Policy 3.2: Emergency Management Policy

Purpose

The purpose of this Policy is to address emergency issues that may arise in the operation of the Iosco-Arenac District Library ("Library"). This Policy addresses medical emergencies, weather, and other safety emergencies.

Policy 3.2.1: Weather Emergencies

A. Tornado

a. Tornado Watch: If there is a tornado watch in effect, the Library is not required to take any action. However, the Branch Manager or his/her designee shall listen to the weather radio and monitor any change in conditions until the watch has ended.

b. Tornado Warning: If there is a warning or the sirens are activated, Library staff members must advise patrons to seek shelter. In most libraries the safest place would be a hallway without windows or the bathrooms. Library staff must be sure that all patrons are advised and then seek shelter themselves. Use arms to protect head and neck. Patrons and Library staff should remain in place until the warning is over.

B. Snow and Other Inclement Weather

With the input from the District Director or his/her designee, the manager of each branch has the authority to close their branch in the event of snow or other inclement weather related closing. The decision may be based on the conditions of the roads and parking lots, the forecast and availability of Library staff to operate the library. The Library Manager shall notify patrons if it is not safe to leave the Library. A sign shall be posted on the door notifying patrons of the closing.

Policy 3.2.2: Opioid Antagonist Administration

Purpose

The purpose of this Section of the Policy is to establish guidelines and procedures governing the administration and use of any Opioid Antagonist by the Library.

Definitions

A. **Act.** The "Act" shall mean the Administration of Opioid Antagonist Act, 2019 PA 39.

B. **Employee or Agent.** "Employee or Agent" means any of the following:
   a. An individual who is employed by, or under contract with, the Library.
   b. An individual who serves on the Library Board of the Library.
   c. An individual who volunteers at the Library.

C. **Gross Negligence.** "Gross Negligence" means conduct so reckless as to demonstrate a substantial lack of concern for whether an injury results.

D. **Opioid Antagonist.** "Opioid Antagonist" means naloxone hydrochloride or any other similarly acting and equally safe drug approved by the United States Food and Drug Administration for the treatment of drug overdose.

E. **Opioid-related Overdose.** "Opioid-related Overdose" means a condition, including, but not limited to, extreme physical illness, decreased level of consciousness, respiratory

depression, coma, or death, that results from the consumption or use of an opioid or another substance with which an opioid was combined or that a reasonable person would believe to be an opioid-related overdose that requires medical assistance.

Policy

A. **Provision of Opioid Antagonist.** As permitted by the Act, the Library shall provide and maintain on-site at the Library (including any of its branches) Opioid Antagonists to treat a case of suspected Opioid-related Overdose in the Library or on Library property.

B. **Provision of Opioid Antagonist.** The Library may purchase and possess an Opioid Antagonist for the purpose of implementing the Act. The Opioid Agent shall be stored in a secure location in each branch. Such locations shall be determined by the Branch Manager. All Library Employees or Agents trained to administer the Opioid Antagonist shall be informed of the location of the Opioid Antagonist.

C. **Distribution and Administration of Opioid Antagonist.** An Employee or Agent may possess an Opioid Antagonist distributed to that Employee or Agent and may administer that Opioid Antagonist to an individual if both of the following apply:
    a. The Employee or Agent has been trained in the proper administration of that Opioid Antagonist; and
    b. The Employee or Agent has reason to believe that the individual is experiencing an Opioid-Related Overdose.

D. **Training**
    a. Employees or Agents of the Library may be trained in the proper administration of an Opioid Antagonist.
    b. The District Director shall determine who is trained.
    c. The training shall be conducted by any person or organization that is accredited to train for the administration and use of an Opioid Antagonist.
    d. After the initial training, the District Director shall determine when supplemental or additional training should occur.

E. Procurement and Storage of Opioid Antagonist
    a. Procurement.
        i. The District Director or his/her designee will be responsible for the procurement of the Opioid Antagonist.
        ii. The Branch Manager shall replace the supply as needed and shall monitor the supply for expiration dates.
    b. Supplies. At minimum, the Library may have the following supplies:
        i. At least one (1) kit of the Opioid Antagonist at each service desk;
        ii. Gloves;
        iii. Face mask; and,
        iv. Step-by-step instructions regarding the administration.

F. **Storage** The following shall apply to the storage of the Opioid Antagonist:
    a. Opioid Antagonist will be clearly marked and stored in an accessible place at the discretion of the Library Director. The Library Director will ensure that all other relevant Library staff are aware of the Opioid Antagonist storage location.

b. Opioid Antagonist will be stored in accordance with manufacturer's instructions to avoid extreme cold, heat, and direct sunlight.
c. Inspection of the Opioid Antagonist shall be conducted regularly, including checking the expiration date found on box.

G. Use of Opioid Antagonist

a. **911.** Any Library Employee or Agent shall call 911 immediately.
b. **Use; Protocol.** After calling 911 and if necessary, in case of a suspected Opioid-related Overdose, the Library Employee or Agent may administer the Opioid Antagonist. If administered, the Library Director or other trained Employee or Agent shall follow the protocols outlined in the Opioid Antagonist Training (see attached) to prepare and administer the Opioid Antagonist. The protocol for the administration of the Opioid Antagonist is attached as Exhibit A to this Policy and is considered incorporated as part of this Policy. The protocol shall be reviewed and updated if required after additional training.
c. **Incident Report.** The Library Employee or Agent who calls 911 and/or administers the Opioid Antagonist shall complete an incident report in the form approved by the District Director. The report shall not be released unless in conformance with the Library Privacy Act or required by law.

H. Immunity

a. **Civil Liability.** As stated in the Act, the Library and an Employee or Agent that possesses or in good faith administers an Opioid Antagonist as provided by law is immune from civil liability for injuries or damages arising out of the administration of that Opioid Antagonist to an individual under the Act if the conduct does not amount to Gross Negligence that is the proximate cause of the injury or damage.
b. **Criminal Liability.** The Library and an Employee or Agent of the Library that possesses or in good faith administers an opioid antagonist is not subject to criminal prosecution for purchasing, possessing, or distributing an Opioid Antagonist under the Act or for administering an Opioid Antagonist to an individual under the Act.
c. **Immunity by Law.** The immunity provided by the Act is in addition to any immunity otherwise provided by law.

Policy 3.2.3: Emergency Requiring Automated External Defibrillator Use

Purpose

The purpose of this Section of the Policy is to establish guidelines and procedures governing the administration and use of an Automated External Defibrillator ("AED") by the Library.

Definitions: As used in this Section:

A. **Act.** The "Act" shall mean The Liability of Certain Persons for Emergency Care Act, 1963 PA 17.

B. **Employee or Agent.** "Employee or Agent" means any of the following:
   a. An individual who is employed by, or under contract with, the Library.
   b. An individual who serves on the Library Board of the Library.
   c. An individual who volunteers at the Library.

C. **Gross Negligence.** "Gross Negligence" means conduct so reckless as to demonstrate a substantial lack of concern for whether an injury results.

Policy

A. The Library shall provide and maintain on-site at the Library (including any of its branches) AEDs to treat a victim who is experiencing sudden cardiac arrest. The AED shall only be applied to a victim who is not responding, not breathing, or not breathing normally and has no signs of circulation, such as normal coughing, breathing or movement.

B. **Training.** Employees or Agents of the Library may be trained in the proper administration of the AED. The Library Director shall determine who is trained. The training shall be conducted by any person or organization that is accredited to train for the administration and use of an AED. The Library shall attach the protocol for the administration of the AED as Exhibit A to this Policy and the description of who may require the use of the AED. After the initial training, the Library Director shall determine when supplemental or additional training should occur.

C. Procurement and Storage of the AED
   a. Procurement.
      i. The District Director or his/her designee will be responsible for the procurement of the AED.
      ii. The Library Director shall replace the supply as needed and shall monitor the supply for expiration dates.

D. State of Readiness.
   a. The Library Director shall be responsible for the following:
      i. Assuring that the AED is maintained in a state of readiness and documenting such maintenance.
      ii. Ensuring that the AED is registered with an EMS agency and provide any updates to the agency as needed.
      iii. Making sure that Library staff know the location of the AED.
      iv. Placing instructions next or near the AED indicating how to use the AED.
      v. Notifying EMS whenever the AED is used.
      vi. Checking the AED for readiness after each use and as recommended by the manufacturer, whichever is earlier. This includes making sure the battery

is charged, that the electrode packets are not expired, and any other maintenance recommended by the manufacturer.

vii. Documenting all maintenance.

E. Use of AED

a. **911.** Any Library Employee or Agent shall call 911 immediately.

b. **Use; Protocol.** After calling 911 and if necessary, in case a person is not responding, not breathing, or not breathing normally and has no signs of circulation, such as normal coughing, breathing or movement, the Library Employee or Agent may administer the AED. If administered, the Library Director or other trained Employee or Agent shall follow the protocols outlined in the AED Training (see attached) to prepare and administer the AED. The protocol for the administration of the AED is attached as Exhibit A to this Policy and is considered incorporated as part of this Policy. The protocol shall be reviewed and updated if required after additional training.

c. **Incident Report.** The Library Employee or Agent who calls 911 and/or administers the AED shall complete an incident report in the form approved by the Library Director. The report shall not be released unless in conformance with the Library Privacy Act or required by law.

F. Immunity

a. **Civil Liability.** As stated in the Act, the Library and an Employee or Agent who in good faith administers an AED or instructs others to use the AED as provided by law is immune from civil liability for injuries or damages arising out of an act or omission in rendering emergency services using an AED to an individual under the Act if the conduct does not amount to Gross Negligence or willful and wanton misconduct.

b. **Immunity by Law.** The immunity provided by the Act is in addition to any immunity otherwise provided by law.

Policy 3.2.4: Bomb Threat

If a message comes during Library hours that an explosive device is set to detonate in the building, follow these procedures:

A. **Keep Person on Phone.** The person taking the message needs to keep the phone line open so the call can be traced. Be alert for clues about the caller, if possible.

B. **911.** Signal someone else to call 911.

C. **Evacuation.** Direct everyone to leave the building immediately. Direct everyone to move as far away from the building as possible, but leave the driveway open for the police/fire department to arrive as quickly as possible.

Policy 3.2.5: Fire or Suspicious Package

A. **911.** Call 911 immediately.

B. **Evacuation**. Tell patrons to leave the building and walk as far as possible from the building, without blocking the driveway or parking lot. Room must be made for the fire trucks to arrive as quickly as possible.

Policy 3.2.6: Medical Emergencies

A. **Application.** The provision applies to serious injuries or potentially life-threatening medical emergencies unless otherwise specifically provided in this Policy (such as opioid and AED related emergencies).

B. **Call 911.** The Library staff should call 911 for medical emergencies. The Library Director or his/her designee should use his/her judgment to call even if the patron does not want 911 to be called. Library staff should clear out of the area to allow emergency first responders to have access to the patron.

Policy 3.2.7: Blood Borne Pathogens

A. **Application.** When contact with blood or other potentially infectious bodily fluids may result, all human blood and bodily fluids are to be treated as if known to be infectious or contain blood borne pathogens.

B. Containment.

a. Quarantine. If human blood, bodily fluids, or other potentially infectious materials ("Infectious Material") are present at the Library, the Infections Material and the surrounding area must be quarantined. The Library Director shall determine whether the presence of Infectious Material requires closing the Library.

b. Personal Protection Equipment. Personal protection clothing, such as gloves and masks, shall be provided and used in the cleanup and safe disposal of Infectious Material. The Library may hire a hazardous/contaminated cleanup company.

C. **Cleanup.** The Library shall follow all rules or protocols developed by the State of Michigan or local health department to address cleanup of an Infectious Material.

Policy 3.2.8: Infectious Disease

A. **Purpose.** In the event of an infectious disease outbreak, the Library will take proactive steps to protect the Library, Library staff and patrons to ensure that library services are provided.

B. **Safety Measures.** During an outbreak, the Library will:

a. Cleaning Protocols. The Library will establish and follow reasonable cleaning protocols, including the regular cleaning of objects and areas that are frequently used, such as bathrooms, public computers, breakrooms, conference rooms, door handles, and railings. This may include removing objects and material from the public areas and wiping down surfaces after Library programming.

b. Personal Responsibility. We ask all patrons to cooperate voluntarily in taking steps to reduce the transmission of infectious disease in the Library. The best strategy remains the most obvious – frequent hand washing with warm, soapy water; covering your mouth whenever you sneeze or cough; and discarding used tissues in wastebaskets. The Library will also install alcohol-based hand sanitizers throughout the Library. During an infectious disease outbreak, it is critical that

patrons do not enter the Library while they are ill and/or experiencing symptoms such as fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills and fatigue. Currently, the Centers for Disease Control and Prevention ("CDC") recommends that people with an infectious illness such as the flu remain at home until at least 24 hours after they are free of fever (100 degrees F or 37.8 degrees C) or signs of a fever without the use of fever-reducing medications. Symptoms may vary depending upon the infectious disease.

C. **Director's Role; Authority.** Because each infectious disease outbreak may have unique or different issues, the District Director (or other person appointed by the Library Board) will monitor and coordinate events around a specific infectious disease outbreak. The District Director has the authority to:
    a. Cancel or Limit Services. The District Director may cancel or limit programs or services to ensure the safety and security of Library staff and patrons. This includes cancelling scheduled meetings held in any Library meeting room. The District Director shall use reasonable efforts to post notices of the program changes and cancellations, including posting notices at the Library and on the Library's website.
    b. Library Closure. The District Director has the authority to close the Library for up to seven (7) days during any infections disease outbreak. The Library Board shall meet during that time to determine whether to (1) reopen the Library or (2) extend the closure time period. The District Director shall use reasonable efforts to post notices of the closure, including posting notices at the Library and on the Library's website.
    c. Additional Protocols. The District Director has the authority to establish additional protocols such as disinfecting borrowed materials before they are recirculated. The Library Director shall post notices in the Library of the additional protocols.
    d. Consultation. The decision to cancel or limit services, including closing of the Library or adopting additional protocols, may be based on recommendations made regarding the outbreak by the CDC, local health officials or the Library Board.
D. **Sick Patrons.** Patrons who arrive at the Library with symptoms of the infections disease outbreak may be sent home in accordance with this Policy. Only the Library Director or his/her designee shall have the authority to require a sick patron to leave the Library. Any patron may appeal the decision within ten (10) business days of the date of removal by sending a written letter to the Library Board.

Policy 3.2.9: Incident Reports

For any emergency, except a weather-related emergency, the Library Director shall require an incident report to be completed.