

NEVADA SYSTEM OF HIGHER EDUCATION
PROCEDURES AND GUIDELINES MANUAL

CHAPTER 10

RISK MANAGEMENT AND SAFETY

Section 1. Environmental Health and Safety

Pursuant to Board policy, Title 4, Chapter 10, Section 32, the authority for the development, implementation, compliance monitoring, and administration of Environmental Health and Safety (EH&S) programs is delegated to the president of each NSHE institution. In its authority to establish EH&S programs the following provisions concerning employees, supervisors, and training records must be followed.

1. Institutionally established policies and procedures concerning EH&S programs must be

2. Objective and Scope. While the primary responsibility for risk management functions is maintained at the institutional level, the System through the Chief Financial Officer is responsible to ensure adherence by the institutions to national standards for risk management programs. The goals of risk management are to: 1) protect the health and provide for the safety of the NSHE students and employees, 2) protect the public from injury or damage incidental to the operations of the NSHE, 3) protect the NSHE's assets and its environment, and 4) protect the reputation of the NSHE. To achieve these goals, risk management will consider all types of risks, including but not limited to natural, environmental, compliance, and safety risks. The realization of these overall objectives involves:
- a. Providing for the safety of students, employees, and the public;
 - b. Protecting NSHE's property and its environment;
 - c. Reducing NSHE's legal liability;
 - d. Purchasing insurance and procuring contraonturb.

- b. Ensure NSHE institutions or our contractors comply with the duties in NAC 617.080, and that examining physicians comply with the requirements of NAC 671.100. Physicals (including hearing exams) must meet the provisions identified in NRS 617.454, 617.455 and 617.457. Documentation on the physical reports will be maintained at the respective Risk Management Office.
- c. Review the results of the physical exams to ensure that the contracted vendors are consistently identifying and reporting risk factors and orders to the officers to correct risk factors, and to evaluate and report on the general level of risk that officers have of developing cardiac or lung diseases (low, medium or high), based on the information in the physical exams. This review can be completed internally by a designated qualified individual or contracted to a third party vendor. Documentation of the review will be maintained at the respective Risk Management Office.
- d. Follow up with the police officers. When physician warnings and orders to correct risk factors are identified, a letter must be forwarded from the BCN/BCS Risk Manager or designee to the police officer. The letter is in addition to and is not a substitute for the information that is required to be given to the officer pursuant to NAC 617.100; and it is not a substitute for the discussion requirement under NAC 617.080(3). The Police Chief will be notified that the letter was sent. The letter will summarize and reiterate the physician's findings indicating that the police officer has a predisposition to the contraction of a disease of the heart or lungs and that failure to take actions to correct the predisposing risk factors that are within the officer's control to correct, can jeopardize the officer's eligibility for benefits under the heart and lung program. The letter must also offer the officer the opportunity to enroll and participate in the NSHE supported cardiac wellness program identified in section (h). BCN/BCS Risk Manager will ensure the officer has complied with NAC 617.090, and will obtain a "confirmation of receipt form" from the officer within 60 days, and forward a copy to the designated police department representative.
- e. Provide education to police officers on the goals and requirements of the program, including required action necessary to maintain coverage under Chapter 617 of NRS. If the police officer can correct any predisposing physical condition of which the police officer has been warned pursuant to subsection (b), inform the officer that failure to correct the condition may exclude them from benefits under chapter 617 of NRS and Chapter 617 of NAC.
- f. Contract with one or more local medical providers/clinics for the physicals. The contracted Medical Provider/Clinic must be required to forward results of physical exams directly to the employer (BCN/BCS Risk Management office) for review. If an employee chooses to go to his or her own physician, in lieu of the contracted provider for their physical, the following must occur:
 - i. The police officer's physician must complete the required paperwork and forms, and perform the same diagnostic tests that are required of the contracted medical providers/clinic. The completed forms must then be provided by the physician to the police department designated representative, who will forward the packet to the Risk Management office. It is the responsibility of the Risk Management office to forward the physical to the contracted medical provider to determine if all components have been completed. The annual physical is not considered complete until it has been reviewed by the contracted vendor.
 - ii. The police officer will be informed that the physical exam will be considered incomplete if the officer's personal physician has not completed all of the proper tests and paperwork.

