discipline – Rowan University will not unfairly discipline an employee based on race, color, religion, gender (including sexual harassment), sexual orientation, gender identity, national origin, disability, age, military status, veteran status, and any other category protected by applicable law.

EEO Monitoring Strategies – Rowan University understands this plan and will hold itself accountable for the effective implementation of this plan.

Minority Business Enterprise Solicitation Strategies – where possible, Rowan University will make a good faith effort to solicit business from certified minority and/or women-owned businesses (MWBE).
Policy and Procedures:

Rowan University
Glassboro, New Jersey 08028
ACCOMODATION POLICY

The University has developed the following procedures in response to implementing the Americans with Disabilities Act (ADA). Rowan is committed to an interactive process so that all parties involved can freely express ideas and suggestions and so that Rowan may reach a decision on the appropriateness of a reasonable accommodation. Rowan University of New Jersey will provide individually determined reasonable accommodations in order for eligible individuals to obtain equal access to educational or occupational programs and activities.

For Students: The Disability Resource Center is the first contact for students requiring assistance. Students requiring accommodations should contact the Disability Resource Center either when an acceptance letter to Rowan University is received or when the disability is identified. Proper documentation is required to be submitted to the Disability Resource Center stating the disability, and how it limits participation in courses, programs, services, jobs, activities, and facilities of the University. Further information for students can be obtained by visiting: http://www.rowan.edu/studentaffairs/asc/disabilityresources/

Employee Accommodation Policy: ADA/504 – Office of Equity and Diversity, Linden Hall, Rowan University, (856)256-5440

The Americans with Disabilities Act gives civil rights protection to individuals with disabilities and guarantees equal opportunity for individuals with disabilities in public accommodations, employment, transportation, State and local government services, and telecommunications. Section 504 of the Rehabilitation Act of 1973 prohibits discrimination on the basis of disability in any program or activity receiving federal financial assistance. *

Rowan University complies with the American Disabilities Act and section 504 of the Rehabilitation Act. In order to do so, Rowan has established a process to ensure equal treatment of all employees and candidates with disabilities. Please contact the Office of Human Resources if you have any questions.

Accommodation Policy

The Office of Human Resources is the first contact for employees and/or potential employees requiring assistance. Within ten days of receiving notification that an employee or candidate may need an accommodation, the Office of Human Resources will contact the individual to begin the verification process. Once all required documentation is received, a representative from the Office of Human Resources will meet with the employee or candidate to review and verify the information and to develop an accommodation plan if eligible. Each accommodation is determined on a case by case basis.

* Taken from the US Department of Justice, Civil Rights Division.
Copies of the accommodation plan will be given to the employee and to the appropriate department head, as well as a copy placed in the ADA/504 file. Any changes to the accommodation plan may require additional documentation and must be processed through the Human Resources.

Any accommodation that has a financial impact on the institution will be referred to the Vice President of Finance to determine if the university can provide for the accommodation. Barring extenuating circumstances, this determination should occur within ten days of the receipt of the referral.

**Appeals Process**

If the employee is found to be ineligible under ADA/504, an appeal may be submitted to the Vice President of Finance. At that time the Vice President will select a committee to review any and all documentation on file in order to make a determination of eligibility. The result of the appeal will be made within 30 days from the date of receipt of the original request. If the employee is dissatisfied with the decision, it can be appealed directly to the President’s office.

**Grievance Process**

Once an accommodation plan has been approved, it should be followed as established. If for any reason this should not happen, the employee may file a grievance with the ADA/504 officer in the Office of Human Resources. An investigation will be done into the matter and a plan will be developed for a resolution between the employee and the head of the appropriate department. The employee will be notified of the results within 30 days of the original receipt of the grievance, barring extenuating circumstances.

**Documentation Required**

**Learning Disabilities**:

Documentation must be dated within three (3) years, must have been conducted by qualified professionals, and must include the following:

**Aptitude Assessment:** The Wechsler Adult Intelligence Scale-III is the preferred instrument. Group intelligence tests, the Slosson Intelligence Test and the Kaufman Brief Intelligence Test are NOT appropriate.

**Achievement Assessment:** Current levels of reading, mathematics, written language are required. Preferably, a certified Learning Disabilities Specialist should have administered the tests. Acceptable instruments include the Woodcock-Johnson Psycho-Educational Battery-Revised or the Wechsler Individual Achievement Test for age appropriate students. The Wide Range Achievement Test is NOT a comprehensive measure of achievement.

* Taken from the US Department of Justice, Civil Rights Division.
Information Processing: Specific areas of information processing (e.g., short and long-term memory; sequential memory; auditory and visual perception/processing; processing speed, etc.) must be assessed. Information from subtests on the WAIS-III or the Woodcock-Johnson Tests of Cognitive Ability as well as other instruments relevant to the presenting learning problem(s) may be used to assess these areas.

**Medical Condition:**

Documentation must be dated within three (3) years if the condition is permanent. If the condition is temporary, documentation must be dated within one (1) year. Additional information may be requested after a periodical review.

**Psychological Condition:**

Documentation must be dated within one (1) year. Additional information may be requested after a periodical review.

Periodical reviews are made on a case by case basis depending on the prognosis submitted in the documentation.

Documentation must be typewritten on official letterhead and must include:
- Diagnosis
- Prognosis – must include length of recovery for temporary conditions
- Recommendations
- Statement certifying that the condition is disabling, to what extent, and that it meets the criteria under ADA/504

**Definition of a Disability as Per ADA/504**

A person with a disability is someone with a physical or mental impairment that substantially limits one or more major life activities. A person is considered to be a person with a disability if he/she has the disability, has a record of the disability, or is regarded as having the disability. Inherent in this definition is the concept that an impairment itself is not a disability. It is the interaction of the impact of an impairment and the demands of the environment that create a disability.

A “physical impairment” means any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological, musculoskeletal, special sense organs, respiratory (including speech organs), cardiovascular, reproductive, digestive, genito-urinary, hemic and lymphatic, skill and endocrine.

A “mental impairment” means any psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disorders.
An impairment which “substantially limits” refers to an inability to perform a major life activity, or a significant restriction as to the condition, manner, or duration under which a major life activity can be performed, in comparison to the average person or to most people; the availability of some mitigating factor (such as a hearing aid for a person with hearing loss that brings hearing acuity within normal limits) is not considered when determining if the disability substantially limits the individual.

Major life activities are the basic activities that the average person can perform with little or no difficulty. These activities include, but are not limited to, walking, seeing, learning, working, performing manual tasks, speaking, and hearing.
Title IX

Sex and gender discrimination and harassment can appear in the most unexpected places and scenarios. Rowan University complies with the federal requirements of Title IX by providing an educational environment free from discrimination and harassment that does not deny the ability to participate or benefit from any University program on the basis of sex/gender.

The new Sexual Misconduct Policy for students can be found on the Title IX webpage:
www.rowan.edu/equity/titleix

The policy can also be found in the Student Handbook:
www.rowan.edu/studentaffairs/communitystandards/handbook.html

Please refer students to these sites if an incident involving sex/gender is brought to your attention. Once referred, contact a member of the Core Title IX Team to report the issue (see below).

For questions and more information please contact:

Dr. Johanna Velez-Yelin- Assistant Vice President of Equity and Diversity and Title IX Coordinator
(856-256-5440)

Dr. Penny McPherson-Barnes- Associate Dean for Academic Enrichment/Director of EOF/MAP-Title IX Deputy Coordinator
(856-256-4086)

Joe Mulligan- Associate Dean for Civic Involvement and Title IX Deputy Coordinator
(856-256-4242)

Travis Douglas- Director of Residential Learning and University Housing and Title IX Deputy Coordinator (856-256-4266)

For sex/gender concerns involving employees please refer to the NJ Policy Prohibiting Discrimination in the Workplace at www.rowan.edu/equity or contact the Office of Equity and Diversity at ext. 5440.

For situations dealing with underage children in abusive situations our Title II policy can be found in: www.rowan.edu/equity in the Employee information link on the left side of the page.
III. PROTECTION OF STUDENT AND EMPLOYEE PRIVATE INFORMATION

Student Policy:

Revised FERPA
November 21, 1996

BUCKLEY AMENDMENT
POLICY STATEMENT FAMILY EDUCATIONAL RIGHTS
AND PRIVACY ACT

The Family Educational Rights and Privacy Act of 1974, as amended, is a federal law which provides for the confidentiality of student records. The law further requires that annual written notification be made regarding the students’ rights. Rowan University shall maintain the confidentiality of student education records in accordance with the provisions of the Act, shall accord all the rights under the Act to students who are declared independent and who are or have been in attendance at Rowan University, and shall make annual notification of the provisions of the Act as required.

I. Rights of Inspection

The Act provides students with the right to inspect and review information contained in their educational records, to challenge the contents of those records which students consider to be inaccurate, misleading, or otherwise in violation of their privacy or other rights, to have a hearing if the outcome of the challenge is unsatisfactory’, and to submit explanatory statements for inclusion in their files if the decision of the hearing panels are unacceptable. The designated officials (office directors) at Rowan University have been assigned to coordinate the inspection and review procedures for student education records, which include admissions, personal, academic, and financial files, and academic cooperative education and placement records.

II. Education Records: Definition

Education records are records directly related to a student which are maintained by Rowan University. Education records do not include the following:

a. records of instructional, supervisory, and administrative personnel, and ancillary educational personnel which are in the sole possession of the maker and are not accessible or revealed to any other individual except a substitute who may temporarily perform the duties of the maker;

b. records of a law enforcement unit of Rowan University which are maintained separate from education records, are maintained solely for law enforcement purposes, and are not disclosed to individuals other than law enforcement officers of the same jurisdiction, provided that education records of Rowan University may not be disclosed to the law enforcement unit;

c. records relating to individuals who are employed by Rowan University which are made and maintained in the normal course of business, relate exclusively to individuals in their capacity as employees and are not available for another purpose. Note: Records of persons who are employed solely as a consequence of university attendance, e.g., teaching/graduate assistants, work-study students, are education records.
d. records created and maintained by a physician, psychiatrist, psychologist, or other recognized professional or paraprofessional, such as student health records to be used sole in connection with the provision of treatment to the student and not disclosed to anyone other than for treatment purposes, provided that records may be disclosed to physicians or professionals of student’s choice;

e. Note: Treatment in this context does not include remedial education activities or other activities which are part of the program of instruction at Rowan University.

f. records of an institution which contain only information relating to a person after that person is no longer a student at the institution, e.g., accomplishments of alumni.

III. Request for Review

Students wishing to review their education records must make a written request to the university official who has the record in his/her custody, listing the item or items to be reviewed. Only those records covered by the Act will be available for review. The items requested shall be made available no later than 45 calendar days following receipt of the written request. Students have the right to a copy of the education record when failure to provide a copy of the record would prevent the student from inspecting and reviewing the record. A copy of the academic record may be refused if a “hold” for non-payment of financial obligation exists. The copies shall be made at the student’s expense. The fee for making copies of the education record is $1.00 per page and must be paid at the time the copy is requested.

IV. Limitations on Student Rights

There are some limitations on the rights of students to inspect records. The students shall have no right of inspection or review of:

a. financial information submitted by their parents;

b. confidential letter(s) and/or recommendations in the student file prior to January 1, 1975, if such documents were intended to be confidential and were used only for the purpose intended;

c. confidential letter(s) and/or recommendations in the file subsequent to January 1, 1975, associated with admissions, employment, or job placement or the receipt of an honor or honorary recognition if the student has waived his/her right to inspect confidential letters and/or recommendations;

d. education records containing information about more than one student, in which case the institution will permit access only to that part of the record pertaining to the inquiring student.

V. Waiver of Student Rights

Students may waive any or all of their rights under the Act. Rowan University does not require waivers and no institutional service shall be denied students who fail to supply waivers. All waivers must be in writing and signed by the student. Students may waive their rights to inspect and review either individual documents (e.g., a letter of recommendation) or classes of documents (e.g., an admissions file). The items or documents to which students have waived the right of access shall be used only for the purposes for which they are collected. If used for other purposes, the waivers shall be void and the documents may be inspected by the student. The student may revoke the waiver in writing, but by revoking it, they do not regain the right to inspect and review documents collected while the waiver was in force.
VI. Consent Provisions

No person outside of Rowan University shall have access to nor shall Rowan University disclose any personally identifiable information from students’ education records without the written consent of the students (see Section VIII). The consent must specify the records to be released, the purpose of the disclosure, the party or class of parties to whom disclosure may be made and must be signed and dated by the student. There are, however, exceptions to the consent policy. Rowan University reserves the right, as allowed under the Act, to disclose education records or components thereof without written consent to:

a. personnel within the University who demonstrate a need to know and who act in the student’s educational interest including faculty, administration, clerical and professional employees and other persons who manage student records;

b. officials of other institutions in which students seek to enroll, on the condition that Rowan University makes a reasonable attempt to inform the student of the disclosure at the student’s last known address, unless the student initiated the request to transfer;

c. officials of other schools in which the student is currently enrolled;

d. persons or organizations providing student financial aid in order to determine the amount, eligibility, conditions of award and to enforce the terms of the award;

e. accrediting organizations carrying out their accrediting functions;

f. authorized representatives of the Controller General of the United States, the Secretary of the Department of Education, and state educational authorities only if the information is necessary for audit and evaluation of federal- and state-supported programs;

g. state and federal officials to whom disclosure is required by state statute adopted prior to November 19, 1974;

h. organizations conducting studies to develop, validate, and administer predictive tests, to administer student aid programs, or to improve instruction, so long as there is no further external disclosure of personally identifiable information and the Information is destroyed when no longer necessary for the projects;

i. parents of dependent students who have established that a student’s status as a dependent according to Internal Revenue Code of 1954, Section 152 (as amended). This requires a certified copy of the parent’s most recent Federal Income Tax Form.

j. persons in compliance with a judicial order or a lawfully issued subpoena if reasonable effort is made to notify the students;

k. appropriate persons in a health or safety emergency, so long as (1) there is a serious threat to student or others, (2) the knowledge of the information is necessary to meet the emergency, (3) time is of the essence, and (4) the persons to whom the information is disclosed are in a position to deal with the emergency.

VII. Instructional Record of Disclosure

Rowan University shall keep a written record of all such exceptional disclosures and the student shall have the right to inspect such record. The record shall include the names of parties or agencies to whom disclosure is made, the legitimate reason for the disclosure, and the date of the disclosure. No record of disclosure shall be required for those requests made by students for
their own use, those disclosures made with the written consent of the students, those made to Rowan University officials or those specified as Directory Information.

VIII. Disclosure of Education Record Information

Rowan University shall obtain written consent from students before disclosing any personally identifiable information from their education record (with exceptions as noted in Section V). Such written consent for disclosure must:

a. specify the records to be released;

b. state the purpose of the disclosure;

c. identify the party or class of parties to whom disclosure may be made; and d. be signed and dated by the student. All such consents shall be maintained in the education record of the student.

IX. Directory Information

In its discretion, Rowan University may provide Directory Information in accordance with the provisions of the Act to include: student name, address, telephone number, date and place of birth, major field of study, dates of attendance, degrees and awards received, the most recent previous educational agency or institution attended by the student, participation in officially recognized activities and sports, and weight and height of members of athletic teams. Students may withhold Directory Information by notifying designated official in writing within 10 calendar days from the first scheduled day of class of fall term. All written requests for non-disclosure will be honored by the University for only one (1) academic year; therefore, authorization to withhold Directory Information must be filed annually.

X. Challenge of Contents of Education Records

Any student who believes that his/her education records contain information that is inaccurate or misleading or is otherwise in violation of their privacy or other rights may discuss their concerns informally with designated officials (office directors). If the decision of that person is in agreement with the student’s request, the appropriate records shall be amended and the student shall be notified in writing of the amendment(s). If the decision is not in agreement, the student shall be notified within fifteen (15) calendar days that the records will not be amended and the student shall be notified by the official of the student’s right to a hearing. Student requests for a formal hearing must be made in writing within thirty (30) calendar days from the mailing notice to the designated official who, within thirty (30) days after receipt of the written request, shall inform the student of the date, time and place of the hearing. The student shall be afforded a full and fair opportunity to present evidence relevant to the issue(s) raised. If the student desires, he/she may be assisted or represented at the hearing by one or more persons of his/her choice, including an attorney, at the student’s expense. The hearing shall be conducted by any party, including an official of Rowan University so long as the person does not have a direct interest in the outcome of the hearing. The hearing panel which will adjudicate such challenges will be the Campus Hearing Board. The decision of the hearing panel shall be final, shall be based solely on the evidence presented at the hearing and shall be in writing, summarizing the evidence and stating the reasons for the decision. The written report shall be mailed to the student and any concerned party within thirty (30) calendar days of the date of the hearing.
a. If the hearing panel determines that the information at issue is inaccurate, misleading or a violation of privacy or other rights, the student’s record shall be amended in accordance with the decision and the student shall be so informed in writing.

b. If the hearing panel decision is unsatisfactory to the student, the student may place with the education record a statement(s) commenting on the information in the record, or statement(s) setting forth any reasons for disagreeing with the decision of the hearing panel. The statement(s) shall be placed in the education record and shall be maintained as part of the record and shall be released whenever the records in question are disclosed to an authorized party.

c. Note: Rights of challenge cannot be used to question substantive educational judgments which are correctly recorded (e.g., course grades with which the student disagrees).

Students who believe that the adjudications of their challenges were unfair or not in keeping with the provisions of the Act may request, in writing, assistance from the President of Rowan University to aid them in filing a complaint with the Family Educational Rights and Privacy Act (FERPA), Family Policy Compliance Office, Department of Education, 400 Maryland Avenue, Washington, DC 20202.

XI. Destruction of Records

Once a student has requested access to his/her records, such student’s record shall not be destroyed until inspection and review have been provided. The following items shall not be destroyed or removed from the record:

a. “explanations” placed in the record by the student (see Section X);

b. records of disclosure and requests for disclosures.

Rowan University reserves the right to destroy the information contained in student records and files when information on file is no longer valid and/or useful, e.g., letters of recommendation once they have been used for their original purpose.

Approved:  

Date: July 7, 1996  Executive Vice President/Provost
Employee Policy

NOTICE OF PRIVACY PRACTICES TO ENROLLEES IN THE STATE HEALTH BENEFITS PROGRAM

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

EFFECTIVE DATE: APRIL 30, 2015

Protected Health Information

The State Health Benefits Program (SHBP) and School Employees’ Health Benefits Program (SEHBP) are required by the federal Health Insurance Portability and Accountability Act (HIPAA) and State laws to maintain the privacy of any information that is created or maintained by the Programs that relates to your past, present, or future physical or mental health. This Protected Health Information (PHI) includes information communicated or maintained in any form. Examples of PHI are your name, address, Social Security number, birth date, telephone number, fax number, dates of health care service, diagnosis codes, and procedure codes. PHI is collected by the Programs through various sources, such as enrollment forms, employers, health care providers, federal and State agencies, or third-party vendors.

The Programs are required by law to abide by the terms of this Notice. The Programs reserve the right to change the terms of this Notice. If the Programs make material change to this Notice, a revised Notice will be sent.

Uses and Disclosures of PHI

The Programs are permitted to use and to disclose PHI in order for our members to obtain payment for health care services and to conduct the administrative activities needed to run the Programs without specific member authorization. Under limited circumstances, we may be able to provide PHI for the health care operations of providers and health plans. Specific examples of the ways in which PHI may be used and disclosed are provided below. This list is illustrative only and not every use and disclosure in a category is listed.

- The Programs may disclose PHI to a doctor or a hospital to assist them in providing a member with treatment.

- The Programs may use and disclose member PHI so that our Business Associates may pay claims from doctors, hospitals, and other providers.
• The Programs receive PHI from employers, including a member’s name, address, Social Security number, and birth date. This enrollment information is provided to our Business Associates so that they may provide coverage for health care benefits to eligible members.

• The Programs and/or our Business Associates may use and disclose PHI to investigate a complaint or process an appeal by a member.

• The Programs may provide PHI to a provider, a health care facility, or a health plan that is not our Business Associate that contacts us with questions regarding the member’s health care coverage.

• The Programs may use PHI to bill the member for the appropriate premiums and reconcile billings we receive from our Business Associates.

• The Programs may use and disclose PHI for fraud and abuse detection.

• The Programs may allow use of PHI by our Business Associates to identify and contact our members for activities relating to improving health or reducing health care costs, such as information about disease management programs or about health-related benefits and services or about treatment alternatives that may be of interest to them.

• In the event that a member is involved in a lawsuit or other judicial proceeding, the Programs may use and disclose PHI in response to a court or administrative order as provided by law.

• The Programs may use or disclose PHI to help evaluate the performance of our health plans. Any such disclosure would include restrictions for any other use of the information other than for the intended purpose.

• The Programs may use PHI in order to conduct an analysis of our claims data. This information may be shared with internal departments such as auditing or it may be shared with our Business Associates, such as our actuaries.

Except as described above, unless a member specifically authorizes us to do so, the Programs will provide access to PHI only to the member, the member’s authorized representative, and those organizations who need the information to aid the Program in the conduct of its business (our “Business Associates”). An authorization form may be obtained over the Internet at: www.state.nj.us/treasury/pensions or by sending an e-mail to: hipaaform@treas.state.nj.us A member may revoke an authorization at any time.

**Restricted Uses**

• PHI that contains genetic information is prohibited from use or disclosure by the Programs for underwriting purposes.
- The use or disclosure of PHI that includes psychotherapy notes requires authorization from the member.

When using or disclosing PHI, the Programs will make every reasonable effort to limit the use or disclosure of that information to the minimum extent necessary to accomplish the intended purpose. The Programs maintain physical, technical, and procedural safeguards that comply with federal law regarding PHI. In the event of a breach of unsecured PHI, the member will be notified.

**Member Rights**

Members of the Programs have the following rights regarding their PHI:

**Right to Inspect and Copy:** With limited exceptions, members have the right to inspect and/or obtain a copy of their PHI that the Programs maintain in a designated record set which consists of all documentation relating to member enrollment and the Program's use of this PHI for claims resolution. The member must make a request in writing to obtain access to their PHI. The member may use the contact information found at the end of this Notice to obtain a form to request access.

**Right to Amend:** Members have the right to request that the Programs amend the PHI that we have created and that is maintained in our designated record set.

We cannot amend demographic information, treatment records or any other information created by others. If members would like to amend any of their demographic information, please contact your personnel office. To amend treatment records, a member must contact the treating physician, facility, or other provider that created and/or maintains these records.

The Programs may deny the member's request if: 1) we did not create the information requested on the amendment; 2) the information is not part of the designated record set maintained by the Programs; 3) the member does not have access rights to the information; or 4) we believe the information is accurate and complete. If we deny the member's request, we will provide a written explanation for the denial and the member's rights regarding the denial.

**Right to an Accounting of Disclosures:** Members have the right to receive an accounting of the instances in which the Programs or our Business Associates have disclosed member PHI. The accounting will review disclosures made over the past six years. We will provide the member with the date on which we made a disclosure, the name of the person or entity to whom we disclosed the PHI, a description of the information we disclosed, the reason for the disclosure, and certain other information. Certain disclosures are exempted from this requirement (e.g., those made for treatment, payment or health benefits operation purposes or made in accordance with an authorization) and will not appear on the accounting.

**Right to Request Restrictions:** The member has the right to request that the Programs place restrictions on the use or disclosure of their PHI for treatment, payment, or health care operations purposes. The Programs are not required to agree to any restrictions and in some cases will be
prohibited from agreeing to them. However, if we do agree to a restriction, our agreement will always be in writing and signed by the Privacy Officer. The member request for restrictions must be in writing. A form can be obtained by using the contact information found at the end of this Notice.

**Right to Restrict Disclosure:** The member has the right to request that a provider restrict disclosure of PHI to the Programs or Business Associates if the PHI relates to services or a health care item for which the individual has paid the provider in full. If payment involves a flexible spending account or health savings account, the individual cannot restrict disclosure of information necessary to make the payment but may request that disclosure not be made to another program or health plan.

**Right to Receive Notification of a Breach:** The member has the right to receive notification in the event that the Programs or a Business Associate discover unauthorized access or release of PHI through a security breach.

**Right to Request Confidential Communications:** The member has the right to request that the Programs communicate with them in confidence about their PHI by using alternative means or an alternative location if the disclosure of all or part of that information to another person could endanger them. We will accommodate such a request if it is reasonable, if the request specifies the alternative means or locations, and if it continues to permit the Programs to collect premiums and pay claims under the health plan.

To request changes to confidential communications, the member must make their request in writing, and must clearly state that the information could endanger them if it is not communicated in confidence as they requested.

**Right to Receive a Paper Copy of the Notice:** Members are entitled to receive a paper copy of this Notice. Please contact us using the information at the end of this Notice or click this link to download this Privacy Notice.

**Questions and Complaints**

If you have questions or concerns, please contact the Programs using the information listed at the end of this Notice.

If members think the Programs may have violated their privacy rights, or they disagree with a decision made about access to their PHI, in response to a request made to amend or restrict the use or disclosure of their information, or to have the Programs communicate with them in confidence by alternative means or at an alternative location, they must submit their complaint in writing. To obtain a form for submitting a complaint, use the contact information found at the end of this Notice.

Members also may submit a written complaint to the U.S. Department of Health and Human Services, 200 Independence Avenue, S.W., Washington, D.C. 20201.
The Programs support member rights to protect the privacy of PHI. It is your right to file a complaint with the Programs or with the U.S. Department of Health and Human Services.

**Contact Office**: HIPAA Privacy Officer

**Address**: State of New Jersey  
Department of the Treasury  
Division of Pensions and Benefits  
PO Box 295  
Trenton, NJ 08625-0295

**E-mail**: hipaaform@treas.state.nj.us
Discussion:

Rowan University is required by applicable federal and state law to maintain the privacy of financial, health, employment and academic records of the University’s employees and students. The University is also required to give you this notice about the University’s privacy practices, its legal duties, and your rights concerning your financial, health, employment and academic records.

In addition to the privacy policies that follow, Rowan University engages in other systematic practices in its various departments developed to protect student and employee privacy. Of particular note is Rowan University’s enterprise information system. Rowan's administrative databases use system-produced identifiers to track individuals NOT social security numbers.

Office of Human Resources Employment Verification Practice:

Employment verifications that are submitted to the Human Resources department must have the employee’s signed permission. Otherwise, the only information that will be given out is whether current or former employee.

Employee Access to Personnel Files

Scope
The policy and procedures set forth are for the purpose of storage and retrieval of personnel files as well as providing employees supervised access to their personnel file and/or re-contracting file.

Rowan University is committed to providing a personnel file storage and retrieval system that secures the privacy of employee files and maintains the integrity of the data contained in those same files. Personnel file system and maintenance are the responsibility of the Human Resources and access to the personnel file room is limited to personnel designated by the Associate VP of Employee & Labor Relations.

Purpose
The purpose of this policy is to secure HR files and provide service to those employees and other management/supervisory personnel who need access to the files. Removal of files by authorized personnel, Office of Human Resources, Labor Relations and also the Provost, will be facilitated by the Records Management function of the Office of Human Resources as identified by the Associate VP of Employee & Labor Relations.

Procedure
Any employee wishing to conduct a supervised review of the information in his/her personnel file or re-contracting file is required to complete a Request for File(s) (RFR) form and submit it to Records Management/Office of Human Resources in person, via interoffice mail or via e-mail.
The Office of Human Resources will notify the employee when and where the file can be reviewed. Only HR is authorized to copy materials contained in the file for an employee. Inquiries can be directed to x4306 or x4134.
IV. DRUG-FREE WORKPLACE

Policy:

State of New Jersey
Executive Department

EXECUTIVE ORDER NO. 204

WHEREAS, the problem of drug abuse is adversely affecting the lives and safety of our citizens; and

WHEREAS, the abuse of drugs in the workplace, among other things, reduces job efficiency, increases absenteeism and sick leave, and, most importantly, jeopardizes the lives and safety of fellow employees and citizens; and

WHEREAS, the State of New Jersey has a vital interest in promoting a safe and drug-free workplace and in ensuring our citizens that public safety employees do not threaten life and limb due to the abuse of drugs; and

WHEREAS, the Federal Drug-Free Workplace Act of 1988, Public Law 100-690, Title V,Subtitle D, conditions receipt of Federal grant funds upon the grantee’s agreement to provide a drug-free workplace; and

WHEREAS, the Federal Drug-Free Workplace Act requires a grantee to prohibit the unlawful manufacture, distribution, dispensation, possession or use of a controlled substance, to specify actions that may be taken against employees who violate the prohibition, to establish a drug-free awareness program for employees, and to require employees and employers to give notice of any conviction for a drug-offense committed in the workplace; and

WHEREAS, the citizens of this State greatly benefit from the State government’s participation in federally funded programs;

NOW, THEREFORE, I, THOMAS H. KEAN, Governor of the State of New Jersey, by virtue of the authority vested in me by the Constitution and by the Statutes of this State, do hereby ORDER and DIRECT:

1. The following “Policy for a Drug-Free Workplace in New Jersey State Government” shall apply to all principal executive departments in New Jersey State Government, the Office of the Governor, and all agencies that are in, but not of, principal executive departments.

2. This Policy establishes minimum standards for the imposition of discipline and for participation in drug abuse treatment programs in the limited context of convictions for drug offenses committed in the workplace. Nothing in this Policy precludes the application of other more comprehensive or more stringent provisions governing drug
offenses committed by State employees. In fact, the Cabinet Task Force on Drug Testing in the Workplace, which was created in Executive Order No. 191, will formulate a more comprehensive State policy regarding drug abuse and the workplace in the near future.

3. The State of New Jersey is committed to maintaining a drug-free workplace for all State employees in order to protect the health and safety of State employees and the public.

4. The unlawful manufacture, distribution, dispensation, possession or use of a drug in the workplace is prohibited.

5. In addition to any other applicable civil or criminal penalty, any employee convicted of illegal manufacture, distribution, dispensation, possession or use of a drug in the workplace shall be subject to the following consequences:
   a. The State Forfeiture of Public Office Statute (N.J.S.A. 2C:61-2) requires forfeiture of public office or employment upon conviction of a crime of the third degree or higher. All convictions of crimes of the third degree or higher listed in the Comprehensive Drug Enforcement Act of 1987, and all convictions for equivalent Federal and out-of-State drug offenses, require forfeiture of public office or employment.
   b. The Forfeiture of Public Office Statute also requires forfeiture of public office or employment upon conviction for an offense involving dishonesty or upon conviction for an offense involving or touching upon the convicted person’s public employment irrespective of the degree of the offense. Consequently, convictions for any drug offense occurring in the workplace (including fourth degree, disorderly persons and petty disorderly persons offenses) which are determined to involve or touch upon the office or employment of an individual may result in the statutory forfeiture of public office or employment.
   c. In the case of a drug conviction for an offense occurring in the workplace that does not result in statutory forfeiture of public office or employment, disciplinary action shall be taken. The extent of disciplinary action shall be determined by the appointing authority. In addition, in the case of any disciplinary action other than removal, an employee shall be required to satisfactorily participate in a program for the treatment of drug abuse approved by both the appointing authority and any Federal or State agency responsible for the approval or licensure of such programs.
   d. Each department head, agency head, or their designee who receives notice of a drug offense conviction shall, within 30 days of receipt of notice, take the administrative action necessary for removal where statutory forfeiture is required, and where statutory forfeiture is not required, take the administrative action necessary to impose discipline and require satisfactory participation in an approved program for drug abuse where appropriate.

6. An employee who is convicted of a drug offense committed in the workplace must, within five days, report the conviction to his or her supervisor.
7. Each supervisor who receives a report of a conviction for a drug offense in the workplace must immediately report the conviction, according to departmental or agency procedures, to the department head, agency head, or their designee.

8. Within 10 days of the supervisor’s receipt of notice of a conviction for a drug offense, the department head, agency head, or their designee shall ensure that notification of such conviction is provided to any Federal agency providing funds for a program in which the convicted employee is employed.

9. Each department head, agency head, or their designee must develop and implement procedures to ensure that reports, which are received by supervisors, concerning convictions for drug offenses in the workplace are reported promptly to the department head, agency head, or their designee.

10. Each department head, agency head, or their designee must maintain records that contain the following information on each conviction for a drug offense committed in the workplace by an employee:
   a. Date of conviction;
   b. Disciplinary action taken;
   c. Whether the employee is one whose duties involve the performance of a Federal grant; and
   d. Date Federal grantor was notified of the conviction, if applicable.

11. Each department head, agency head, or their designee will distribute an Employee Notice and this Executive Order to each current employee. Each department head, agency head, or their designee shall distribute these documents to any employee who joins the workforce after the initial distribution. A program entitled “Drug-Free Awareness” is being developed, and upon completion will be provided to all employees.

12. Definitions for purpose of this policy:
   a. “Conviction” means a finding of guilt, or a plea of guilty, before a court of competent jurisdiction, and, where applicable, a plea of nolo contendere. A conviction is deemed to occur at the time the plea is accepted or verdict returned. It does not include entry into and successful completion of a pre-trial intervention program, pursuant to N.J.S.A. 2C:43-12 et seq., or a conditional discharge, pursuant to N.J.S.A. 2C:36A-1.
   b. “Drug” means a controlled dangerous substance, analog, or immediate precursor as listed in Schedules I through V in the New Jersey Controlled Dangerous Substances Act, N.J.S.A. 24:21-1, et seq., and as modified in any regulation issued by the Commissioner of the Department of Health. It also includes controlled substances in schedules I through V of Section 202 of the Federal Controlled Substance Act of (21 U.S.C. 812). The term shall not include tobacco or tobacco products or distilled spirits, wine, or malt beverages as they are defined or used in N.J.S.A. 33:1-1 et seq.
   c. “Employee” means all employees of the Office of the Governor or a department or agency within the scope of this Policy, whether full or part-time, and whether in the career, senior executive or unclassified service.
   d. “Workplace,” for the purposes of this Policy only, means the physical area of operations of a department or agency including buildings, grounds and parking facilities provided by the State. It includes any field location or site at which an
employee is engaged, or authorized to engage, in work activity, and includes any travel between such sites.

13. This Policy is effective March 18, 1989, and shall remain in effect until superseded by statute, regulation or Executive Order.

GIVEN, under my hand and seal, this 14th day of March in the Year of Our Lord, one thousand nine hundred and eighty-nine, and of the Independence of the United States, the two hundred and thirteenth.

Thomas H. Kean
GOVERNOR
[seal]

Attest:
/s/ Deborah T. Portitz
Discussion:

Rowan University is committed to providing a drug-free work environment for all employees in compliance with all Federal and State legislation and regulations pertaining to a “Drug-Free Workplace.”

Pursuant to the Drug-Free Workplace Act of 1988 (PL 100-690), the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance by an employee in the workplace or while on University business is prohibited.

Procedures:

Rowan University provides a drug-free awareness program to inform employees about the dangers of drug abuse in the workplace; the University’s policy of maintaining a drug-free workplace; available drug counseling programs, rehabilitation, and employee assistance programs; and the penalties that may be imposed upon employees for drug abuse violations.

Each new employee is provided with a copy of the Drug-Free Workplace Act and, as a condition of employment, must:

1. Abide by the terms of the Drug-Free Workplace Act,
2. Acknowledge that they have read the Act and agree to abide by it in all respects by signing the Acknowledgement of Receipt.

Employees convicted of a criminal drug statute violation involving the possession and/or use of a controlled substance in the workplace shall receive a 6 month suspension without pay or be required to participate in an approved drug abuse assistance or rehabilitation program. A second conviction of a criminal drug possession and/or use in the workplace shall result in dismissal from employment.

Employees convicted of a criminal drug statute violation involving the unlawful manufacture, distribution, and/or dispensing of controlled substances in the workplace shall result in dismissal from employment.
V. PUBLIC EMPLOYEES OCCUPATIONAL SAFETY AND HEALTH ACT (PEOSHA)

Policy:

The New Jersey Department of Labor

The New Jersey Public Employees’ Occupational Safety and Health Act N.J.S.A. 34:6A-25 et seq. provides job safety and health protection for public workers through the promotion of safe and healthful working condition throughout the State. The N.J. Department of Labor has sole responsibility for the administration of the State PEOSH plan. The N.J. Department of Health and Senior Services is a partner in the program with responsibilities for health related issues. Requirements of the Act include the following:

Employers

Every public employer shall provide each employee with employment and a place of employment free from recognized hazards that may cause serious injury, physical harm, or death to the employees, and shall comply with occupational safety and health standards promulgated under the Act.

Employees

Every public employee shall comply with all occupational safety and health standards and all regulations under the Act that apply to his or her own actions and conduct on the job.

Inspections

The N.J. Departments of Labor and Health and Senior Services conduct job site inspections to ensure compliance with the Act. The Act requires that a representative of the employer and a representative authorized by the employees have the opportunity to accompany the appropriate compliance officer for the purpose of aiding the inspection. The employer must pay normal wages to the employee representative for the time spent on this activity. Where there is no authorized employee representative, the compliance officer must consult with a reasonable number of employees concerning safety and health conditions in the workplace.

Complaints

Employees or their representatives have the right to file a complaint with or request an inspection by the N.J. Department of Labor or the N.J. Department of Health and Senior Services if they believe unsafe or unhealthful conditions exist in their workplace. Complaints of unsafe and unhealthful conditions can be made 24 hours a day by calling the N.J. Department of Labor PEOSHA at 1-800-624-1644. Complaints regarding health conditions may be communicated to the N.J. Department of Health and Senior Services at 609-984-1863. The complainant’s name will be withheld upon request.

The Act provides that employees may not be discharged or discriminated against in any way for filing health and safety complaints or otherwise exercising their rights under the Act.
Any employee who believes he or she has been discriminated against may file a complaint with the New Jersey Department of Labor within 180 days after the employee first had knowledge that such violation was alleged to have occurred.

Orders to Comply
The Commissioner of Labor is authorized to issue an Order to Comply to an employer when it is determined that the employer has violated the Act. Each Order will specify a time period within which the employer must correct the violation. The Order to Comply shall be prominently displayed at or near the place of violation cited in the Order so that it is clearly visible to the affected employees. The Order to Comply must be Posted for 15 working days or until each violation cited has been abated.

Penalties
The Act provides penalties of $7,000 per day for each violation against employers who fail to comply with an Order issued by the Commissioner of Labor. Willful or repeat violations may result in penalties to a maximum of $70,000 for each violation.

Voluntary Activity
Employee safety and health should not be dependent upon PEOSHA inspections. Accordingly, the Act encourages labor and management to enter into cooperative arrangements to promote safe and healthful work environments free from hazards. The N.J. Department of Labor arranges on-site training, at no cost, to assist employers in attaining compliance with the occupational safety and health regulations. To request training, contact the N.J. Department of Labor at 609-633-3957.

Mandatory Posting Instructions
This notice shall be posted in a conspicuous place as required by N.J.A.C. 12:110-4.2(a) 1. and 2., where notices are customarily posted.

More Information
You can obtain additional information and copies of the Act, specific PEOSHA safety and health standards, and other applicable regulations from your employer or by contacting the N.J. Department of Labor at 609-292-7036.

Additional copies of this poster or any other required posters may be obtained by contacting the New Jersey Department of Labor, Office of Constituent Relations, PO Box 110, Trenton, New Jersey 08625-0110, 609/777-3200

If you need this document in large print, call the Office of Marketing and Communications at (609) 292-3221. TTY users can contact this office through New Jersey Relay 1-800-852-7899.

NEW JERSEY
DEPARTMENT of HEALTH and
SENIOR SERVICES

WPS-3S (R-7-97)
Discussion:

Rowan University is committed to employee safety and works towards compliance. Compliance is a joint effort. Please note the Act does not say “totally risk free.” Although both the Department of Labor and Department of Health and Senior Services have inspection authority, and the authority to develop and implement safety rules, regulations and standards, only the Department of Labor can issue orders or penalties against an employer.

The Act requires all “employees” (anyone who is paid by the university, i.e. faculty/staff or student) to comply with safety standards. In addition, the employer may develop safety rules and procedures in addition to those specified in the Occupational Safety and Health Act (OSHA), and all “employees” are required to comply with both the OSHA standards and the employer’s.

The Act is specific in protecting an employee who files a complaint or otherwise exercising their rights. Employees can have their unit/unit representative file a complaint on their behalf. Regulatory inspectors generally ask a representative from each unit/union to accompany them. The minimum would be one from the unit who filed a complaint.

Whenever an Order to Comply is received by the University, the campus safety director will post a copy at the specific site of the violation(s) and provide a copy to the appropriate supervisor/manager/director so corrective action will be taken as outlined in the order. Penalties set established by the Dept. of Labor based on several contributing factors such as degree of seriousness, length of time the violating condition has existed, etc. In cases where the employer has been cited for a violation previously, it could constitute a repeat violation, even if the second occurrence is in a completely different location or operation.

Rowan University has a campus safety committee which meets twice a year. However, employees may contact any member of the committee at any time regarding a safety issue. The committee members keep in contact by phone and e-mail as necessary between meetings. To find out who are the current members of the safety committee, contact at Jack Glass at glassj@rowan.edu. All units/unions have representatives on the committee.

The PEOSHA poster, along with the NJ Worker and Community Right-to-Know Poster, are sent to each department for posting. They are normally displayed at time clocks, employee bulletin boards, and locations where employees gather.
VI. THE NEW JERSEY WORKER AND COMMUNITY RIGHT TO KNOW ACT

Policy:

The New Jersey Worker and Community Right to Know Act requires public and private employers to provide information about hazardous substances at their workplaces. The Act:

- informs public employees about chemical hazards at their workplace so they can work safely with these hazardous substances;
- helps firefighters, police, and other emergency responders adequately plan for and respond to incidents such as fires, explosions or spills;
- provides data for monitoring and tracking hazardous substances in the workplace and the environment.

How the Act Can Protect You And Your Family

Harmful substances may be present at your workplace and at other workplaces in your community, or may be released into the environment. They may also be carried home to your family on your work clothes.

Hazardous substances can cause irritation to the eyes, skin, and respiratory tract. Exposure to hazardous substances has been linked to health problems such as cancer, birth defects, and heart, lung and kidney diseases. These diseases may develop many years after exposure. As a public employee, you can obtain information about hazardous substances that may harm you or your family from documents in your workplace’s Right to Know (RTK) central file.

Knowing about hazardous substances and how they harm you can help you obtain the proper diagnosis and treatment if you should become sick. More importantly, awareness about hazardous substances and your potential exposure to them can help you make important decisions about your employment.

How the Act Works

Employers covered by the Act must complete surveys listing the names and amounts of hazardous chemicals stored and used at their workplaces.

Right to Know Surveys are completed by public agencies and sent to the New Jersey Department of Health and Senior Services (NJDHSS).

Community Right to Know Surveys are completed by private employers and sent to the New Jersey Department of Environmental Protection (NJDEP).

Copies of these surveys are required to be sent to local fire and police departments, designated Right to Know county agencies (mostly county health departments), and local emergency planning committees.

Public employers are required to label containers according to the New Jersey Right to Know Act and PEOSHA, and maintain a RTK Central File that contains information about hazardous substances at their facilities. Private employers are required to label containers according to OSHA and the New Jersey Right to Know Act.
How Public Employers Comply With the Right To Know Act

Public employers have the responsibility to assist workers in learning about the hazards of the products they work with. The employer must:

- Complete the Right to Know Survey
- Label Containers
- Create and Maintain a Right to Know/Central File
- Post the Right to Know Poster.

Public employees can obtain a copy of the survey by contacting their employer, the NJDHSS, or the designated county agencies at the numbers listed in this brochure.

How to Use Your Workplace Rights to Protect Your Health

The Right to Know Act gives employees certain rights and access to information about hazardous chemicals in their workplace. This information, kept in the RTK central file, informs workers about the health hazards of chemicals and ways to reduce or prevent their exposure to the chemical hazards. Learn to work safely with chemical hazards to protect your health and the health of your family members. To do so:

1. Work only with labeled containers.
2. Check your workplace RTK Survey to find out which products contain hazardous chemicals.
3. Read Material Safety Data Sheets and Hazardous Substance Fact Sheets about the health hazards of the hazardous chemicals in the products. These documents are kept in the RTK central file.

You do not have to work with a product if your employer has not given you the ingredient information you requested in writing within five working days. Call the NJDHSS for more information before you refuse to work with a product.

You can file a complaint against your employer for not complying with the RTK Act. Your name will be kept confidential.

This brochure is being distributed to you as part of your training about hazardous chemicals in the workplace under the PEOSH Hazard Communication Standard. For more information about training, contact the Public Employees Occupational Safety and Health (PEOSH) Program, New Jersey Department of Health and Senior Services, P 0 Box 360, Trenton, NJ 08625-0360, (609) 984-1863, http://www.nj.gov/health/eoh/peoshweb/.

The following three agencies work together to implement the Worker and Community Right to Know Act:

New Jersey Department of Health and Senior Services Right to Know Program, PO Box 368, Trenton, NJ 08625-0368, (609) 984-2202 http://www.state.nj.us/health/eoh/rtkweb/, enforces all provisions of the RTK Act in public workplaces and RTK labeling in private workplaces.
Program prepares Hazardous Substance Fact Sheets, the RTK brochure, and other materials to increase awareness of hazardous chemicals and help employers comply with the RTK Act. Printed materials are available upon request. Many are translated into Spanish.

New Jersey Department of Environmental Protection, Office of Pollution Prevention and Right to Know, PO Box 405 Trenton, NJ 08625-0405, (609) 292-6714, http://www.nj.gov/dep/opppc/crtk/, enforces the community provisions of the RTK Act in the private sector (except for labeling).

The Department is also responsible for implementing Title III (Emergency Planning and Community Right to Know) of the federal Superfund Amendments and Reauthorization Act (SARA), which establishes requirements for industry regarding emergency planning and reporting of hazardous chemicals.

New Jersey Department of Labor and Workforce Development
Office of Public Employees Occupational Safety and Health
PO Box 386
Trenton, NJ 08625-0386 (609) 292-7036

http://www.nj.gov/labor/lsse/lspeosh.html, collects RTK fees from private employers and investigates complaints by public employees who suspect they are being discriminated against for exercising their rights under the RTK Act.

How To Obtain Information Locally

You can obtain copies of the Right to Know Survey, Community Right to Know Survey, and Hazardous Substance Fact Sheets from your designated Right to Know county agency listed below:

Atlantic (609)645-5971, Ext. 4395
Bergen (201)634-2786
Burlington (609) 265-5515
Camden (856)374-6046
Cape May (609)465-1208
Cumberland (856)453-2156
Essex (973)228-8152
Gloucester (856)262-4200
Hudson (201)223-1133
Hunterdon (908)236-7111
Mercer (609)989-6497
Middlesex (732)745-3100
Monmouth (732)431-7456
Morris (973)285-6113
Ocean (732)341-9700, Ext. 7431
Passaic (973)225-3651
Salem (856)935-7410, Ext. 8489
Somerset (908)231-7000, Ext. 7506
Sussex (973)579-0370
Union (908)654-9890
Warren (908)689-6693

You have a right to know about hazardous substances in your Workplace and community.
NEW JERSEY WORKER AND COMMUNITY RIGHT TO KNOW ACT

YOU HAVE THE

RIGHT TO KNOW

• • • About hazardous substances in your workplace
• • • About hazardous substances in your community

USE YOUR RIGHTS!

• To find out more about the Right to Know Act
• To obtain information about hazardous substances in your workplace and community
• To receive training about hazardous substances from your employer
• To have containers in your workplace labeled with their ingredients

CONTACT THE RIGHT TO KNOW INFOLINE, (609) 984-2202
The Right to Know Act is being enforced by:
New Jersey Department of Health and Senior Services
CN 368, Trenton, N.J. 08625-0368
New Jersey Department of Environmental Protection
CN 405, Trenton, N.J. 08625-0405 New Jersey Department of Labor
CN 386, Trenton, N.J. 08625-0386

For information about substances in your workplace,
contact:
Jack Glass
ROWAN UNIVERSITY
glassj@rowan.edu
Discussion:
The university’s central hazardous materials file is maintained in the Department of Public Safety Offices, Bole Annex. Contact Jack Glass at glassj@rowan.edu for information.

There are two primary sources of information that are useful for this purpose. Material Safety Data Sheets (MSDS) which are received from the manufacturer or vendor of products and NJ Hazardous Substance Fact Sheets. However, not all chemicals have NJ Hazardous Substance Fact Sheets. There are several distinct differences between these and Jack Glass can explain them if needed. There are many exceptions to the labeling rule. There are also specific requirements on what constitutes a “label” under the Act.

The university uses a selected building approach to the inventory of hazardous chemicals. Any inventory is simply a “snap shot” in time of what is on-hand. There are approximately 15 buildings (out of approximately 71) that are inventoried. It is important to remember that there are exceptions to what must be reported.

The university files copies of our report with Rowan University’s Campus Police, Glassboro Police Department, Glassboro Fire Department and Gloucester County Emergency Response Center.

The Act is specific in protecting an employee who files a complaint or otherwise exercises their rights. Employees can have their unit/unit representative file a complaint on their behalf.
VIII. Network and Technology Use

Policy:
ISO Acceptable Use Policy

Title: Acceptable Use Policy

Subject: Information Security

Policy No: ISO:2013:01

Applies: University-wide

Issuing Authority: Information Security Office - Chief Information Security Officer

Responsible Officer: Vice President for Information Resources and Chief Information Officer

Adopted: 07/01/2013
Last Revision: 07/01/2014
Last Reviewed: 12/30/2014
Amended: 05/13/2015

I. PURPOSE

This policy sets forth the acceptable uses regarding the access and use of the University’s electronic information and information systems.

II. ACCOUNTABILITY

Under the direction of the President, the Chief Information Officer and the University’s Chief Information Security Officer shall implement and ensure compliance with this policy. The Vice Presidents, Deans, and other members of management will implement this policy.

III. APPLICABILITY

1. This policy applies to all members of the Rowan community who access and use the University’s electronic information and information systems. This policy and Rowan’s “Code of Conduct” also govern access and use of the University’s electronic information and information systems originating from non-Rowan computers, including personal computers and other electronic devices. The access and use of electronic information provided by research and funding partners to Rowan is also governed by this policy.
2. The use of information systems acquired or created through use of University funds, including grant funds from contracts between the University and external funding sources (public and private), are covered by this policy. This includes University information systems that are leased or licensed for use by members of the Rowan community.

IV. DEFINITIONS

1. “Availability” – the expectation that information is accessible by Rowan when needed.

2. “Cloud Services” – Consumer and business products, services and solutions delivered and consumed on-demand, using the cloud service providers’ pooled resources, and delivered over a broad network, such as the Internet.

3. “Confidentiality” – the expectation that only authorized individuals, processes, and systems will have access to Rowan’s information.

4. “Confidential Information” – the most sensitive information, which requires the strongest safeguards to reduce the risk of unauthorized access or loss. Unauthorized disclosure or access may 1) subject Rowan to legal risk, 2) adversely affect its reputation, 3) jeopardize its mission, and 4) present liabilities to individuals (for example, HIPAA and HITECH penalties). See the Information Classification policy for additional information.


7. “Information System” – consists of one or more components (e.g., application, database, network, or web) that is hosted in a University campus facility, and which may provide network services, storage services, decision support services, or transaction services to one or more business units.

8. “Integrity” – the expectation that Rowan’s information will be protected from improper, unauthorized, destructive, or accidental changes.

9. “Internal Information” – data that is owned by the University, is not classified Confidential or Private, and is not readily available to the public. For example, this includes employee and student identification numbers and licensed software.

10. “Mobile Computing Device” – including, but not limited to, laptops, netbooks, tablets, smartphones (BlackBerry, iPhone, etc.) and mobile broadband cards (also known as AirCards® and connect cards).

11. “Private Information” – sensitive information that is restricted to authorized personnel and requires safeguards, but which does not require the same level of safeguards as
confidential information. Unauthorized disclosure or access may present legal and reputational risks to the University. See the University’s Information Classification policy for additional clarification.

12. “Privileged Information” – refers to attorney-client communication.

13. “Public Information” – information that is readily available to the public, such as the information published on websites.

14. “Removable Media” – including, but not limited to, CDs, DVDs, copier hard drives, storage tapes, flash devices (e.g., CompactFlash and SD cards, USB flash drives), and portable hard drives.

15. “Social Media” – refers to tools that allow the sharing of information and creation of communities through online networks of people.

16. “Rowan Community” – faculty, staff, non-employees, students, attending physicians, contractors, covered entities, agents, and any other third parties of Rowan.

V. REFERENCES


VI. POLICY

1. Users are given access to Rowan’s electronic information and information systems specifically to assist them in the performance of their jobs and education. They are not provided for personal use. They are responsible for all activity conducted using their computer accounts. Access and use of the University's electronic information and information systems is a revocable privilege. The University expects users will access and use the University's electronic information and information systems in a manner that:
   a. Does not compromise the confidentiality, integrity, or availability of those assets; and
   b. Reflects the University's standards as defined in the Code of Conduct and its body of policies, and in accordance with all applicable federal, state, and local laws governing the use of computers and the Internet.
2. These obligations apply regardless of where access and use originate: Rowan office, classroom, public space, lab, at home, or elsewhere outside the University.
3. The rules stated in this policy also govern the use of information assets provided by the State of New Jersey, other state and federal agencies, and other entities that have contracted with Rowan to provide services to their constituents and/or clients.

4. Schools, units, and departments may produce more restrictive policies. Therefore, users should consult with their department if there are any other restrictions in place that supplement this policy.

5. Expectation of Privacy
   a. Information created, stored, or accessed using Rowan information systems may be accessed and reviewed by Rowan personnel to measure, monitor, and address the use, performance, or health of the University's information systems, or to respond to information security issues. Internet usage may also be monitored when using the University's network, including when using Rowan's remote access services. Additionally, data backups of electronic information stored on Rowan's information systems are made regularly and stored at off-site locations or across different campuses.
   b. This information may be provided to an external party at the University's discretion without prior notification. Therefore, users have no expectation of privacy when accessing, transmitting, receiving, creating, or storing personal information using the University's information systems (particularly, network services). This includes access to the Internet through a University information system (particularly, ROWAN network services), unless such communications are protected by law or privilege.
   c. All electronic information created, stored, or transmitted by use of Rowan's information systems is the property of the University, unless otherwise explicitly noted.

6. Requirements: President/CEOs, Vice Presidents, and Deans must:
   a. Distribute copies of this policy to all members of their organizations.
   b. Ensure that each member of their respective organizations receives periodic training and awareness about acceptable use of Rowan's electronic information and information systems.
   c. Communicate any additional restrictions they have established governing their members use of the University's electronic information and information systems.

7. Prohibited Actions
   a. The list of prohibited actions is not intended to be comprehensive. The evolution of technology precludes the University from anticipating all potential means of capturing and transmitting information. Therefore, users must take care when handling sensitive information. Refer to Rowan's Information Classification policy's appendix for types of information that are considered sensitive and/or contact Rowan's Information Security Office for guidance.
   b. Users, at minimum, will ensure that they do not:
      i. Distribute information classified as Confidential or Private, or otherwise considered or treated as privileged or sensitive information, unless they are an authoritative University source for, and an authorized University distributor of that information and the recipient is authorized to receive that information.
ii. Share their passwords with other individuals or institutions (regardless if they are affiliated with Rowan or not) or otherwise leave them unprotected.

iii. Attempt to uninstall, bypass, or disable security settings or software protecting the University's electronic information, information systems, or computer hardware.

iv. Engage in unauthorized attempts to gain access or use the University's electronic information, information systems, or another user's account.

v. Use third party email services to conduct sensitive University business or to send or receive Rowan information classified as Confidential or Private or otherwise considered privileged or sensitive information.

vi. Use email auto-forwarding to send University information (regardless of classification) to non-Rowan email accounts (see Restricted Services).

vii. Distribute or collect copyrighted material without the expressed and written consent of the copyright owner.

viii. As per the Joint Commission, they do not use texting for communicating health care orders (see Restricted Services, section 6).

c. User understands the HIPAA Privacy Security rules, especially with regard to Sensitive Electronic Information (SEI), Private Health Information (PHI), and Personally Identifiable Information (PII) and will abide by these rules, thereby understanding that they will be held accountable for personal devices. (Refer to HIPAA policies located at www.rowan.edu/compliance)

8. Restricted Service

a. This list of restricted services is not intended to be comprehensive. The evolution of technology precludes the University from anticipating all potential means of storing, capturing and transmitting information. Therefore, when using third party technology services not explicitly restricted in this policy, users must exercise care to not compromise sensitive Rowan information. Refer to Rowan's Information Classification Policy's appendix for types of information that are considered sensitive and/or contact Rowan's Information Security Office for guidance.

b. Restricted services include the following:

   i. Social Media

   ii. Social media tools cannot be used to communicate or store University information classified as Confidential or Private or otherwise considered privileged or sensitive by Rowan. Social media tools include, but are not limited to:

      1. Social networking sites: e.g., Facebook, Google+, Myspace, LinkedIn
      2. Blogs
      3. Micro blogging sites: e.g., Twitter
      4. Wikis
      5. Content-sharing services: e.g., YouTube (video) and Flickr (for photos, videos, etc.).
iii. Online forums
iv. The Rowan name, logo or your Rowan email address cannot be used on social media sites for personal communications or postings. This does not apply to communication issued via the Marketing Department.
v. Using the Rowan name or email address on social media sites to post information in a manner that may be interpreted as representing an official position of Rowan, or which may misrepresent the University’s viewpoint. All postings where the user is identified as a member of Rowan should clearly communicate that "The views and opinions expressed are strictly those of the author. The contents have not been reviewed or approved by Rowan University."

9. Professional Social Media
a. The use of professional social media tools, such as Doximity and Sermo, cannot be used:
   i. To discuss patient cases in a manner that compromises patient identity or privacy, or otherwise represents a violation of HIPAA’s Privacy or Security rules, state or local privacy laws, or University policies.
   ii. To communicate or post information that could potentially reveal information classified as Confidential or Private or otherwise considered privileged or sensitive by Rowan, or which compromises the privacy of a member of the University community or its clients.

10. Cloud Services
a. Cloud Storage Tools The use of third party cloud storage services cannot be used to store University information classified as Confidential or Private or otherwise considered privileged or sensitive by Rowan. Cloud storage tools include, but are not limited to:
   i. iCloud
   ii. Carbonite
   iii. Google Drive
   iv. McAfee Online Backup
   v. OneDrive
b. Data Sharing Tools
   i. The use of data sharing tools cannot be used to share or store University information classified as Confidential or Private or otherwise considered privileged or sensitive by Rowan. Data sharing tools include, but are not limited to:
      1. Box.net
      2. Catch
      3. Dropbox
      4. Evernote
      5. Google Docs
      6. OpenDrive
      7. SugarSync
8. Refer to Rowan University IT Acquisition Policy
   i. Third Party Email Services Third party email services cannot be used to communicate or store University information classified as Confidential or Private or otherwise considered privileged or sensitive.
   ii. Email Auto-Forwarding University information, regardless of classification, cannot be auto-forwarded to non-Rowan email accounts.

11. Alumni and Retired Faculty
   a. Alumni and retired faculty may use email auto-forwarding provided they hold no other position at the University, including as a volunteer.
   b. Texting
      i. Health Care Information As per the Joint Commission, "It is not acceptable for physicians or licensed independent practitioners to text orders for patients to the hospital or other health care setting. This method provides no ability to verify the identity of the person sending the text and there is no way to keep the original message as validation of what is entered into the medical record."
      ii. General Use Users should take care texting other sensitive information, particularly when confirmation of receipt or the identity of the recipient is required for business or legal purposes.
   c. Internet-based Video Conferencing
      i. Faculty and Staff Internet-based video conferencing services, such as Skype, are limited to Rowan business-use only and must be conducted using Rowan equipment. They are to be used strictly for business collaboration between members of the Rowan community or outside entities, or for educational purposes. Users must ensure that video communications are done in a setting that limits or restricts the possibility of non-authorized individuals from viewing or listening to sensitive information.

VII. ATTACHMENTS

   1. Attachment 1, Non-Compliance and Sanctions

By Direction of the CIO:

[Signature]

Mira Lalovic-Hand, VP and Chief Information Officer
ATTACHMENT 1

NON-COMPLIANCE AND SANCTIONS

Violations of this policy may subject the violator to disciplinary actions, up to or including termination of employment or dismissal from a school, and may subject the violator to penalties stipulated in applicable state and federal statutes.

**University Sanctions, Penalties, Fines and Discipline**

Based on the severity of the incident and the level of severity (Low, Medium, High) the following will apply and be typical for each level:

**Low** – retraining and to be reviewed with the employee during annual appraisal. Also, any cost shall be borne by the Department. The Department Chair or VP will determine how these funds will be assigned.

**Medium** – retraining and to be reviewed with the employee during annual appraisal. Discipline will be considered up to and including dismissal from the University. Also, all costs will be borne by the Department. The Department Chair or VP will determine how these funds will be assigned.

**High** – retraining and to be reviewed with employee during annual appraisal. Discipline will be unpaid suspension for a minimum of three (3) days with a consideration of up to and including dismissal from the University. Civil and criminal penalties may apply. Also, all costs will be borne by the Department. The Department Chair or VP will determine how these funds will be assigned. The Deans of each College, Vice Presidents, and University President, with the assistance of the Department of Human Resources, will enforce the sanctions appropriately and consistently to all violators regardless of job titles or level within the University and in accordance with bargaining agreements for represented employees.
GUIDELINES FOR APPROPRIATE INTERNET USAGE

Members of the Rowan community increasingly use personal websites, online blogs, online journals, and online communities (such as Facebook.com and Twitter.com) to communicate and network within and outside of the community. Users should remember that these sites are usually accessible to the public, so keep the following guidelines in mind:

- Be careful about how much and what kind of personally identifiable information you post to these sites. They are potentially accessible to the public. Don’t post anything you would not want the world to know, including personal information that could lead to identity theft, harassment, stalking, or other safety concerns. Also, remember that Facebook and other sites provide privacy settings for posted information – use them to protect whatever private information you decide to post.

- Be aware that your entries may be seen by unintended viewers. Faculty, administrators, potential current and future employers can often access information you place on these sites. Assume that any information you post may at some point be the basis for the impression others have of you.

- Understand that even though these sites are hosted outside Rowan University computing resources, violations of university policy on such sites may be subject to investigation and sanction under the Acceptable Use Policy, Nondiscrimination Policy, Student Code of Conduct, and other college policies.

The University does not tolerate the use of e-mail, cell phones, pagers, text or instant messaging, websites or any other internet resources for the purpose of online harassment and bullying. If you feel that you are the subject of online harassment or threatening behavior, please contact the following:

**Students**
Associate Vice President for Residential Learning and University Housing/Dean of Students Office at 856-256-4266

**Employees**
Associate VP of Employee & Labor Relations Office at 856-256-4139
IX. ROWAN UNIVERSITY WHISTLEBLOWER POLICY

Policy:

I. Scope

This policy provides for the protection of Rowan University employees who are whistleblowers – that is, who report improper or illegal activities engaged in by officials or employees of the University or by others doing business with or for the University.

II. Purpose

The purpose of the Whistleblower Policy is to define whistle blowing activity and to delineate steps that shall be taken by the University to protect employees engaged in such activity.

III. Whistleblower Protection

In accordance with New Jersey’s Conscientious Employee Protection Act (NJ.S.A. 34.19-1 et seq., also known as the “Whistleblower Act”), Rowan University shall take no retaliatory action against an employee because the employee does any of the following:

A. Discloses, or threatens to disclose to a supervisor or to a public body an activity, policy or practice of the employer, or another employer, with whom there is a business relationship, that the employee reasonably believes:

1. is in violation of a law, or a rule or regulation promulgated pursuant to law, including any violation involving deception of, or misrepresentation to, any shareholder, investor, client, patient, customer, employee, former employee, retiree or pensioner of the employer or any governmental entity, or, in the case of an employee who is a licensed or certified health care professional, reasonably believes constitutes improper quality of patient care; or

2. is fraudulent or criminal, including any activity, policy or practice of deception or misrepresentation which the employee reasonably believes may defraud any shareholder, investor, client, patient, customer, employee, former employee, retiree or pensioner of the employer or any governmental entity;

B. Provides information to, or testifies before, any public body conducting an investigation, hearing or inquiry into any violation of law, or a rule or regulation promulgated pursuant to law by the employer, or another employer, with whom there is a business relationship, including any violation involving deception of, or misrepresentation to, any shareholder, investor, client, patient, customer, employee, former employee, retiree or pensioner of the employer or any governmental entity, or, in the case of an employee who is a licensed or certified health care professional, provides information to, or testifies before, any public body conducting an investigation, hearing or inquiry into the quality of patient care; or
C. Objects to, or refuses to participate in any activity, policy or practice which the employee reasonably believes:

1. is in violation of a law, or a rule or regulation promulgated pursuant to law, including any violation involving deception of, or misrepresentation to, any shareholder, investor, client, patient, customer, employee, former employee, retiree or pensioner of the employer or any governmental entity, or, if the employee is a licensed or certified health care professional, constitutes improper quality of patient care;

2. is fraudulent or criminal, including any activity, policy or practice of deception or misrepresentation which the employee reasonably believes may defraud any shareholder, investor, client, patient, customer, employee, former employee, retiree or pensioner of the employer or any governmental entity; or

3. is incompatible with a clear mandate of public policy concerning the public health, safety or welfare or protection of the environment.

IV. Written Notice Required Under Certain Circumstances

The protection against retaliatory action shall not apply to an employee who makes a disclosure to the University’s Board of Trustees or any other public body unless the employee has first brought the matter to the attention of a supervisor of the employee or a designated University official or agent by written notice and has afforded the University a reasonable opportunity to correct the matter. In an emergency situation, this requirement of written notice to a supervisor or designated University official or agent shall be waived when the employee is reasonably certain that the matter is known to one or more supervisors at the University or when the employee reasonably fears physical harm as a result of the disclosure.

V. Distribution and Posting of Notices

Rowan shall conspicuously display notices of its employees’ protections, obligations, rights and procedures under this act, shall annually distribute written or electronic notices to all employees, and shall use other appropriate means to keep its employees informed of protection afforded under New Jersey to whistleblowers. Each notice posted or distributed pursuant to this section shall be in English and Spanish. The notice shall include the name of the person or persons the University has designated to receive written notifications pursuant to section IV of this policy.

Discussion:

The Rowan Whistleblower Policy is partner to the Rowan University Code of Ethics. If you observe, or otherwise have knowledge of unethical behavior, or what you perceive to be illegal behavior of the part of another Rowan employee, the Whistleblower policy offers you protection so that you may report the prohibited behavior.

Authority: The New Jersey Conscientious Employee Protection Act (NJ.S.A. 34.19-1 et seq.)
Notices:

Exhibit A – Annual Notice

Conscientious Employee Protection Act “Whistleblower Act”

Employer retaliatory action; protected employee actions; employee responsibilities

1. New Jersey law prohibits an employer from taking any retaliatory action against an employee because the employee does any of the following:
   a. Discloses, or threatens to disclose, to a supervisor or to a public body an activity, policy or practice of the employer or another employer, with whom there is a business relationship, that the employee reasonably believes is in violation of a law, or a rule or regulation issued under the law, or, in the case of an employee who is a licensed or certified health care professional, reasonably believes constitutes improper quality of patient care;
   b. Provides information to, or testifies before, any public body conducting an investigation, hearing or inquiry into any violation of law, or a rule or regulation issued under the law by the employer or another employer, with whom there is a business relationship, or, in the case of an employee who is a licensed or certified health care professional, provides information to, or testifies before, any public body conducting an investigation, hearing or inquiry into quality of patient care; or
   c. Provides information involving deception of, or misrepresentation to, any shareholder, investor, client, patient, customer, employee, former employee, retiree or pensioner of the employer or any governmental entity.
   d. Provides information regarding any perceived criminal or fraudulent activity, policy or practice of deception or misrepresentation which the employee reasonably believes may defraud any shareholder, investor, client, patient, customer, employee, former employee, retiree or pensioner of the employer or any governmental entity.
   e. Objects to, or refuses to participate in, any activity, policy or practice which the employee reasonably believes:
      (1) is in violation of a law, or a rule or regulation issued under the law or, if the employee is a licensed or certified health care professional, constitutes improper quality of patient care;
      (2) is fraudulent or criminal; or
      (3) is incompatible with a clear mandate of public policy concerning the public health, safety or welfare or protection of the environment. NJ.S.A. 34:19-3.

2. The protection against retaliation, when a disclosure is made to a public body, does not apply unless the employee has brought the activity, policy or practice to the attention of a supervisor of the employee by written notice and given the employer a reasonable opportunity to correct the activity, policy or practice. However, disclosure is not required where the employee reasonably believes that the activity, policy or practice is known to one or more supervisors of the employer or where the employee fears physical harm as a result of the disclosure, provided that the situation is emergency in nature.

CONTACT INFORMATION

The following contact persons at Rowan University have been designated to answer your
questions or provide information regarding your rights and responsibilities under the
Whistleblower Act (N.J.S.A. 34:19-4):
* Name: Robert Zazzali
  Address: Bole Hall, Glassboro Campus
  Phone: (856) 256-4110
* Name: Raymond Braeunig
  Address: UEC Bldg, Stratford
  Phone: (856) 566-6136

This notice must be conspicuously displayed. Once each year, employers must distribute notice of this law to their employees.

If you need this document in a language other than English or Spanish, please call (609) 292-7832.

AD-270 (3/06)
Exhibit B – Annual Notice (Espanola)

“Ley de protección del demmciante” - La Ley de protección al empleado consciente

Acciones de represaría del empleador; protección de las acciones del empleado

1. La ley de New Jersey prohíbe que los empleadores tomen medidas de represaría contra todo empleado que haga lo siguiente:
   a. Divulgue o amenace con divulgar, ya sea a un supervisor o a una agencia pública toda actividad, directriz o norma del empleador o de cualquier otro empleador con el que exista una relación de negocios y que el empleado tiene motivos fundados para pensar que violan alguna ley, o en el caso de un trabajador licenciado o certificado de la salud y que tiene motivos fundados para pensar que se trata de una manera inadecuada de atención al paciente;
   b. Facilite información o preste testimonio ante cualquier agencia pública que conduzca una investigación, audiencia o indagación sobre la violación de alguna ley, regla o reglamento que el empleador o algún otro empleador con el que exista una relación de negocios; o en el caso de un trabajador licenciado o certificado de la salud que facilite información o preste testimonio ante cualquier agencia pública que conduzca una investigación, audiencia o indagación sobre la calidad de la atención al paciente; o
   c. Ofrece información concerniente al engaño o la tergiversación con accionistas, inversionistas, usuarios, pacientes, clientes, empleados, ex empleados, retirados o pensionados del empleador o de cualquier agencia gubernamental.
   d. Ofrece información sobre toda actividad que se pueda percibir como delictiva o fraudulenta, toda directriz o práctica engañosa o de tergiversación que el empleado tenga motivos fundados para pensar que pudieran estafar a accionistas, inversionistas, usuarios, pacientes, clientes, empleados, ex empleados, retirados o pensionados del empleador o de cualquier agencia gubernamental.
   e. Se opone o se niega a participar en alguna actividad, directriz o práctica que el empleado tiene motivos fundados para pensar que:
      (1) viola alguna ley, o regla o reglamento que dicta la ley o en el caso de un Empleado licenciado o certificado de la salud que tiene motivos fundados para pensar que se trata de la atención inadecuada al paciente;
      (2) es fraudulenta o delictiva; o
      (3) es incompatible con algún mandato establecido por las directrices publicas relacionadas con la salud pública, la seguridad o el bienestar o la protección del medio ambiente. Artículo 34:19-3 de las Leyes comentadas de New Jersey de protección del empleado consciente (N.J.S.A., por sus siglas en inglés)

2. No se puede acoger a la protección contra la represaría, cuando se hace una divulgación a un organismo público, a no ser que el empleado le informe al empleador de tal actividad, política o norma a trabes de un aviso por escrito y le haya
Dado al empleador una oportunidad razonable para corregir tal actividad, política o norma. Sin embargo, no es necesaria la divulgación en los casos en que el empleado tenga indicios razonables para creer que un supervisor o más de un supervisor del empleador tienen conocimiento de tal actividad, política o norma o en los casos en los que el empleado teme que tal divulgación pueda traer como consecuencia daños físicos a su persona siempre y cuando la naturaleza de la situación sea la de una situación de emergencia.

Información del Contacto
La persona siguiente para ha sido designada a contestar sus preguntas o, proporcionar información adicional relacionada con sus derechos y responsabilidades según lo indica esta ley (N.J.S.A. 34:19-4):

* Nombre: Robert Zazzali
  Dirección: Bole Hall
  Numero de teléfono: (856) 256-4110
* Nombre: Raymond Braeunig
  Dirección: UEC Bldg, Stratford
  Numero de teléfono: (856) 566-6136

Este aviso se debe exponer a la vista de todos. Una vez por año, los empleadores deben de distribuir un aviso de esta ley A sus empleados. Si necesita este documento en algún otro idioma que No sea ingles o español, sírvase llamar al (609) 292-7832. Posiblemente, una carga nominal puede ser cobrada.
X. ROWAN UNIVERSITY WORKPLACE VIOLENCE POLICY

In compliance with New Jersey Executive Order #49, Rowan University is committed to ensuring the safety and security of the University’s Workplace.

Violence against employees can take many forms including harassment or bullying, intimidation, threats, threatening behavior (with or without the use of technology) and physical acts of violence. Threats and/or threatening behavior, or acts of violence by University employees against themselves, other staff members, faculty, students, visitors or other individuals while on University property or using University facilities will not be tolerated and are causes for removal from the workplace and may result in discipline including possible termination of employment. Threatening behavior includes, but is not limited to verbal or non-verbal threats or intimidation, hitting, shoving, stalking, attacks, sexual assault, vandalism, arson and carrying any type of weapon or explosives.

Each University employee has a responsibility to report any threatening or violent behavior when a member of the University community or visitors to the campus exhibits such behavior. Any incidents of physical acts or threats of violence should be immediately reported to the Public Safety Department. Any immediate concerns for safety should also be addressed to Public Safety.

Any employee who believes he or she has witnessed or has been subject to harassment, intimidation, threats or threatening behavior should report it to the Office of Equity and Diversity and/or the Office of Human Resources and the claim will be investigated. No employee bringing a complaint, providing information for an investigation, or testifying in any proceeding under this policy shall be subjected to adverse employment consequences based upon such involvement or be the subject of other retaliation.

Harassment, bullying and intimidation under this policy refers to the conduct of any university employee in the workplace that a reasonable person would find hostile, offensive and detrimental to the university’s legitimate business interest or educational mission. This behavior includes but is not limited to infliction of verbal abuse such as the use of fighting words, insults and obscenities; violent physical conduct; use of information and communication technologies, such as e-mail, cell phones, pagers, text or instant messaging and websites that a reasonable person would find threatening, intimidating, or an invasion of privacy; or the sabotage or unwarranted disruption of a person’s work performance.

Any claim of harassment of a member of a protected class, brought by any person, will be investigated under the NJ Policy Prohibiting Discrimination in the Workplace and dealt with separately under the NJ Policy Prohibiting Discrimination in the Workplace.

An employee who is found in violation of this policy may be subject to disciplinary action up to and including termination of employment. In appropriate cases, employees may be required to attend appropriate training, EAS (Employee Advisory Service) and other appropriate action as a condition of continued employment. Major discipline may be imposed for workplace incidents which are repeated and pervasive, or for a single incident which is severe and egregious. The university is committed to fully investigate and address any complaints and violations to this policy.

Final revision and approval from Deputy Attorney General’s Office 5-19-2011
XI. PROCEDURE FOR REPORTING HATE/OFFENSIVE GRAFFITI

Anyone who discovers any hate or offensive graffiti should *immediately* contact Public Safety (ext. 4922). Facilities (x4650) will report any hate or offensive graffiti directly to Public Safety *immediately* upon discovering same.

*Immediately* upon discovery of such graffiti, Housekeeping, Maintenance, Custodial or Plant Operations personnel will advise the Supervisor Facilities Operations or the Director Facilities Operations who will inform Public Safety.

Housekeeping, Maintenance, Custodial and Plant Operations personnel will be trained to identify such graffiti. However, neither, Housekeeping, Maintenance, Custodial, nor Plant Operations personnel will remove the graffiti until Public Safety has had an opportunity to conduct whatever investigation is appropriate and directs its removal. If the graffiti is scratched into a surface, a work order will be produced to paint over the graffiti to remove it from sight.

Public Safety will investigate each report in a timely manner.
XII. ETHICS AND COMPLIANCE AT ROWAN SOM

Overview of the Compliance Program

Rowan SOM has a strong and abiding commitment to ensure that its mission; education, research, and healthcare service are conducted in accordance with applicable laws. Each faculty and employee of Rowan SOM is expected to adhere to this standard whenever he or she acts on behalf of Rowan SOM. To that end, the University has established the Office of Compliance who governs the Corporate Compliance Program for the University. The University compliance efforts are designed to establish a culture that promotes prevention, detection, and resolution of instances of conduct that do not conform with the federal, state law and federal, state and private payers health care program requirements, and federal, state and private grant program requirements as well as Rowan SOM’s policy and procedures. The adoption of the compliance plan and implementation of the Corporate Compliance Program significantly advances the prevention of fraud, wasted, and abuse while advancing the fundamental missions of Rowan SOM to provide education, research and patient care. The compliance plan and program is applicable to all Rowan SOM’s workforce. Workforce is defined to include all Rowan SOM students, employees, physicians, staff and volunteers.

This compliance overview is to familiarize you with the basic rules of conduct that we all should follow. If at any time during your employment you have any questions about laws, regulations, questionable behavior or policies at Rowan SOM, feel free to contact your direct supervisor, unit compliance officers or my office for clarification. We are here and ready to assist you at any time.

On behalf of the Office of Compliance, Welcome to Rowan SOM!

For a listing of local school/unit compliance officers and other resources, visit our webpage:
http://www.rowan.edu/compliance
What is RowanSOM’s Compliance Program?
A program designed to promote institutional and individual compliance with applicable laws, regulations, and University policies.

Controls that are established to prevent, detect, and resolve illegal, unethical or other actions that are not in compliance with University policy.

What is the purpose of the compliance program?
The purpose of the compliance program is to help prevent, detect and correct:
  - Fraud
  - Abuse
  - Other unethical or illegal practices/conduct

- Reduces the risk of civil and criminal wrongdoing
- May significantly reduce financial penalties should violations occur
- Reduces risk of exclusion from the Medicare and Medicaid programs
- Provides management assurances that appropriate individuals are addressing operational activities that may lead to compliance risks
- Industry standard
  - Evolution of compliance program development in health care
  - Federal Sentencing Guidelines and OIG guidance

The Elements of an Effective Program
Develop written standards of conduct, and policies and procedures to promote the University’s commitment to compliance

- Designate a Chief Compliance Officer/appoint a compliance committee
- Implement an effective training program
- Establish a confidential Reporting/disclosure program
- Develop a system to respond to allegations of illegal or improper activities
- Auditing and monitoring
- Restrict employment or contract with ineligible persons/entities
The Benefits of Compliance Program

- Imperative to prevent, detect, and correct potential violations of law, regulations, and policies of RowanSOM
  - Enables RowanSOM to promote its strong reputation in the community as the premier provider of health care services
- Support the integrity of the University’s mission: Patient Care, Education, and Research
  - Institutional reputation
  - Ability to preserve resources to further mission
- Promotes a positive and constructive work environment

Who Implements the RowanSOM Compliance Program?

- The Office of Compliance
  - Chief Compliance Officer
  - Compliance and Ethics Investigators
- Ethics & Compliance Oversight Committee
  - Board of Trustee
  - Senior Management
  - Compliance Committees

- Individual Employees at RowanSOM
  - Most important resource

Our Compliance Code of Conduct

- RowanSOM and its employees shall abide by the letter and spirit of all applicable laws and regulations and shall act in such a manner that their activities shall reflect favorably upon Rowan SOM.
- RowanSOM and its employees shall adhere to the highest ethical standards of conduct in all professional and business activities and shall act in a manner that enhances Rowan SOM standing as a vigorous and ethical contributor within the health care professions and community.
- RowanSOM and its employees shall deal fairly and honestly with those who are affected by our actions and shall treat them as we would expect them to treat us if the situation were reversed.
- RowanSOM shall undertake only those activities that shall withstand public scrutiny and shall not pursue any course of action that involves a violation of the law or these principles.
- Rowan SOM shall promote relationships based on mutual trust and respect and shall provide an environment in which individuals may question a practice without fear of adverse consequences.
- Each of us shall abide by RowanSOM Conflict of Interest policy stated in the Code, disclose any potential conflict of interest and remove the conflict as required.
• Every employee is expected to comply with RowanSOM and government requirements regarding record keeping. All records and reports are to be prepared accurately and retained in accordance with applicable requirements.

**Reporting Potential Compliance Matters—Are there negative consequences?**

- None. No employee will be disciplined because he or she made a report in good faith.
- Where possible, we will protect the anonymity of the employee making the report.

**Are There ‘Special’ Sanctions Involved?**

- If an employee is found to be in violation of the RowanSOM Compliance Program, any laws or regulations, etc., that employee may be subject to the already established RowanSOM administrative disciplinary policy.

**When Should I Report?**

- Is the activity in violation of Federal and State regulations, RowanSOM policies, procedures or the Code of Conduct?
- How would the activity look to our clients, family, friends and the public if it were to appear on the front page of the newspaper?

**To Whom Do I Report?**

- If possible, first report concerns to a Supervisor or Manager.
- Reports can be issued through the Ethics Helpline
- Reports can be made directly or in writing to the Compliance Office, at the following numbers:
  
  Patrick Guilfoyle: 856-566-6490  
  Debbie Samuels: 856-566-6120  
  Jeannette Jones: 856-566-6492  
  Ray Braunig: 856-566-6136

**Your Role and Responsibilities**

• Take an active role in understanding the regulations and laws that impact your day-to-day activity and, when confused or unsure, ask your managers and supervisors questions.

• Adhere to the spirit and letter of the RowanSOM Code of Conduct and the State Ethics Codes and Guidelines.

• Strive to detect and prevent errors before submitting claims.

• Report any real or perceived activities which may be contrary to the compliance program or the law.

• Participate in all training sessions and be proactive in learning the rules and regulations that affect your department.

• Actively identify new or augmented training needs.
• Assist in the development and communication of new policies, procedures, protocols, etc.
• Assist in the development, implementation and maintenance of department-specific compliance plans.

Compliance New Hire Checklist

I realize that within the next thirty days, I must:

• review the Overview of the Compliance Program,
• sign the Ethics & Compliance Attestations (State of NJ Outside Activity Questionnaire and The Uniform Ethics Code, Plain Language Ethics Guide and Impact Statement Receipt) and return it to Human Resources for inclusion in my employee personnel file,
• sign the RowanSOM Confidentiality Agreement and return it to Human Resources for inclusion in my employee personnel file,
• complete the updated Corporate Compliance Education online course,
• complete the HIPAA education program, either classroom or web-based, that addresses both privacy and security, and
• participate in any other required training programs.
XIII. EMPLOYMENT WITH ROWANSOM

EMPLOYMENT CATEGORIES

RowanSOM classifies its staff members as follows:

REGULAR STAFF MEMBER

Regular Full-time Status: Hired to regularly work thirty-five (35), thirty-seven and one-half (37.5) or forty (40) hours each week. Exempt staff are expected to work a minimum of 37.5 hours each week. Staff members in this classification are benefits eligible.

Regular Part-time Status: Hired to regularly work twenty (20) or more hours each week, but less than the full-time equivalent for the position.
- If hired/enrolled on or before May 21, 2010 to regularly work twenty (20) or more hours each week, such staff members are health benefits eligible, provided there is no break in service and hours are not reduced below the minimum of 20 hours each week. Pension enrollment is subject to plan provisions.
- If hired/enrolled after May 21, 2010, to regularly work twenty (20) or more hours each week, but less than 35 hours each week, such staff members are not eligible for health benefits and eligibility for enrollment in a pension plan is subject to plan provisions.

REGULAR PART-TIME LESS THAN 20 HOURS

Staff hired to work less than twenty (20) hours per week on a routine basis. Staff members in this classification are not eligible for benefits.

TEMPORARY STAFF MEMBER

Temporary Full-time Status: Hired to fill a position for a relatively short period of time, not to exceed twelve (12) months, and regularly work thirty-five (35), thirty-seven and one-half (37.5) or forty (40) hours each week. Exempt staff are expected to work a minimum of 37.5 hours each week.

Temporary Part-time Status: Hired to fill a position for a relatively short period of time, not to exceed twelve (12) months, and regularly work:
- 20 hours or more per week, but less than a full-time equivalent; or
- Less than 20 hours per week

Staff members in this classification who work 30 hours or more are eligible for benefits. A temporary staff member who later assumes regular status shall not be credited with service for employment during the temporary period and assumes the hire date on which regular status is effective.
NOTE: If temporary positions exceed twelve (12) months, benefits requirements may change.

PER DIEM STAFF MEMBER

Per Diem Status: Per diem staff members are hired to work a limited number of hours each month on an “as needed” basis. Staff members in this classification generally work a maximum of two (2) days per week and are not eligible for holidays, benefit time accruals or health benefits. If a per diem staff member regularly works more than the authorized days per week, per diem status may not apply. In that event, the departmental supervisor is responsible for
contacting the assigned Human Resources Generalist to initiate a change in the employment status of such staff.

**STUDENT EMPLOYMENT**
A RowanSOM student who is hired to work in the Work-Study Program through the University's Office of Student Financial Aid or other University affiliated programs. External students may also be hired by departments to work as student assistants.

**ORIENTATION**
As a new staff member you may have questions about the University. RowanSOM’s Department of Human Resources conducts weekly orientations for all newly hired staff members. At orientation you will learn about the RowanSOM organization; your health benefits, pension and life insurance benefits and other information necessary to acquaint you with RowanSOM.

**EMPLOYMENT OF RELATIVES**
Your relatives are eligible to work at RowanSOM, provided that such employment does not interfere with the productivity of your unit, and would not entail you directly or indirectly having influence over the employment status, job security or salary of the other.

**LICENSURE AND CERTIFICATION**
Many positions at the University require staff members to be licensed, registered or certified as a condition of initial or continued employment. If this applies to your position, you are responsible to keep your license, registration or certificate current and to provide copies for your department’s records. If your license expires or becomes invalid you must immediately notify your supervisor. The University cannot allow you to work without a valid license or certificate.

**PROBATION**
All staff members who work in titles covered by a collective bargaining agreement must satisfactorily complete a probationary period. The length of the period for new hires is one hundred and eighty (180) calendar days and may be extended in accordance with the applicable collective bargaining agreement. All staff are evaluated on their job performance, attendance and conduct during this period.

Staff members promoted or bumped into a new position during a layoff may be subject to a probationary period, which varies according to the collective bargaining unit. Therefore, if you fall into this category, you should ask your immediate supervisor or contact the Campus Human Resources office to ascertain the exact length of your probationary period.
AT WILL

All staff members at RowanSOM not covered by a current union contract are considered employees “at will.” This phrase refers to the fact that the University retains the right to terminate employment of “at will” staff members any time, with or without cause or notice. No written or oral statement issued by the University or by any employee or agent of the University can affect your status as an “at will” staff member.

LAYOFFS

In certain circumstances it may be necessary for the University to lay off employees for economic or programmatic reasons.

REHIRING FORMER STAFF MEMBERS

Individuals who separate from the University will be considered new hires for all aspects of re-employment, except for those with layoff rights who are recalled within one (1) year of layoff.

WORK HOURS AND SCHEDULING

Regular full-time staff members are scheduled to work on the basis of a thirty-five (35), thirty-seven and one-half (37.5) or forty (40) hour work week. Your job classification and the business needs of your department will determine your hours of work within each week. Work schedules are designed to provide the best possible coverage for all units of the University.

TIMEKEEPING

All staff members are required to complete a time sheet for each bi-weekly pay cycle. If you are an exempt staff member (not eligible for overtime pay), you use your time sheet to record the use of vacation, holiday and sick leave or other time not worked. If you are a non-exempt staff member, your time sheet is used to record the actual hours you worked.

MEAL PERIODS AND BREAKS

The length of meal periods and breaks varies by department and according to the collective bargaining agreement covering your title. Meal periods are generally unpaid. In addition, pursuant to the Fair labor Standards Act (FLSA), a reasonable break time must be allowed for an employee to express breast milk for her nursing child --these breaks shall be allowed for a period of up to one (1) year after a child’s birth. Consult with your supervisor or your Campus Human Resource Office to ascertain the length of these periods.

OVERTIME PAY

Non-exempt full-time staff members normally work thirty-five (35), thirty seven and a half (37.5) or forty (40) hours per week, exclusive of meal periods, based on their job classification. In order to maintain services, it may be necessary for a staff member to work overtime. This overtime should be authorized by a member of the University’s supervisory or managerial staff. Generally, volunteers for overtime work will be solicited. If there remains a need for overtime work, overtime can be directed on a mandatory basis. If you are a staff member who is eligible for overtime, you will be paid at straight time for all hours beyond your normal work week up to forty (40) hours and at a rate of time and one half (1 ½)
for hours beyond forty (40) hours or granted compensatory time off at the same rate, at the University’s option.

**Sick time and unpaid hours do not count towards overtime. Vacation time and float holidays do count towards overtime.**

Exempt staff members are not eligible for overtime pay and are expected to work the hours that are necessary to complete work assignments and may receive compensatory time in accordance with University policy.

**SHIFT DIFFERENTIAL**

A shift differential is paid to eligible staff members for working the evening and night shifts. **This payment varies by collective bargaining unit and by title.** You can find out the exact amount of the hourly differential(s) for your title by contacting your Human Resource Office.

**DAYLIGHT SAVINGS TIME**

If a non-exempt staff member actually works one (1) hour greater than his/her scheduled hours of work as a result of an adjustment in daylight savings time, he/she shall receive one (1) hour(s) pay at either straight time or at time and one-half (1-1/2) depending on the hours worked that week. If a non-exempt staff member works one (1) hour less than his/her scheduled hours of work as a result of an adjustment in daylight savings time, he/she will be compensated for the time actually worked.

**PAID TIME OFF BENEFITS**

**HOLIDAYS**

- New Year’s Day
- Martin Luther King Day
- Good Friday (non-premium)
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Day After Thanksgiving (non-premium)
- Christmas Day

Regular full-time and regular part-time staff members (as well as full-time temporary staff members who have completed six months of continuous service) are eligible for paid holidays. The University recognizes **nine (9) designated holidays and six (6) non-designated days called “float holidays”.** Regular part-time staff members receive paid holidays on a pro-rated basis according to the number of hours he/she is hired to work.

On January 1st of each year, **six (6) float holidays are granted to staff members on active payroll status as of that date. Float holidays may be used at any time during the calendar year after obtaining, at least one week in advance, prior approval from your supervisor. Float holidays must be used by December 31st or they are automatically forfeited.**

In July of each year, **three (3) float holidays will be credited to all individuals hired after January 1, but on or before July 1. Individuals who were on leave as of January 1, but returned to duty during the first half of the year are also entitled to three (3) float holidays. These float holidays must be used by the end of the calendar year (December 31) or will be forfeited.**
Float holidays must be scheduled at least one week in advance except in the case of an emergency. Float holidays (personal days) may be used for emergencies, observances of religious or other days of celebration, or other personal business. In the case of an emergency, your supervisor may require you to supply verification of the emergency to be presented upon your return to work.

Excessive unscheduled absences, including use of float holiday or vacation under certain circumstances may be subject to the Attendance Control policy.

If you work in a department requiring seven-day coverage, you may be required to work on a holiday. Non-exempt staff members working on a holiday are given premium pay (for all Holidays except Good Friday and the Day after Thanksgiving) of time and one-half for all hours worked on the holiday. Exempt staff members working on Good Friday and the Day after Thanksgiving are paid at straight time for all hours worked. In addition, for all holidays, non-exempt staff will be given an additional day off or paid an additional day’s pay at the University’s option. Exempt staff members required to work on a holiday may be granted another day off.

When a designated holiday falls on either Saturday or Sunday, the following policy guidelines apply:

(1) In departments requiring seven-day coverage, the holiday is observed the actual day it falls on and premium pay is applicable that day.

(2) In departments open Monday through Friday only, holidays falling on a Sunday are observed on the following Monday and holidays falling on a Saturday are observed the preceding Friday.

If you wish to observe a religious holiday other than those previously mentioned, you must obtain prior approval and charge your absence to a float holiday or a vacation day.

Absences immediately before or after a holiday, or absences on a holiday the staff member is scheduled to work, may result in forfeiture of the holiday and appropriate discipline issued. In the case of nurses, this applies to absences two days before and two days after a holiday.

For all staff, a day of accrual equals the full time work week for your classification divided by five (5).

VACATION

Regular full-time and regular part-time staff members (as well as full-time temporary staff members who have completed ninety (90) days of continuous service) are eligible for vacation benefits. Although you have accrued and may be eligible for benefits, any scheduled time off (including vacation) must be approved by your immediate supervisor. Regular part-time staff members accrue vacation on a pro-rated basis according to the number of hours he/she is hired to work. Full-time staff members accrue vacation benefits in accordance with the following schedules:
### Employee Service Accrual Rate

<table>
<thead>
<tr>
<th>Employee Service</th>
<th>Accrual Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>From date of employment to completion of 10 years</td>
<td>1 1/4 days/month (15 days annually)</td>
</tr>
<tr>
<td>From start of 11th year to completion of 20 years</td>
<td>1 2/3 days/month (20 days annually)</td>
</tr>
<tr>
<td>From start of 21st year of more</td>
<td>2 1/2 days/month (25 days annually)</td>
</tr>
<tr>
<td>The above schedule also applies to V Scale Directors</td>
<td></td>
</tr>
</tbody>
</table>

**Nursing Title - Staff Nurse and above:**

<table>
<thead>
<tr>
<th>Employee Service</th>
<th>Accrual Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>From date of employment to completion of 3 years</td>
<td>1 1/4 days/month (15 days annually)</td>
</tr>
<tr>
<td>From start of 4th year to completion of 18 years</td>
<td>1 2/3 day/month (20 days annually)</td>
</tr>
<tr>
<td>From the start of the 19th year</td>
<td>2 1/2 days/month (25 days annually)</td>
</tr>
</tbody>
</table>

**Executive Directors and Administrators on the E&M Scales:**

<table>
<thead>
<tr>
<th>Employee Service</th>
<th>Accrual Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>From date of employment in the Executive and Director Levels to completion of 20 years</td>
<td>1 2/3 days/month (20 days annually)</td>
</tr>
<tr>
<td>From start of 21st year or more</td>
<td>2 1/2 days/month (25 days annually)</td>
</tr>
</tbody>
</table>

Staff members are credited with accrued vacation benefits upon completion of ninety (90) days of employment. You receive vacation credit for the month you are hired prior to the 16th of the month. If you are hired on the 16th of the month or after, you will accrue vacation from the 1st of the following month.

You may carry over vacation time earned in one calendar year into the next calendar year. The maximum carryover as of any December 31st is equal to 1 year of vacation entitlement. Any vacation balances in excess of the maximum carryover allowance will be forfeited, unless there is an exception granted by the Department of Human Resources. Each department is responsible for scheduling vacation for its staff members for the year. Responses to requests for vacation usage will be based on the operational requirements of the department, the preference of co-workers and may be based on University seniority.

If you are separating from employment at the University, you will be paid for any unused vacation time less any sick time debits or monies owed to the University. You will not be paid for unused vacation time if you fail your new hire probation. Vacation balances will be paid at the current base rate of pay.

For all staff, a day of accrual equals the full time work week for your classification divided by five (5).

### SICK LEAVE

Regular full-time and regular part-time staff members (as well as full-time temporary staff members who
have completed six months of continuous service) are eligible for sick leave benefits. If you are a regular part-time staff member, you accrue sick leave on a pro-rated basis according to the number of hours you are hired to work. Staff accrue one sick day per month.

You receive sick leave credited for the month in which you are hired provided your employment date was prior to the 16th of the month. If you were hired on the 16th of the month or after, you will accrue sick leave credited from the 1st of the following month. **Credit is given for any month in which you work up to the 16th of the month.**

Sick leave is available for usage upon accrual. Sick leave may be accumulated from year to year without limit. However, upon retirement, you will be paid for ½ of your unused sick leave credit at your then current base rate of pay up to the then prevailing legislative limit. Upon termination or resignation other than retirement, sick leave is forfeited.

Staff are not entitled to use sick leave just because it has been accrued. The use is for legitimate illness, which renders the staff member unable to work and in limited cases, for serious family illness. Sick leave can be scheduled in advance for use for non-routine documented medical or dental appointment (i.e. stress tests, mammogram, not annual physicals or dental checkups or cleanings). Sick leave must be used judiciously. Excessive unscheduled absence may be subject to the University Attendance Control policy.

For all staff, a day of accrual equals the full time work week for your classification divided by five (5).

**BENEFITS ASSISTANCE PROGRAM (BAP)**

The University’s Benefits Assistance Program (BAP) consisting of an after-tax annuity option plan and life insurance plan is for affected individuals who were hired July 1, 1996 or later and whose earnings exceed the federally established maximum pensionable amount, which changes from time to time.

This program’s purpose is to supplement, within the program’s eligibility requirements, the existing Alternate Benefit Program (ABP) benefits in excess of the limit. Affected eligible individuals are required to enroll in these plans to participate. There is no cost.

**COBRA**

Under the provisions of the Consolidated Omnibus Reconciliation Act (COBRA), the University offers staff members and their eligible dependents the ability to purchase continuation of health plan coverage under the following circumstances:

- Upon the member’s death, eligible dependents may purchase up to 36 months of health coverage.
- Upon termination (except for gross misconduct), the member may purchase his/her current health plans up to 18 months.
- Upon divorce, the member’s spouse is entitled to health coverage for up to 36 months.
- Upon the member’s child attaining age 23, the child may purchase health coverage up to 36 months.

**LEAVES OF ABSENCE**

The University recognizes that it may be necessary for you to be absent from work for an extended period of time depending on the factors outlined below. The University reserves the right to approve or disapprove requests for leaves of absence and replace positions on a case-by-case basis according to operational requirements, except as may be restricted by Federal and/or State Law or Statute or collective
bargaining agreement.

A Leave of Absence is defined as an absence from work for a specific period for an illness or injury (serious health condition) with the approval of the Department of Human Resources, and in consultation with the employee’s department. Leaves are taken with the understanding that the employee will return to work at the conclusion of the leave.

**Medical/FMLA leave of absence for self:**
For employees taking medical/FMLA leave for self, the maximum leave allowed will be six (6) months, unless the employee has paid time accruals exceeding six (6) months, then the maximum leave time shall be up to twelve (12) months. All Paid sick time accruals must be utilized first, then float holidays and vacation accruals must be used. For employees applying for New Jersey Temporary Disability – only accrued sick time must be used first and exhausted. The statutory 12 week FMLA shall run concurrent with the first 12 weeks of such leave.

Staff members hired prior to January 1, 1983, with accrued sick time exceeding twelve (12) months will be entitled to use all such time.

**FMLA leave of absence for family member:**
For employees taking FMLA leave to care for a family member for a serious illness, the maximum leave allowed is twelve (12) weeks. Paid leave time must include a maximum of (10) days of accrued sick time (utilized first) and then float holidays and vacation accruals. However, in circumstances where the family member has a catastrophic illness (defined as an illness, injury, impairment, or physical or mental condition that a licensed physician or certified practitioner certifies as life threatening or terminal), ten (10) sick days must be taken, and then float holidays and vacation accruals. If additional time is required, additional sick days may then be used for the remainder of the twelve (12) week maximum allowed under the terms of this policy.

**Note:**
According to the Staff Leave Donation Program, Policy 30-01-40-40:20, for employees who receive donated time, such time shall not cause the employee to exceed the maximum leave time allowed by this policy. In addition, all accrued sick, vacation, float days, and compensatory time must be exhausted. Maximum donations shall not exceed twelve (12) months. All donated time is to be used for self or family care medical leave only.

Intermittent or reduced schedule leaves are allowed for medical/FMLA for self and family members only and are not allowed for birth or adoption. The maximum time allowed for intermittent or reduced schedule leaves is 12-weeks within a 12-month period.

**FMLA leave of absence for birth or adoption:**
An approved leave from employment to enable an employee to provide necessary care due to the birth or adoption of a child by the employee and/or spouse.

The maximum leave allowed for birth or adoption is twelve (12) weeks. Accrued vacation and float holidays must be used; any additional leave required may be unpaid. In either event, leave shall not exceed the allowed twelve (12) weeks within a 12-month period.
If the University employs both spouses, the combined leave period allowed shall not exceed twelve (12) weeks.

Note:

If an employee is applying for medical leave due to pregnancy disability, or for any other reason, the medical leave will be in effect only for the period where there is an inability to work. After a birth, once the employee is medically able to work but requires childcare leave, a family leave can be requested under the birth or adoption provisions of FMLA.

Other Provisions:

1. All medical/FMLA leaves for self or family member, or for birth or adoption, whether paid or unpaid, shall run concurrent within the maximum amount of leave permitted by policy. This provision includes workers compensation leaves, the first twelve (12) weeks of which shall run concurrent with FMLA.

2. For employees applying for New Jersey Temporary Disability, only accrued sick leave must be used first and exhausted.

3. If you are on an approved leave of absence and found to be engaged in any employment during the leave period except as allowed by Federal and/or State Law or Statute, you will be subject to immediate dismissal.

4. An employee will be considered absent without authorization (AWOL) and subject to termination if he/she fails to:

   - apply for a Leave of Absence within the guidelines of this policy; -provide required documentation (medical certification) justifying the leave within the maximum fifteen (15) days of the leave effective date;

   - return to work within three (3) or more days after the leave expiration date and has not applied for an extension;

   - respond to a written communication from the University advising of the leave expiration.

1. The University may require an employee to obtain a second opinion at the employer's expense. If the provider's certification does not ultimately establish the employee's entitlement to FMLA leave, the leave shall not be designated as FMLA leave. The University is permitted to designate the health care provider to furnish the second opinion. If the opinions of the employee's and the University designated health care providers differ, the employee will obtain certification from a third health care provider, at the expense of the University. This third opinion shall be final and binding.

2. Leaves of absence are calculated on a “rolling” 12-month period measured retrospectively from the date an employee begins a leave pursuant to FMLA.

Military Caregiver and Qualifying Exigency Leaves
Under the FMLA, eligible employees can take up to 26 weeks of “military caregiver leave” during a single rolling 12-month period to care for a family member who is a “covered service member” with a “serious illness or injury.” Also, a Qualifying Exigency leave may be taken by eligible employees when the employee’s spouse, son, daughter or parent is on “covered active duty” in the Armed Forces. Please
consult the Medical/FMLA policy #30-01-40-40:00 for details on the eligibility requirements, definitions and pertinent policy provisions.

**A Personal Leave of Absence** is defined as an approved unpaid absence from work for personal reasons. Maximum length of the leave is thirty (30) days within a rolling twelve (12) month period and may be taken intermittently. Personal leave is discretionary on the part of the Department of Human Resources in consultation with the employee’s department and may be used for awaiting a long-term disability claim for serious illness or ADA accommodation.

**An Academic Leave of Absence** is defined as an approved unpaid absence from work to pursue a field of study at an accredited college, university or other educational institution. Academic leave may not exceed a total of six (6) months within a rolling twelve (12) month period. It may be taken intermittently. Academic leaves are approved by the Department of Human Resources in consultation with the employee’s department.

**Military Leave of Absence** - Employees are eligible for paid leave for military training whenever they are required to perform active duty “field training.” Normally, military leave is for a two-week period, however, in some cases, longer or multiple leaves do occur and can be authorized. Maximum time allowed shall not exceed five (5) years total. Leave for attending military school does not qualify for military leave pay. Any questions regarding eligibility should be directed to your Human Resources Generalist.

**OTHER UNIVERSITY BENEFITS**

**Tuition Assistance Programs**
Please reference your collective bargaining agreement (if applicable) concerning your Tuition Assistance Benefits. All collective bargaining agreements and the University Tuition Reimbursement Policy may be accessed for up to date information on the RowanSOM Web Site.

**EMPLOYEE ASSISTANCE SERVICES**

It has been found that each employee in the early years of employment establishes a pattern of work performance and attendance. The employee tends to maintain this pattern throughout their work career except when some major problem or life change occurs. Problems may be simple or complex. They could include such matters as marital or family discord, tangled financial obligations, problem drinking, physical ill health, drug abuse, emotional turmoil, or difficulties on the job.

Many times when one of these problems arises and nothing is done, other problems may occur and a pyramiding effect may develop. For the most part, these problems are temporary. In some instances we may find that we need the help of others to cope with the problem. Therefore, in order to help its employees, the University provides the Employee Advisory Service.

Appointments with the State of New Jersey counselor may be arranged through the Office of Human Resources.

The Employee Advisory Service is a referral agency. If, in the opinion of the Advisor, the individual should seek medical assistance, the Advisor will help with the arrangements. If other services seem indicated, the employee will be so advised and referred.

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The Advisor will discuss the problem with the employee. When an employee goes to the Service, it will be under strict confidential circumstances. All that is discussed with the Advisor is privileged and confidential.

An employee may be referred to the EAS at any time, if circumstances warrant it. The aim of EAS, it must be kept in mind, is to help the employee and is not to be considered disciplinary in nature. State employee associations and unions may refer employees to the EAS, if the employee agrees to the referral.

When an employee receives a less than satisfactory performance rating, he/she will be scheduled to go to the EAS. The Office of Human Resources will make the appointment and inform the employee as to the time and place. The Office of Human Resources will also arrange with the supervisor for the employee’s absence.
No charge is involved for visits by the employee to the EAS. If further medical help or outside counseling is necessary, standard procedures for coverage by the employee’s Health Benefits Plan will be followed.

All employees of the University and members of their immediate households are eligible to use the EAS.

PARKING PROGRAM

Parking for staff members is available on the Stratford campus. A parking “hang tag” can be obtained from Facilities Planning, Management & Construction. You have the option of paying the University parking fee by check/money order or bi-weekly payroll deduction. Payroll deductions for the parking program are made on a pre-tax basis unless you opt to have deductions made on a post-tax basis. Once you elect the deduction, you can choose in subsequent years to continue payroll deductions or to pay by check. If you want to discontinue parking payment deductions, you can stop the deductions at any time and return your parking hang tag. For an additional fee, you can obtain either a guaranteed or reserved parking space on your campus. For more information, contact the parking office at 856-566-6033.

SUPPLEMENTAL SAVINGS PROGRAMS

1. Credit Union where loans, checking and credit cards are available.

OCCUPATIONAL MEDICINE, SAFETY AND SECURITY

OCCUPATIONAL MEDICINE

The University complies with all applicable laws, rules, regulations and standards regarding pre-placement and annual medical evaluations for staff members. In addition, the University is committed to developing programs to protect and improve the health of its staff members.

Staff members serving in positions which require physical and/or screening medical examinations shall undergo such physicals and screenings as a condition of employment and continued employment. For
example, staff members who may be exposed to tuberculosis shall undergo baseline and periodic tuberculosis surveillance. All staff members who have potential exposure to potentially infectious body fluids or laboratory materials must be immunized against hepatitis B or be able to demonstrate immunity. In accordance with the standard, all employees who have occupational exposure can obtain hepatitis B vaccinations at no cost to them.

On the Stratford and Camden campuses, employee health services may be obtained at the SOM Department of Family Medicine located in the SOM Primary Care Center Suite 219, telephone (856) 566-7020 and fax (856) 566-6188.

In addition, the University Environmental and Occupational Health and Safety Services Department (EOHSS) has offices on the Stratford and Camden campuses at (856) 566-6189 and fax (856) 566-6352.

On each campus, appointments with faculty members serving as practicing physicians and dentists in many specialties are available for non-work-related conditions. The University’s clinical facilities include the Doctors Office Center on the Newark campus, the Clinical Academic Building in New Brunswick, the Primary Care Center and the Specialty Care Center in Stratford, and many other locations in the State. Except for emergencies, visits must be scheduled during the staff member’s non-working hours. If you must leave your work area during working hours, then prior authorization from your supervisor must be obtained.

INFECTION CONTROL

The health of all of our staff members is of major concern to us. Any disease or infection that you may have could potentially be transmitted to patients or to your fellow employees and may also affect your work performance. It is important that all department rules and regulations regarding infection control are understood and followed. Report any infection or infectious disease immediately to your supervisor or your campus Health Service.

FIRE AND SAFETY

The University is committed to providing a fire-safe and healthful work environment for its staff members. To safeguard life and property from the hazards of fire and explosion you are expected to comply with all applicable fire prevention and response procedure outlines in the University’s Fire and Life Safety Policy. Your cooperation is essential for the University’s regulatory compliance and for the smooth operation of day-to-day activities.

Familiarize yourself with the fire emergency procedure for your area. Review and practice the procedure regularly. In case of fire, regardless of the size of the fire, ALWAYS activate the fire alarm by pulling the nearest wall mounted red pull box. Never attempt to fight the fire before activating the fire alarm. By doing so, you may risk a major fire or injury. Use portable fire extinguishers only if you are trained and confident about using it. Always protect yourself from fire and smoke. Remember, your safety always comes first. Your participation in fire exit drills is essential. They provide you with an opportunity to practice your emergency procedures.

Take appropriate safety precautions regarding the storage and handling of flammable and toxic materials, obstructions in the EXIT corridors, holiday decorations and use of electricity. Consult your supervisor and/or area fire warden for more specific safety procedures.

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Most accidents are predictable and preventable. You can help prevent accidents and eliminate their causes by reporting all fire and safety related unsafe conditions and injuries to your supervisor. Consult your campus EOHSS office for any fire and safety related assistance.
EMPLOYEE RIGHTS AND RESPONSIBILITIES

COMMITMENT TO SERVE

The RowanSOM provides health services to patients throughout the State of New Jersey. We also perform research at the highest standards and educate tomorrow’s health care professionals. Each staff member plays a special role in performing the missions of the University. Each one of us has rights as an employee and also significant responsibilities. If you are aware of your responsibilities and meet the challenges presented, then you will contribute to the success of RowanSOM.

COURTESY

As staff members of RowanSOM, it is essential that high standards of personal conduct and courtesy be maintained at all times. Courtesy and respect is a language that everyone understands and should be extended to fellow employees, students, patients and visitors. Good manners, cooperation and consideration for others are fundamental and enhance the RowanSOM image.

CUSTOMER SERVICE

ROWANSOM places a high degree of importance on establishing and maintaining an atmosphere of friendliness, courtesy and concern for each patient visitor, physician, co-worker, insurer, etc., so that each person we interact with has a favorable experience with and perception of our University. Each staff member is expected to demonstrate excellent customer service behavior by showing respect, empathy and cooperation on a consistent basis.

PATIENT RIGHTS

The “PATIENTS’ BILL OF RIGHTS” is posted in conspicuous locations throughout our hospital facilities. Whether you work directly in a patient care setting or not, you must be aware that communication, respect and trust between patients and hospital personnel are essential to good patient care. Therefore, the inherent rights of each patient must be vigilantly observed by all staff members. Each patient should receive equitable and human treatment at all times and under all circumstances, regardless of race, color, creed, age, sex, national origin, sexual orientation or the source of payment for care.

The patients’ right of privacy should also be safeguarded. This involves prevention from interrogation by individuals from outside agencies not directly connected with the hospital, protecting the individual’s right to privacy of his/her body, and preserving the confidentiality of the patient’s history, present condition, or course of treatment.

CONFIDENTIALITY

During the course of your employment you may learn of confidential information about patients, co-workers or the University. Continued employment at RowanSOM is conditional, based on your taking every possible precaution to ensure complete confidentiality of information. You must be on guard against potential violations of confidentiality whether you are inside the University or standing at a bus stop talking to a co-worker.
PERSONAL APPEARANCE

It is important that staff members representing the University present a professional impression to the public, patients and co-workers. Your personal appearance is the basis of such an impression and therefore appropriate clothing, good grooming, neatness and cleanliness are essential. Your Department Head will indicate the appropriate attire/uniform for your particular assignment.

If you work in an area where uniforms are required, you must wear your full uniform at all times and it must be neat and clean. Also, be sure that your accessories, such as scarves, belts and jewelry do not present a safety hazard around equipment and University office machinery.

Your employee I.D. badge is considered a part of your attire/uniform and must be worn at all times conspicuously with your name in full view when on duty or when present on ROWANSOM property.

SOLICITATIONS AND DISTRIBUTION

In the interest of maintaining the best possible environment for the furtherance of our mission, solicitation for contributions by staff members and non-staff members is prohibited unless it is related to University sponsored or approved activity. Distribution of literature by University staff members, outside vendors or members of the public is prohibited. Unauthorized solicitation and distribution must be reported to the Vice President for Human Resources, or his/her designee on each of our campuses. If you have any questions about this policy contact your supervisor or your Campus Human Resources Office.

PERSONAL PHONE CALLS AND MAIL

University telephones are provided to conduct University business and are not to be used for personal calls. Public telephones located throughout the University are available for personal calls. Incoming personal calls while you are at work are permitted only when an emergency exists.

You may not use the University’s internal mail service or facsimile machines for sending or receiving personal mail. Personal mail must be sent to and received at your home address. You are not permitted to use the University’s address or letterhead for bills or any personal or non-University business correspondence.

PERSONAL COMPUTERS, E-MAIL and the INTERNET

Many staff have been provided with personal computers (PC’s). Sufficient cautionary measures should be taken in conjunction with IST and Public Safety to secure these pieces of University equipment.

Many University PCs have been provided access to the Internet and to various E-Mail networks. The purpose is to enhance each user’s ability to perform his/her job. Accessing the Internet for personal reasons in lieu of performing work during business hours is prohibited. In addition, staff with Internet and e-mail access must be mindful of what messages are communicated to fellow staff through this particular medium, as well as through conventional media. Moreover, downloading or even accessing web sites, which may be considered sexual in nature is clearly an unauthorized use of the electronic tools, which have been provided by the University.

Any misuse of the electronic media may subject the individual to disciplinary action, up to and including termination. Please note the University reserves its right to monitor PC usage (see Policy 00-01-1040:00).
ATTENDANCE

Every staff member of the University has been assigned specific tasks and specified hours during which these tasks are to be performed. Therefore, regular attendance and punctuality are essential to provide high quality patient care and efficient dependable service to outside agencies and the public.

If you are going to be unavoidably detained or if you will not be able to report for work, notify your supervisor as early as you can, in accordance with departmental and University policy. If you will be out ill for an extended period of time, you must keep your supervisor informed of your approximate date of return to work. If you fail to call your supervisor and notify him/her of an unscheduled absence, you will be absent without leave and automatically subject to disciplinary action under the University’s Attendance Control Policy.

If you are serving a probationary period, failure to maintain satisfactory attendance can result in failure of probation and termination of your employment. Every staff member has an obligation to keep absences, especially unscheduled ones, and lateness to an absolute minimum.

Unscheduled absences and lateness place a burden on your Department, especially your supervisor and co-workers. You are encouraged, throughout your employment with the University, to comply with University attendance standards. Failure to comply will result in disciplinary action under the University’s Attendance Control Policy.

EMPLOYEE CONDUCT AND PERFORMANCE

Any large organization must have rules and regulations to ensure a safe and efficient operation. As a staff member of ROWANSOM you are expected to follow rules and regulations governing employee conduct. You are also expected to perform your work assignment in a satisfactory manner. The rules and regulations are part of the University Human Resources Policies and general University policy and are summarized briefly in this handbook. Your supervisor will inform you of rules and regulations unique to your work area. It is expected that all staff members will follow the instructions of their supervisors and other University officials. In addition, it is expected that staff members will use common sense and good judgment in carrying out their assigned duties.

Listed below are certain activities, which are strictly prohibited. Staff members who engage in these or other prohibited activities will be disciplined and may be subject to termination even for the first offense. This list is not intended to cover every possible situation that may arise, but is designed to give you a basic understanding of common types of unacceptable conduct or performance:

- Falsification of employment application, related documents or other ROWANSOM records.
- Any unauthorized employment while on leave of absence.
- Signing in or reporting time of arrival or time of departure for another employee, “punching” another staff member’s time card, or requesting another staff member to record time on a card or time sheet other than his/her own.
- Frequent tardiness or absenteeism or unauthorized absence from work station during work hours.
- Loafing or sleeping on the job during working hours.
- Failure to follow the instructions of supervisors.
- Insubordination (refusal to carry out orders, instructions or an assignment).
- Using racial, religious or sexual epithets.
- Gambling on ROWANSOM premises.
- Reporting to work under the influence of intoxicants, drugs or narcotics; use or unauthorized
possession of intoxicating beverages, drugs or narcotics on ROWANSOM premises.
• Failure to demonstrate fitness for duty where safety requires the same.
• Inappropriate or unprofessional behavior.
• Threatening, intimidating, coercing or fighting with another employee, patient, or visitor by word or deed.
• Unauthorized possession of firearms or other types of weapons while on ROWANSOM property.
• Immoral action which would discredit ROWANSOM.
• Creating or contributing to unsafe or unsanitary conditions by act or omission.
• Smoking in University facilities.
• Felony conviction.
• Conduct unbecoming a ROWANSOM employee.
• Theft, fraud or misappropriation of property belonging to ROWANSOM, to another ROWANSOM employee, or to a patient or visitor at any ROWANSOM facility.
• Soliciting tips or gratuities from patients or visitors or unauthorized soliciting of employees.
• Unauthorized possession, use, copying or reading of ROWANSOM records and/or Patient’s Health information or disclosures of information contained in such records to unauthorized persons.
• Violation of any published rule, regulation, or practice of ROWANSOM or of any division or department of ROWANSOM.
• Patient abuse or neglect.
• Unsatisfactory work performance.
• Inattention to duty.
• The conduct of ROWANSOM staff members is governed by the University Code of Ethics as defined in the University Policy manual.

COMPLIANCE

RowanSOM New Jersey strives to conduct its operations in an ethical, lawful and responsible manner. Each employee of RowanSOM is expected to adhere to this standard whenever he or she acts on behalf of RowanSOM. To that end, a Compliance Program has been established to define and govern the conduct expected of employees, to provide guidance on resolving questions related to business conduct and ethical issues, and to establish a mechanism by which employees can report possible violations.

Listed below are certain activities which are strictly prohibited. Staff members who engage in these or other prohibited activities may be disciplined and may be subject to termination even for the first offense, depending on the seriousness and intensity of the violation. This list is not intended to cover every possible situation that may arise, but is designed to give you a basic understanding of common types of unacceptable conduct or performance.

• Failure to adhere to the RowanSOM Code of Conduct.
• Failure to adhere to RowanSOM university-wide or unit policies and procedures.
• Failure to satisfy mandatory compliance training requirements.
• Failure to cooperate with internal attorneys, auditors and compliance officer during investigations and audits.
• Using and disclosing patient information in violation of the privacy rights of patients as provided by state and/or federal laws and regulations (i.e., HIPAA), and/or RowanSOM university-wide or unit policies and procedures.
• Engaging in unauthorized access to patient information or using authorized access to such information in an unauthorized manner or in violation of RowanSOM university-wide or unit
policies and procedures.
- Failure to report possible violations of law or ethical standards.
- Failure to abide by the RowanSOM Conflict of Interest Policy.
- Failure to comply with Antitrust laws.
- Failure to comply with Anti-kickback/anti-referral laws.
- Failure to conform to EMTALA regulations.
- Failure to properly handle and dispose of hazardous materials and wastes; i.e. chemical, biological and radioactive.
- Failure to comply with the proper distribution and handling of pharmaceutical products; including, but not limited to, prescription drugs, controlled substances, hypodermic needles and drug samples.
- Failure to follow policies and procedures that ensure that research grants and their implementation are consistent with federal, state, local and RowanSOM rules and regulations.
- Participating in concealing improper discharge of disposal of hazardous materials or pollutants.
- Failure to comply with all safety instructions and procedures which are established to prevent safety and health hazards.
- Retaliating in any form against an individual who in good faith reports a suspected violation of policy and/or law.
- Engaging in any type of scientific misconduct.
- Failure to adhere to all Medicare and Medicaid laws and regulations.
- Failure to abide by all applicable laws and regulations.

**DEFICIT REDUCTION ACT**

RowanSOM is committed to complying with the requirements of Section 6032 of the Federal Deficit Reduction Act of 2005 and to preventing and detecting any fraud, waste, or abuse in its organization. To this end, RowanSOM maintains a compliance program and strives to educate our workforce on fraud and abuse laws, including the importance of submitting accurate claims and reports to the Federal and State governments. ROWANSOM’s compliance policies and procedures are set forth in detail in our Code of Conduct, which is available at [http://www.rowan.edu/compliance](http://www.rowan.edu/compliance) and provided to each employee.

In particular, RowanSOM prohibits the knowing submission of a false claim for payment from a Federally or State funded health care program. Such a submission is a violation of Federal and State law and can result in significant administrative and civil penalties under the Federal False Claims Act, a Federal statute that allows private persons to help reduce fraud against the United States government. Please see more information about the Federal False Claims Act below.

**A. Federal Law**

The federal False Claims Act (FCA, 31 U.S.C. §§ 3729 to 3733) provides that any person who knowingly:

- submits a false or fraudulent claim to the federal government for payment; or,
- uses false records or statements to obtain payment from the federal government for a false or fraudulent claim,

is liable to the federal government and subject to a civil penalty of $5,500 to $11,000 per claim ($5,000 to $10,000 for claims submitted before September 29, 1999), plus three times the amount of damages that the federal government sustains because of the act of that person.
For purposes of the FCA, a person acts “knowingly” if the person:

- has actual knowledge of the falsity of the claim, record, or statement; or,
- acts in deliberate ignorance or reckless disregard as to the truth or falsity of the claim, record, or statement, even where there is no proof that the person had a specific intent to defraud the federal government. “Claims” include any request or demand for money or property.

The FCA also contains whistleblower (qui tam) provisions that allow private citizens to bring suit on behalf of the federal government to recover federal funds used to pay false or fraudulent claims. Such whistleblowers may share in the proceeds of such recoveries. Any whistleblower who is “discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against in the terms and conditions of employment by his or her employer” is entitled to various types of relief under the FCA and may sue in federal court to obtain such relief.

In addition to the civil penalties provided for in the FCA, any person who makes false claims or statements for the purpose of obtaining payment from the federal government may also be subject to additional penalties imposed by relevant federal agencies, such as the Office of the Inspector General for the United States Department of Health and Human Services. These penalties may include civil monetary penalties and prospective exclusion from participation in all Federal and State health care programs (see, 31 U.S.C. §§ 3801 to 3812, 42 U.S.C. § 1320a-7a, and related regulations).

B. New Jersey State Law

New Jersey Healthcare False Claims Act (NJFCA)

This Act establishes civil penalties and treble damages against any person who submits or causes the submission of claims to the State for government funds or property knowing that those claims are false or fraudulent, or for acting with reckless disregard or deliberate ignorance of the truth or falsity of such claims.

Like its federal counterpart, the Act provides that an individual (referred to as a "relator") may sue on behalf of the state government and receive a portion of any recovery. Such cases, known as "qui tam" actions, are filed under seal to provide the State Attorney General time to decide whether to join the case. If the NJ Attorney General joins the NJFCA action and prevails, the relator will be awarded 15% to 25% of the recovered proceeds. If the relator prevails without the Attorney General having joined the action, the relator may generally receive 25% to 30% of the proceeds. Additionally, the NJFCA contains anti-retaliation provisions to protect employee whistleblowers, and allows such persons to bring civil actions for violation of the Act. The remedies for unlawful retaliation include reinstatement; double back pay, special and punitive damages, and attorneys’ fees. Also similar to the federal FCA, if the NJ Attorney General has reason to believe that a person has violated the Act, he/she may issue subpoenas to compel the attendance of witnesses or the production of documents as part of a pre-suit investigation. The NJFCA also provides that, upon violation of the Act by any person licensed or certified by a NJ licensing authority, the Attorney General must notify the licensing authority of the violation for "appropriate administrative action."

The NJFCA does differ slightly from the federal FCA. The primary difference between the NJFCA and the federal FCA, is that the NJFCA applies to false claims made to the state, or to "any contractor, grantee, or other recipient of State funds," as opposed to the federal government. In addition, NJFCA actions may be brought in either state or federal court, whereas federal FCA matters must be brought only in federal court.
New Jersey Healthcare Claims Fraud Act

This law makes it a crime to present, assist, conspire or urge another person to make any written or oral statement in connection with a claim for payment or other benefit pursuant to an insurance policy knowing the statement contains false or misleading information concerning any fact or thing material to the claim.

This law also makes it illegal to conceal or knowingly fail to disclose the occurrence of an event which affects any person’s initial or continued right to entitlement to any insurance benefit or payment or the amount of any benefit or payment to which the person is entitled.

The New Jersey Health Care Claims Fraud Act is intended to enable more effective criminal prosecution of individuals who knowingly or recklessly submit false or fraudulent claims for payment for health care services. A violation can subject a person or organization to pay a fine of up to $150,000 or up to five times the amount of the claim.

Enforcement and Whistleblower Protection at RowanSOM

Any whistleblower believing to be experiencing retaliation should report the facts supporting the allegations of retaliation to any of the following individuals or entities:

- Compliance Officer;
- The Ethics Liaison Officer;
- The Compliance Officer for the Operating Unit; or,
- The Locally Designated Official for the respective school or business unit, appointed by the Dean, Vice President, or President/CEO of the school or business unit, whose name and contact information must be kept current with the Compliance Officer.

The person to whom the complaint is made will immediately notify the Office of Compliance. Compliance Officer, in consultation with the Senior Vice President & General Counsel, will determine the appropriate investigative action, which may include internally investigating the retaliation allegation or referring the matter to external investigators, if necessary.

All retaliation investigations will be conducted as sensitively and expeditiously as possible. Due consideration will also be given to existing grievance procedures under applicable collective bargaining agreements. The whistleblower will be promptly notified of the results of the investigation at its conclusion.

Please refer to RowanSOM Policy 00-01-15-55:00 on Reporting Compliance Concerns for additional information on university procedures and your rights as a RowanSOM employee.

FITNESS FOR DUTY

All RowanSOM staff members are expected to report to work ready and able to perform their job responsibilities. You must be free of the influence of any intoxicant, including but not limited to alcohol or any controlled substance. During work hours you can neither possess nor consume any intoxicant or illegal substance. Failure to adhere to any of the above will result in disciplinary action or termination of employment. A staff member who has a physical and/or mental impairment, which could adversely affect the ability to perform job duties, shall report this to the immediate supervisor. The impairment may be the result of an illness, injury, emotional disorder, medication use or use of a chemical substance, including
alcohol and controlled substances.

SMOKING

RowanSOM is a smoke-free institution. Smoking by staff members, faculty, students and visitors is prohibited in all University facilities. In some entrance areas, receptacles are provided to dispose of cigarettes. The University encourages staff to stop smoking at all times. However, if you are found to be smoking inside a RowanSOM facility, you will be subject to disciplinary action.

OUTSIDE EMPLOYMENT

When you accept a position as a full-time staff member at RowanSOM, you agree that your primary work obligation is to the University, or the University sub-division which is your employer. If you desire to work outside of working hours for another employer, you must notify the University of such employment. Such outside employment must not present a conflict of interest, conflict in hours and must not diminish your capacity to fulfill your obligations to your primary employer-RowanSOM. Failure to observe University policy with respect to outside employment will subject you to disciplinary action.

NOTICE OF RESIGNATION

If you decide to resign from your position with RowanSOM, you should give a minimum of three (3) weeks notice. Individuals in management and executive positions are expected to give a minimum of four (4) weeks notice. Upon resignation or separation from the University, it is required that all University property be returned to either your immediate Supervisor or Campus Human Resource Office (i.e. -Keys, parking hang tag, identification cards).

EXIT INTERVIEW

While it is still appropriate for an employee to submit a letter of resignation two weeks or more prior to the date of separation, another step should be added to the process. Any employee who leaves the University for any reason should schedule an exit interview with the Office of Human Resources prior to the date of separation. This interview is helpful to the University and the employee who is separating service. Contact Human Resources at x6159 for more information.
PERSONAL DATA

RowanSOM offers web services for all active employees to access personal, confidential Payroll and Human Resources information. Banner self-service provides you the ability to view and update personal information such as address, phone numbers, emergency contacts and W-4 elections. All RowanSOM staff members are required to provide up-to-date personal data to your Campus Human Resources Office. Therefore, if your marital status changes or you have any additional dependents, you should let your Campus Human Resources Office know as soon as possible. This will insure correct insurance coverage and receipt of official communications sent to your home (including W-2 forms).

UNION REPRESENTATION

Many RowanSOM staff members are covered by collective bargaining agreements. Listed below for your information are the unions, which represent different groups of staff and faculty. Each union is the exclusive legal agent for the staff or faculty in each group and engages in collective bargaining with the RowanSOM on behalf of its members.

- International Brotherhood of Teamsters, Local 97 for service, technical maintenance and clerical staff.
- Hospital Professional and Allied Employees (HPAE 5089) for nurses
- Hospital Professional and Allied Employees (HPAE 5094) for professional staff
- Fraternal Order of Police, Lodge 74 for University Police Officers
- Office and Professional Employees International Union, Local 153 for Security Officers
- Fraternal Order of Police, Lodge 155 for University Police Sergeants
- Operating Engineers, Local 68 for skilled trades
- Committee of Interns and Residents for Interns, Residents and Fellows
- American Association of University Professors for Faculty/Library
- Communications Workers of America, Local 1031 for supervisory staff

Directions for accessing your contract:

Go to [www.rowan.edu/som/hr](http://www.rowan.edu/som/hr). Click on Bargaining Agreements and click on your union noted above.

Union staff members are charged dues by their unions and must pay either a representation fee (up to 85% of the full fee) or a full membership fee to maintain their employment with the University.
YOUR FUTURE AT RowanSOM

JOB POSTINGS

Vacant positions (full-time, and/or part-time) with at least twenty (20) hours per week, will be posted on the University’s Employment Opportunities website and may be accessed from the public library, home or office computer, student computer center or other locations. If you are a regular employee interested in applying for a posted position, you may do so by applying on line at www.rowanuniversity.hodesiq.com from any computer with web access. The Stratford employment offices have installed computers for your use during business hours and assistance will be provided to applicants with limited computer skills.

University employees eligible to bid no longer need to complete a bid form. Employees just need to apply online for positions on any campus. Once online, indicate that you are a current employee in the where did you first learn about this opportunity section. Applicants may apply for more than one open position using the Job Cart feature.

PROMOTIONS & TRANSFERS

The University encourages you to grow in knowledge, skill and responsibility and thus increase your potential for increased opportunities while employed at the University. It is the policy of the University to fill each position with the most highly qualified applicant. The University allows qualified applicants to bid on positions within the University. Staff members are encouraged to apply for promotions or transfers by bidding on any posted position he/she is qualified to perform.

While we prefer to promote from within, the University reserves the right to select the applicant, whether internal or external, determined to be the best qualified for the position.

PERFORMANCE EVALUATION

Everyone likes to know just how he/she is performing on the job. In order to enhance performance and promote personal development, your supervisor will complete a formal performance evaluation on at least an annual basis. All supervisors have also been advised to give some form of notice in advance of the annual performance review if you or any staff member is performing below a satisfactory level.

After reviewing your performance with the department head, your supervisor will discuss your evaluation with you. The focus will be your progress on the job, the strengths and weaknesses of past performance and to set goals and objectives for the upcoming years. You will have the opportunity to discuss, review and add written comments to the evaluation. You do have an obligation to sign the evaluation to indicate that you have seen it and reviewed it with your supervisor. Upon completion, the performance evaluation will be sent to your Campus Human Resources Office and will be filed as part of your permanent Personnel record.

If you are a new hire into a unionized position, your supervisor should complete a probation assessment form before the end of a 180 day probation period. New hire probation may be extended in accordance with the applicable collective bargaining agreement.

If you are promoted or transferred to another position in the University and are a non-supervisory/non-managerial employee, a probation assessment form will be completed during your probation period. If you fail to successfully complete the probation period in your new position, you may be transferred back
to your former position if it is vacant. You may bid on other jobs or your employment may be terminated. Please reference your collective bargaining agreement (if applicable) concerning the terms of your promotional probationary period.

**STAFF DEVELOPMENT**

Staff development is fundamental to the University’s continued success. It is an investment for the mutual benefit of you and the University. Our emphasis on training, education and staff development is purposefully intense; and, our desire to nurture an environment of continuous learning is no less. Enhancing your current skills and remaining current in the knowledge, developments and trends in your field prepares you for a dynamic and challenging environment as well as promotional opportunities.

We believe that an individual’s capacity for self-development is an essential part of the personal growth process. As you make decisions about your career progression, you are also encouraged to read our Tuition Assistance Program (TAP) designed to enhance your professional skills for upward mobility and improve your overall job performance. Once you meet the eligibility requirements stated in the policy, you may pursue a degree; participate in distance learning or special interest non-college courses at a variety of academic institutions.

Additionally, the Department of Human Resources Office of Training and Organizational Development offers a plethora of in-house courses, which are continually expanded and updated, to address the emerging needs of an organization. For more information about courses offered, class schedules and locations; contact the Office of Training and Organizational Development by calling (856)256-4291 or visit [http://www.rowan.edu/hr/training/index.html](http://www.rowan.edu/hr/training/index.html).

We believe that you can help make significant contributions to the many services the University provides in the areas of health care, research and higher education. As you decide on your career destination, your responsibility is three fold: First, take advantage of the training and educational opportunities offered. Second, know what is expected of you, perform to the best of your abilities and be accountable for your performance. Third, have regular and periodic discussions of performance expectations and achievements with your manager. In return, the University will continue to provide staff development opportunities in a variety of venues and will ensure that you have equal access to upward mobility.
Acknowledgement of Receipt of Training and Documents

RowanSOM Employee Copy

I have received training on my rights and obligations as a Rowan employee on the following:

1. State of New Jersey Policy Prohibiting Discrimination, Harassment or Hostile Environments in the Workplace
   a. Procedures for Internal Complaints alleging Discrimination, Harassment or Hostile Environments in the Workplace
   b. Discrimination Complaint Processing Form
   c. Title IX

2. Rowan University Accommodation Policy in Compliance with the American Disabilities Act (ADA)


4. The Drug-Free Workplace Act

5. The Public Employees Occupational Safety and Health Act (PEOSHA)

6. The New Jersey Worker and Community Right to Know Act

7. The New Jersey State Code of Ethics

8. Rowan University ISO Acceptable Use Policy

9. Rowan University Whistleblower Policy

10. Rowan SOM Compliance Policy

11. Rowan University Workplace Violence Policy

12. Procedure for Reporting Hate/Offensive Graffiti

13. Employment with RowanSOM

**I have received a copy of each of the policies and procedures listed above.**

Failure to sign this form does not relieve an employee of the responsibility to understand and adhere to the provisions of the policies and procedures.

Employee’s Name (Please Print) _______________________________________________________

Employee’s Signature ______________________________________________________________

Banner ID ___________________________ Date ___________________________________________
Acknowledgement of Receipt of Training and Documents  
Rowan Copy

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