

Lab Volunteer Checklist – Bioengineering

Complete Volunteer Service Agreement (page 1)

Review and sign UW Medicine Privacy, Confidentiality, and Information Security Agreement (page 3)

I have reviewed the UW Laboratory Employee Safety Training Checklist with my supervisor and will complete all necessary safety training. (page 5)

_____ (signed) _____ (date)

I have reviewed the Information for Volunteers document. (page 7)

_____ (signed) _____ (date)

I have reviewed the UW Policy on Personal Use of University Facilities, Computers, and Equipment by University Employees (page 9)

_____ (signed) _____ (date)

I will complete Asbestos Awareness Training: <http://www.ehs.washington.edu/ohsasbestos/index.shtm>

_____ (signed) _____ (date)

Please return this checklist and pages 1, 2, and 3 to Laura Wright in BIOE N107.

Please complete pages 5 and 6 with your supervisor. Do not turn this form in to Laura Wright.

**University of Washington
Department of Bioengineering
Volunteer Service Agreement**

Section 1 – Volunteer Information

Name: _____

UW Student ID number (if applicable): _____

Date of Birth: _____ Phone #: _____

Home Address: _____
Street City State Zip

Mailing Address (*If different from above*)

Street City State Zip

Email Address: _____

Emergency Contact: _____ Phone #: _____

Are you currently employed at the UW? (Y/N) _____; Were you employed at the UW in the past? (Y/N) _____

If yes to either current or former employment at UW, please state the job title, start/end dates, and briefly describe job duties:

VOLUNTEER CERTIFICATION

I have read and agree to comply with the Department of Bioengineering Lab Volunteer Guidelines as well as applicable policies of the School of Medicine and University of Washington and to fulfill the volunteer responsibilities to the best of my ability. I understand that I will receive no monetary benefit in return my volunteer service. I further understand the Department of Bioengineering may terminate this agreement at any time without prior notice.

For volunteers over the age of 18: I have read the list of potential risks of volunteering in the lab and consent to medical treatment in the case of a medical emergency.

For volunteers under the age of 18: I understand that my volunteer hours and use of materials and equipment are restricted. My parent/guardian completed the section consenting to medical treatment in the case of a medical emergency after reading the list of potential risks of volunteering in the lab.

Volunteer's Signature: _____ Date: _____

Complete for volunteers who are MINORS:

As parent/guardian of _____ (*minor's name*), I understand the potential risk associated with activities in a Bioengineering lab and I grant permission for my minor child to serve as an unpaid volunteer.

If my minor child requires emergency medical treatment as a result of an accident during his/her service in a BIOE lab, I consent to such treatment.

Parent/Guardian: _____
Print Name Signature Date

Complete for volunteers with a VISA:

I understand that volunteer status must be in compliance with the employment eligibility requirements of federal immigration laws. I understand that activity inappropriately classified as volunteer service without a visa status authorizing work may subject the University to significant fines and negatively impact my visa status. I certify that I am voluntarily performing services for civic, charitable, or humanitarian purposes, with no pressure from the UW and no promise of advancement, benefit, or current or future compensation. I am authorized to volunteer under the BIOE volunteer policy.

Volunteer's Signature: _____ Date: _____

Section 2 – to be completed by BIOE faculty member/Principal Investigator

Principal Investigator of lab responsible for volunteer:

Full name

I appoint (name) _____ to supervise the volunteer listed in Section 1. I verify that the supervisor is qualified to provide training in laboratory safety and emergency response. The supervisor will ensure that the volunteer has the appropriate supervision, experience, qualifications, and training for the lab tasks the volunteer will perform. I will notify the BIOE volunteer coordinator if there is a change to the person assigned as supervisor.

PI signature: _____ Date: _____

(PI approval may be submitted via email to lew3@uw.edu); please include full name of the volunteer and supervisor in your message. Include this form as an attachment)

Section 3 – To Be Completed by Supervisor

Supervisor responsible for volunteer:

Name and Title

Supervisor’s Telephone Number: _____ E-Mail: _____

Please briefly describe the services the volunteer is expected to perform:

Please describe any occupational hazards within your laboratory (e.g. potential exposures):

Volunteer service will begin _____ and end _____
Date Date

Volunteer’s schedule is as follows (i.e. 9-11 AM):

<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>	<i>Sunday</i>

SUPERVISOR CERTIFICATION: As the supervisor to the volunteer listed in Section 1, I agree to oversee the volunteer’s training and activities. I am aware that the volunteer is authorized to serve based on visa status. I also agree to document the dates and hours of the volunteer’s services to the Department.

Supervisor’s Signature: _____ Date: _____

Section 4 –Department Approval

Signature _____ *Name* _____ *Title* _____ *Date* _____

Distribution

Original: Volunteer Program File Copy #1: Volunteer Copy #2: Supervisor



PP-04 Attachment A

Rev. 10/23/06

UW Medicine

Workforce Members

Privacy, Confidentiality, and Information Security Agreement

As a user of UW & UW Medicine computing resources and data, I understand that I am responsible for the security of my User ID (login) (s) and Password(s) to any UW and/or UW Medicine computer system for which I am granted access. I understand that it is my responsibility to protect my password's confidentiality. I understand that I have the following responsibilities:

- Comply with UW and UW Medicine policies;
- Support compliance with federal and state statutory and regulatory requirements;
- Protect access accounts, privileges, and associated passwords (examples: Not sharing my password and Not logging on for others);
- Maintain the confidentiality of information to which I am given access privileges;
- Accept accountability for all activities associated with the use of my individual user accounts and related access privileges;
- Not to change the computer configuration unless specifically approved to do so;
- Not to disable or alter the anti-virus and/or firewall software;
- Not to download, install or run unlicensed or unauthorized software;
- Use only licensed and authorized software;
- Ensure that my use of UW & UW Medicine computers, email, computer accounts, networks, and information accessed, stored, or used on any of these systems is restricted to authorized duties or activities;
- If I have clinical systems access, I may access my own PHI;
- Workforce members may not access the records of their family members, including minor children, nor any other person if not an assigned or job-related duty. This also applies in cases where staff members hold authorizations or other legal authority from the Patient;
- Report all suspected security and/or policy violations to my Help Desk;
- Report all known privacy violations to the appropriate entity's Privacy Official or the UW Medicine Privacy Office

I understand that where I have access to or use of information classified as RESTRICTED or CONFIDENTIAL, additional protections are expected. Proprietary information, which includes business plans, intellectual property, financial information or other sensitive materials and information in printed, electronic or verbal form that may affect workforce member's rights or organizational operations, is an example of a RESTRICTED classification. Protected health information, which includes individually identifying patient information in any form, sensitive student information, and workforce records are examples of a CONFIDENTIAL classification.

I understand that any RESTRICTED and/or CONFIDENTIAL information collected or obtained from, analyzed, or entered into any UW Medicine information management system(s) or database(s) is the property of UW Medicine unless otherwise specified by contract. I understand that I must maintain and safeguard the confidentiality of any and all UW Medicine RESTRICTED and/or CONFIDENTIAL information accessed or obtained in the performance of my authorized duties or activities. I will not access, use, and/or disclose RESTRICTED and/or CONFIDENTIAL information for any purpose other than the performance of authorized activities or duties. I will limit my access, use and disclosure to the minimum amount of information necessary to perform my authorized activity or duty.

I will safeguard all RESTRICTED and/or CONFIDENTIAL information by holding it in the strictest confidence and by refusing to allow others to access information unless my authorized activities require that I do so. In such cases, I will disclose or allow access only to individuals having appropriate authority to access, receive and use such information.

I understand that my access to systems that have RESTRICTED and/or CONFIDENTIAL information may be monitored to assure appropriate access and compliance with system integrity. I understand that authorized use carries with it the responsibility to follow the UW Medicine Privacy and Information Security policies that govern the use of RESTRICTED and/or CONFIDENTIAL information, computers, and networks.

I understand that failure to comply with the above Privacy, Confidentiality, and Information Security agreement may result in disciplinary action up to and including denial of access to information and termination of my employment at the University of Washington. I have been given access to all of the UW Medicine Privacy and Information Security Policies:

<http://depts.washington.edu/comply/privacy.shtml>

<http://depts.washington.edu/comply/security.shtml>

By signing this Agreement, I understand and agree to abide by the conditions imposed above.

Print Name: _____

Department: _____ Job Title: _____

Signature: _____ Date: _____

Copy provided on _____ by _____
Date Name supervisor, manager or designee Signature

- Provide copy of this Agreement to the workforce member. File original Agreement in departmental personnel or academic file.
(All signed Agreements must be maintained for 6 years)

The following table is a glossary of terms used in the Privacy, Confidentiality, and Information Security Agreement.

Term	Definition
Access	To use, change, or view information.
Authorized duties or activities	Duties or activities that are established by those with appropriate authority related to the role or function of the workforce member, like a supervisor, manager or director.
Authorized software	Software that is authorized for use by the designated System Owner or Department Manager.
CONFIDENTIAL Information	CONFIDENTIAL Information is information that is very sensitive in nature, and requires careful controls and protection. Unauthorized disclosure of this information could seriously and adversely impact UW Medicine or interests of patients, other individuals, and organizations associated with UW Medicine. Examples include: personally identifiable information, protected health information, workforce records, student records, social security numbers, legally protected University records, research data, passwords, intellectual property.
Confidentiality	Expectation that information will be protected from unauthorized use or disclosure.
Disclose	Release, transfer, provision of access to, or divulging information in any other manner outside the entity.
Individually identifiable patient information	Individually identifiable health information is information that is a subset of patient information, including demographic information collected from an individual, and: <ul style="list-style-type: none"> • That identifies the individual; or • With respect to which there is a reasonable basis to believe the information can be used to identify the individual. and <ol style="list-style-type: none"> (1) Is created or received by a health care provider, health plan, employer, or health care clearinghouse; and (2) Relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual.
Licensed software	Software that the University of Washington has been granted permission from the owner to use under a written license agreement or contract.
Minimum amount of information necessary	Minimum Necessary Standard: When using or disclosing Protected Health Information, UW Medicine must make reasonable efforts to limit PHI to the minimum necessary to accomplish the intended purpose of the use, disclosure or request. The minimum necessary standard does not apply to <ul style="list-style-type: none"> • Disclosures to or requested by a health care provider for treatment purposes • To the patient or pursuant to an authorization • Uses and/or Disclosures required by law • Uses or disclosures that are required for compliance with the HIPAA Privacy Regulations.
Orally disclosed	Spoken words either in person or over any communication device.
Protected Health Information (PHI)	Protected health information is a subset of individually identifiable health information maintained in permanent health records and/or other clinical documentation in either paper-based or electronic format.
Privacy Official	Each entity within UW Medicine has designated a Privacy Official who assists the UW Privacy Officer in developing and implementing UW Medicine's policies and procedures. The entity Privacy Official may identify or appoint designee(s) to assist in the performance of these functions.
Proprietary information	UW Medicine possesses exclusive rights over the information within its systems. This includes business plans, intellectual property, financial information or other sensitive materials and information in printed, electronic or verbal form that may affect employee rights or organization's operations.
RESTRICTED Information	RESTRICTED Information is information that is business data, which is intended strictly for use by designated UW Medicine employees and agents. This classification applies to information less sensitive than CONFIDENTIAL information. Dissemination of this information shall only be made to UW Medicine workforce with an established need-to-know.
Safeguard	Protect or cover from exposure, using precautionary measures.
Workforce	Faculty, employees, trainees, volunteers, and other persons who perform work for UW Medicine, and whose work conduct is under UW Medicine's direct control regardless of whether or not the workforce member is paid by UW Medicine.
UW Medicine	UW Medicine includes the following entities: University of Washington Medical Center and Clinics; Harborview Medical Center and Clinics; UW Medicine Neighborhood Clinics (University of Washington Physicians Network); UW Physicians Sports Medicine Clinic; Hall Health Primary Care Center; University of Washington Physicians; as well as certain services and activities that support UW Medicine that are performed by non-healthcare components of the University of Washington as defined within Privacy Policy PP-01 Use & Disclosure of Protected Health Information – Organizational Requirements. UW School of Medicine and the University of Washington Health Care Components are subject to the UW Medicine Information Security Program.



UW Laboratory Employee Safety Training Checklist

According to state/federal laws and University of Washington policy, Principal Investigators and laboratory supervisors are responsible for ensuring that all employees receive adequate training to understand the hazards present in their work area. This includes administrative personnel who handle lab chemicals for such tasks as receiving, inventory, and stocking. Training must occur prior to assignments involving potential exposure to chemicals. EH&S provides general training for most categories of hazards in the laboratory. EH&S strongly encourages and in some cases requires that employees take these classes since they cover topics that are specific to the University of Washington and Washington state. Laboratory staff must also receive training applicable to all UW employees such as an orientation to the department Health and Safety Plan, Emergency Evacuation and Operations Plan, Asbestos General Awareness, Violence Prevention, etc.

Employee Name: _____ **Date:** _____

Supervisor Name: _____ **Date:** _____

Laboratory Specific Training		
<i>The below types of training are required for each laboratory staff person and are to be provided by the Laboratory P.I., Manager, or Chemical Hygiene Officer. Details about each subject are discussed in Section 7 of the UW Laboratory Safety Manual, online at http://www.ehs.washington.edu/manuals/lsm/index.shtm.</i>		
Have you received the following?		Date
Orientation to the content and location of the Chemical Hygiene Plan, including:		
<ul style="list-style-type: none"> • UW Laboratory Safety Manual • Lab-specific Standard Operating Procedures • Other lab specific information 	<input type="checkbox"/> YES	
Methods for finding exposure limits	<input type="checkbox"/> YES	
Material Safety Data Sheets (MSDSs) and other safety references	<input type="checkbox"/> YES	
The hazards of the workplace and how to detect the presence or release of hazardous chemicals and the basic signs and symptoms of chemical overexposure	<input type="checkbox"/> YES	
Requirements for Personal Protective Equipment (PPE) and how to select, don, doff, and maintain it	<input type="checkbox"/> YES	
How to segregate and safely store chemicals in the laboratory	<input type="checkbox"/> YES	
Proper disposal of all laboratory waste	<input type="checkbox"/> YES	
How to safely clean up spills and respond to other emergencies	<input type="checkbox"/> YES	

EH&S Laboratory Safety Training	
<i>Answer the following questions. If YES, fill in the date when the training is completed. For more information about the classes, see http://www.ehs.washington.edu/psotrain/index.shtm or contact the EH&S Training Office at ehstrain@u.washington.edu or 206.543.7201.</i>	
	Date
Are you responsible for chemical safety in your laboratory?	
<input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, take the Laboratory Safety Standard Compliance class.	
Do you work with hazardous chemicals?	
<input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, take the Managing Laboratory Chemicals class.	
Do you need to wear a respirator on the job?	
<input type="checkbox"/> No <input type="checkbox"/> Yes If Yes, follow the instructions at: http://www.ehs.washington.edu/ohsresp/index.shtm . REQUIRED	

UW Laboratory Employee Safety Training Checklist

Do you work with any form of recombinant DNA, pathogenic microorganisms, human/non-human primate tissues or other biohazardous agents?	
<input type="checkbox"/> No <input type="checkbox"/> Yes	If Yes, take the Biosafety Training class. (Initial and every three years thereafter) REQUIRED
Will you work in an Animal Biological Safety Level-3 or Biological Safety Level-3 Laboratory?	
<input type="checkbox"/> No <input type="checkbox"/> Yes	If Yes, contact the EH&S Research and Biosafety Office at 206.221.7770 additional training may be required. REQUIRED
Are you planning to work with Select Agents?	
<input type="checkbox"/> No <input type="checkbox"/> Yes	If Yes, contact the EH&S Research and Biosafety Office at 206.221.7770 additional training may be required. REQUIRED
Do you work with human cells, tissue or body fluids?	
<input type="checkbox"/> No <input type="checkbox"/> Yes	If Yes, take the Bloodborne Pathogens for Researchers class (initial and annually thereafter.) REQUIRED
Are you planning to use ionizing radiation?	
<input type="checkbox"/> No <input type="checkbox"/> Yes	If Yes, follow the instructions at: http://www.ehs.washington.edu/rso/index.shtm . REQUIRED
Are you planning to use non-ionizing radiation?	
<input type="checkbox"/> No <input type="checkbox"/> Yes	If Yes, contact the EH&S Radiation Safety Office at 206.543.0463 additional training may be required. REQUIRED.
Do you package, ship, and/or transport hazardous materials or infectious substances?	
<input type="checkbox"/> No <input type="checkbox"/> Yes	If Yes, take the Shipping Hazardous Materials class or if applicable, the "Online Shipping Biological Substance Category B" or the "Online Shipping Dry Ice with non-dangerous goods or Exempt Patient Specimens" (initial and retake classes biannually) REQUIRED
Do you use a fume hood (see http://www.ehs.washington.edu/fsofumehoods/index.shtm)?	
<input type="checkbox"/> No <input type="checkbox"/> Yes	If Yes, you should take the on-line Fume Hood class.
Do you handle cylinders containing hazardous, toxic, or flammable compressed gases?	
<input type="checkbox"/> No <input type="checkbox"/> Yes	If Yes, you should take the Compressed Gas Safety class.
Have you volunteered to be one of the First Aid and CPR staff for your lab?	
<input type="checkbox"/> No <input type="checkbox"/> Yes	If Yes, take the First Aid and CPR Certification class. (Initial and every two years thereafter) REQUIRED
Are you expected to use a fire extinguisher in the event of an emergency?	
<input type="checkbox"/> No <input type="checkbox"/> Yes	If Yes, take the Fire Extinguisher Training class. (annual training) REQUIRED

Additional Specific Training
<p><i>Use this section for any additional safety training needed in your laboratory due to "unusual hazards" such as forklift operation, confined space entry, maintaining powered equipment [lockout/tagout], working at heights [fall protection], lifting safety, hydrofluoric acid, or perchloric acid fume hood use.</i></p>

After all of the training has been completed have the new employee sign and date this form and save it in your laboratory training records.

Employee Signature: _____ Date: _____

Information for New Volunteers

Welcome to the Department of Bioengineering! We hope you enjoy your volunteer service experience. This information is given to all new volunteers to familiarize them with the department's volunteer policy. This policy is intended to:

- Identify all volunteers;
- Define the scope of their activities;
- Clearly establish work hours and supervision to ensure that volunteers maintain worker's compensation insurance eligibility (otherwise, they are NOT covered)
- Verify and document a volunteer's eligibility to serve
- Establish PI responsibility for the volunteer's completion of applicable training (e.g. lab safety, HIPAA and/or IT security)

IMPORTANT: If your duties change to those expected of a paid employee in your lab, you have a right to receive compensation for your work, including back wages.

If you have any questions or concerns, please contact Laura Wright (email: lew3@u.washington.edu ; phone: 543-8958).

Limitations of Volunteer Service

- Volunteers are individuals who offer their services freely and without pressure or coercion, usually on a part-time, short-term basis, for public service or humanitarian objectives and without contemplating pay or other tangible benefit.
- Any individuals performing the same work being performed by a paid worker must be compensated fairly for their service.
- An individual is not a volunteer if he/she is otherwise employed by the same organization to handle similar services as the volunteer service.
- If the tasks assigned to a volunteer constitute the same work being performed by a paid worker, the volunteer may not truly be a "volunteer" according to the Federal Fair Labor Standards Act.
- Volunteers must be supervised at all times during their work
- Volunteers may not receive a stipend, but may be reimbursed for work-related expenses.

Tracking Your Hours

Volunteers are covered under the University's workers compensation insurance policy. This is to protect volunteers in case of laboratory accidents. However, insurance coverage is only available to those who report their actual hours worked. If you do not report your hours, the Department of Bioengineering and the University of Washington are not liable for injuries that you may incur in a laboratory accident.

In order to maintain eligibility for worker's compensation insurance, you must report your actual hours worked. Your supervisor has been advised of the hour reporting requirement as well.

Timekeeping is done via the online Leave Time Reporting system, LTR. You will receive instructions on using the system after you submit a volunteer service agreement and it is approved.

A Note For International Volunteers

Volunteer service is under the jurisdiction of federal immigration law as well as federal and state employment law. Federal immigration authorities have interpreted volunteer service in research laboratories as employment. As such, foreign nationals are only permitted to volunteer if their visa type authorizes work.

You may volunteer in the Department if your visa type is F1, H1B, J1, J2 with work permit, or TN.

You MAY NOT volunteer in the Department if your visa status prohibits work in the United States. Visa types subject to this rule include B1, B2, F2, H4, and TD. You also MAY NOT volunteer while your application for a visa status that provides work eligibility is pending.

International volunteers are strongly encouraged to consult with the International Scholars Office to ensure that their visa type permits volunteer work.

Getting Started

Please work with your PI/Supervisor to provide the following to Laura Wright (lew3@u.washington.edu):

- Your name, your supervisor's name
- A description of your duties
- Your service start/end dates and approximate working schedule
- A completed Lab Volunteer Checklist, accompanied by the following items:
 - A completed "Volunteer Service Agreement"
 - A completed UW Medicine Privacy, Confidentiality, and Information Security Agreement

Keys/Access Cards

Volunteers are permitted to have lab access privileges between 9AM and 6PM, Monday-Friday. If your volunteer schedule necessitates after hours or weekend access, please make arrangements with your supervisor to be escorted into the building.

Please coordinate your service schedule to coincide with building hours.

Please return the HSB Access card to the front desk when your volunteer service ends.

A Final Word

Volunteer service is intended to be purely altruistic and of primary benefit to the volunteer. It is not intended to be a way out of paying deserving employees a fair salary for their work.

You may find the following "volunteer service test" of help in determining whether or not you are engaged in a true volunteer service situation. If you suspect that your laboratory service, or the expectations of your supervisor/PI, is similar to those of a regularly paid employee, please get in touch with Laura Wright (lew3@u.washington.edu) right away.

- Do you provide your services for civic, charitable or humanitarian purposes? (yes: volunteer, no: employer/employee)
- Do you provide your services on a strictly voluntary basis, with no direct or indirect pressure by the employer, with no promise of advancement and no penalty for not volunteering? (yes: volunteer, no: employer/employee)
- Are the activities predominately for your own benefit? (yes: volunteer, no: employer/employee)
- Are you performing work that would otherwise be performed by regular, paid employees? (no: volunteer, yes: employer/employee)
- Do you expect any compensation either now or in the future for these services, either in the form of pay or academic credit? (no: volunteer, yes: employer/employee)
- Is your commitment of time insubstantial in relation to the hours of those paid lab employees? (yes: volunteer, no: employer/employee)

Personal Use of University Facilities, Computers, and Equipment by University Employees

(Approved by the President by authority of Executive Order No. 2)

1. Policy

University facilities, computers, and equipment are to be used to support its teaching, research, service, and administrative functions. University employees may not use state resources (including any person, money, or property) under their official control or direction or in their custody, for personal benefit or gain, or for the benefit or gain of any other individuals or outside organizations. This prohibition does not apply to the use of state resources that are reasonably related to the conduct of official state duties or the use of resources that promote organizational effectiveness or enhance job-related skills and do not interfere with the employee's performance of official state duties.

a. Examples of Allowed Use

Examples of uses consistent with the University's mission and reasonably related to the conduct of official state duties or promotion of organizational effectiveness or enhancement of job-related skills include but are not limited to the following:

- Occasional use of University computing resources to review University online job postings and submit online applications for University employment opportunities.
- Communication with appropriate other University employees to convey greetings and announcements, and to build interpersonal rapport (e.g., birthday greetings, birth announcements, carpool solicitations, and social opportunities).
- Announcement of and participation in social gatherings to acknowledge accomplishments of colleagues or celebrate holidays and events (e.g. retirement parties and holiday gatherings).
- Development of competency in the use of information technologies and computer resources.
- Personal student classroom work done outside of normal work hours.
- Occasional notices of charitable activities such as blood drives and special events.
- Coordination of the Combined Fund Drive.
- De minimis use of University resources by University Research Employees in connection with outside professional work related to their research and technology transfer.

b. Criteria for Limited Personal Use

Occasional limited personal use of University facilities, computers, and equipment, including email and Internet access, is permitted only if all five of the following conditions are met (per [WAC 292-110-010](#)):

- There is little or no cost to the state;
- Any use is brief;
- Any use occurs infrequently;
- The use does not interfere with the performance of any other state employees' official duties; and
- The use does not compromise the security or integrity of state property, information, or software.

The following are examples of permissible personal use of facilities, computers, and equipment if the use meets the conditions above:

- Electronic communication with children and dependents.
- Scheduling personal appointments.
- Personal use of computers for listening to news and music at employee's workstation so long as it does not interfere with computer access for official use and as authorized by a supervisor.
- Use of games, during breaks, that an employee does not personally install on a University computer.

2. Responsibility for Policy and No Expectation of Privacy

University employees may make independent assessments, consistent with this policy, of the permissibility of the use of University facilities, computers and equipment for other than official state job purposes. University employees are encouraged to consult with and seek approval from their supervisors when they are uncertain about the permissibility of a use of University resources, facilities, computers, or equipment. Supervisors at all times retain discretion to restrict uses of state resources, facilities, computers, and equipment in response to concerns regarding an employee's work performance or use of University facilities, computers, and equipment that exceeds the permissible uses outlined in this policy.

In making their decisions to make personal use of University computers and equipment, employees are reminded that there should be no expectation of privacy with regard to the use of University communication technologies (e.g., email, facsimile transmissions, voicemail, and Web sites visited). For example, communications resulting from University computers and equipment may be subject to disclosure under the Public Records Act. in litigation

involving the University, or for audit purposes.

3. Non-University Activity

University policy permits faculty, librarians, and academic personnel to engage in outside professional work, subject to the specified limits ([University Handbook, Volume 4, Part V, Chapter 6](#)). Professional and classified staff may engage in outside work activity as well, provided such activity does not intrude into their University obligations and job performance or conflict with the proper discharge of their official duties ([Administrative Policy Statement 47.3](#)).

The use of University resources including facilities, computers, and equipment for the conduct of outside work is **strictly prohibited**, except as allowed in [Section 3.c](#) below for approved outside work by University Research Employees. Using University property for private financial gain may be a misappropriation of state funds, a violation of the state's ethics law, and could enable state employees to compete unfairly with private businesses. Activities that are considered University service rather than outside work, but nonetheless may result in the award of an honorarium to the employee, are not subject to the prohibition on the use of University resources.

a. Prohibited Use of Resources

University resources, including facilities, computers, and equipment, may **not** be used for the following purposes:

- Conducting an outside business or private employment or other activities conducted for private financial gain.
- Supporting, promoting, or soliciting for an outside organization or group unless otherwise provided by law and University policy.
- Assisting an election campaign, promoting or opposing a ballot proposition or initiative, or lobbying the state legislature.
- Advertising and selling for commercial purposes.

In addition, University resources, including facilities, computers, and equipment, may not be used in any manner that is in violation of University, state, or federal laws, rules, or policies, or to violate the rights of any third party.

Examples of restrictions on the use of University resources, facilities, computers, and equipment include but are not limited to the following:

- University offices or laboratories may not be used as a place of business for an employee's outside enterprise.
- University telephone numbers and addresses, including email and Web addresses, may not be used or listed regarding an employee's outside business.
- The use of University affiliations and titles in connection with an outside business must clearly acknowledge the independent nature of the employee's outside work from his or her University responsibilities.
- University stationery and other office or consumable supplies may not be used by an employee in the conduct of an outside business.
- University computing resources and laboratory equipment may not be used by an employee for the conduct of an outside business or to promote an outside business.
- Personal use of any University resources, computers, or equipment to support political activities (such as assisting a campaign for election, promoting or opposing a ballot proposition or initiative, or lobbying members of the state legislature), even though not for remuneration, is not permitted.
- Personal use of University resources, computers, equipment, or consumables that have been removed from the University or other official duty stations, is not permitted even if there is no cost to the state (e.g., use of University tools or equipment for home improvement projects).
- Personal use of University resources, computers, or equipment for product sales, even though not for remuneration, is not permitted (e.g., online book sales or referral links to book publishers or sales houses).
- University computing and Internet resources may not be used in violation of federal copyright law.

b. Allowable Use of Resources

The University does possess unique laboratory or other equipment or facilities, which, by their very nature, should be available to private businesses for testing or examining proprietary products. When such situations arise, authorization for the usage must be approved through normal departmental processes (see [Administrative Policy Statement 59.5](#)). The fair rental value of the facilities, computers, and equipment requested, including costs and overhead, must be established by the dean or vice president.

c. De Minimis Uses by University Research Employees

In order to encourage the ethical transfer of technology for the economic benefit of the state of Washington, the Washington Legislature enacted 2005 Wash. Laws Ch. 106 ("2005 Ethics Act Amendment"), which amended the Washington State Ethics in Public Service Act ("Ethics Act") to allow the University to develop, adopt, and implement, upon approval by the Governor, administrative processes that apply in place of the obligations imposed on universities and University Research Employees under specified sections of the Ethics

Act. This policy on the Personal Use of University Facilities, Computers, and Equipment by University Employees has been adopted by the University and approved by the Governor in accordance with the provisions of the 2005 Ethics Act Amendment codified at RCW [42.52.220](#)(1) and [42.52.360](#) (2)(c).

Notwithstanding [Section 3.a](#) of this policy, [RCW 42.52.360](#) (2)(c) allows the University to permit acceptable de minimis uses of University facilities and other resources by University Research Employees for the purpose of conducting outside work activities that are related to their research and technology transfer, or are incidental thereto. The Ethics Act recognizes that limited use of University resources by University Research Employees for outside work purposes does not undermine public trust and confidence and can advance the mission of the University. This policy section clarifies and provides guidelines regarding what limited uses are permitted.

"University Research Employee" has the meaning stated in [RCW 42.52.010](#)(21) and as further interpreted under the applicable University policies:

- For faculty, librarians, and academic personnel: [Outside Professional Work Policy](#);
- For professional and classified staff: [Administrative Policy Statement 47.3](#), "Outside Consulting Activities and Part-time Employment by Professional or Classified Staff Employees."

University Research Employees may use their personally assigned University resources (such as offices, telephones, and computers) as well as email accounts, general University computer networks, Internet connections, and the library to conduct outside work activities that are related to their research and technology transfer, or are incidental thereto, subject to the following conditions:

- Prior to making such use in connection with outside work, the work is approved in accordance with University policies and procedures governing outside work: *University Handbook, Volume 4, Part V, Chapter 6* and [Administrative Policy Statement 47.3](#), whichever is applicable.
- There is little or no additional cost to the University;
- Any use is reasonable in duration and frequency and is the most effective use of time or resources;
- The use does not interfere with the performance of the official duties of either the University Research Employee, other University employees, or students;
- The use does not disrupt or distract from the conduct of University business due to volume or frequency;
- The use does not disrupt other University employees and does not obligate them to make unauthorized uses of University resources;
- The use does not compromise the security or integrity of University property, information, or software; and
- The use does not violate any other University policy.

The following are examples of limited uses of University resources for approved outside work by University Research Employees that are permitted under Section 3 of this policy if reasonable in duration, frequency, and impact on University business operations:

- Making a local or toll-free call on a personally assigned University telephone to discuss an approved outside work matter.
- Using a personally assigned University computer and email account to correspond about an approved outside work matter.
- Meeting in a personally assigned University office with an outside work client to discuss an approved outside work matter.
- Drafting a report or preparing a speech or presentation on a personally assigned University computer to be submitted as part of an approved outside work activity.
- Using an optical microscope personally assigned to and located in a faculty member's office to view a slide relating to an outside work matter.
- Using resources acknowledged by a supervisor to be personally assigned, where the use meets the above limited use conditions.
- Using publicly available information or research data from the University to carry out approved outside work.
- Doing research for an outside work project using University Internet access and the University library, providing no additional charges are incurred.

The following are examples of uses of University resources for outside work by University Research Employees that are **not** permitted under Section 3 of this policy:

- Incurring long-distance or other toll charges on a University telephone to discuss an outside work matter.
- Using University-purchased consumables to conduct outside work.
- Obtaining assistance from other University employees or University students to carry out or discuss an

outside work project.

- Using University laboratories, laboratory supplies, or hardware to conduct experiments or carry out projects for outside work.
- Using equipment that is not personally assigned or is not located in the personally assigned office to conduct outside work.
- Running tests, assays, or analyses on University laboratory equipment.
- Using University cost centers (i.e., services for which there is a charge) for tests, assays, or analyses that are part of an outside work assignment.
- Transferring or using University-owned intellectual property as part of an outside work assignment.

4. Reporting Violations of the Policy

University employees are directed to [Administrative Policy Statement 47.10](#), "Policy on Financial Irregularities and Other Related Illegal Acts," with regard to their obligation to report misuse of University resources, facilities, computers, and equipment. Employees who violate published University policies regarding the personal use of University resources, facilities, computers, and equipment, or policies regarding outside work and conflict of interest are subject to appropriate disciplinary or corrective action, including dismissal.

5. State Investigation and Enforcement Authority

The state Executive Ethics Board has the authority to investigate allegations of improper use of state resources (per [RCW 42.52.360](#)), and it is charged with enforcing laws and rules prohibiting state workers from improperly using state resources. The Executive Ethics Board's determinations and actions are independent of any disciplinary or corrective action taken by the University.

6. Additional Information

For additional information and clarification on the regulation of the use of state resources, University employees are directed to the [Executive Ethics Board Web site](#) and the [Ethics Training Course Material](#) on the UW Internal Audit Web site.