



Safety Manual

Approved by the Board of Directors: February 08, 2017

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SAFETY POLICY STATEMENT

Easter Seals recognizes the importance of safety and health and is committed to providing a safe workplace for its employees.

The Safety/ Joint Loss Management Committee have been established to ensure the safest possible environment for Easter Seals employees, its customers and volunteers. It is the responsibility of the Safety Committee to review and monitor ongoing Easter Seals safety issues and procedures.

Easter Seals considers safety a major priority. All employees should perform every function in the safest possible manner. It is the responsibility of all employees to report any potential safety hazard or unsafe act immediately to their supervisor or a representative of the Safety Committee.

To that end, as part of its Safety and Health Program, Easter Seals, through the Safety Committee and Management, will:

- Provide safeguards to the maximum extent that is possible.
- Conduct a program of health and safety inspections to identify and eliminate unsafe working conditions or practices.
- Provide training to its employees in health and safety practices.
- Conduct regular reviews of health and safety policies and practices and update as necessary, to ensure compliance with established regulations.
- Investigate accidents/injuries to consider the cause as a means to prevent a recurrence.

This manual contains information to help employees understand the Agency's safety and health program and expectations. However, the provisions in this manual are not intended to create, and do not create, contractual obligations with respect to any matters covered in the manual or with regard to any employee's employment.

EASTER SEALS

POLICY: Risk Management Committee & Safety/Joint Loss Management Committee
SECTION: 1-2 to 1-3
PAGE: ONE OF TWO
ORIGIN DATE: DECEMBER 1, 1998
REVISED DATE: FEBRUARY 08, 2017
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The Risk Management Committee is comprised of active Easter Seals management staff, the Occupational Health and Wellness Nurse Manager, and the Senior Vice President of Facilities. The Safety/Joint Loss Management Committee is comprised of active Easter Seals' employees and management representatives and includes representation from Easter Seals various departments, facilities and satellite operations. All the agency's facilities are divided into groups with a designated liaison representing each group. Safety/Joint Loss Management Committee membership consists of the designated liaisons, the Occupational Health and Wellness Nurse Manager, and the Senior Vice President of Facilities. Each facility also has a safety representative who is responsible for communicating with the designated liaison of his/her group and making sure the safety audit is completed each quarter.

The Safety/Joint Loss Management Committee shall work with the Risk Management Committee to develop and maintain agency safety program goals and objectives, disseminate safety information to employees, establish and monitor specific safety programs and ensure proper safety training is provided to all employees.

Easter Seals recognizes that the Safety/Joint Loss Management Committee plays an important role in the overall safety program. To that end, under the direction of the Senior Vice President of Facilities, and in concert with the Human Resource Department, the Safety/Joint Loss Management Committee members will assist with programs emphasizing workplace safety and developing alternative work programs that encourage employees to return to work. Additionally, the Committee will participate in safety inspections at least quarterly for the purpose of hazard identification.

The Safety/Joint Loss Management Committee will meet at least quarterly and shall make the minutes of each meeting available for review by all employees. Reports from the Committee will be provided to the Senior Management team on a quarterly basis, or as needed. The minutes will be posted on employee bulletin boards and will be available on the shared drive.

Members of the Safety/Joint Loss Management Committee will serve a term as established by the Committee which will be represented by equal membership of employees and management or, in the alternative, more employees. Attendance at each meeting is mandatory. If a member is unable to attend, a substitute must attend in his/her place. This rule is important for the purposes of continuity and information dissemination.

EASTER SEALS

POLICY: Risk Management Committee & Safety/Joint Loss Management Committee
SECTION: 1-2 to 1-3
PAGE: TWO OF TWO
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The Safety/Joint Loss Management Committee shall elect a chairperson who will serve a term as established by the Committee. The chairperson position shall be rotated between employee and management members.

The information outlined below highlights the responsibilities and expectations on the part of Management, Supervisors, Employees and Safety/Joint Loss Management Committee members to ensure a safe work environment. Easter Seals asserts it is the responsibility of the following to ensure the safety of all employees.

Management Responsibility

- Provide the support necessary to ensure a safe and healthy work environment.
- Ensure personal protective equipment is available to employees whose job functions require its use.
- Institute safety through training, monitoring and use of disciplinary actions, as appropriate.

Supervisors' Responsibility

- Ensure that employees receive necessary training for performing their jobs safely.
- Take immediate action to correct any hazardous conditions or unsafe employee actions.
- Ensure that personal protective equipment is available and ensure that staff are trained in its use.

Employees' Responsibility

- Adhere to all safety rules, policies and procedures.
- Report all accidents/incidents to their supervisor and/or the Occupational Health and Wellness Nurse Manager.
- Report knowledge of hazardous conditions to their supervisor, a member of the Safety Committee or the Occupational Health and Wellness Nurse Manager.
- Use personal protective equipment when job functions require its use.
- Attend all required training sessions.
- Use common sense and care to prevent injury to him/herself and/or to others. Horseplay or practical jokes are not permitted.

Safety Committee

- Assist management in developing and maintaining appropriate safety programs.
- Review and update the Safety Manual and corresponding policies and procedures.
- Coordinate Committee meetings, training programs and facility inspections.

Risk Management Committee

EASTER SEALS

POLICY: **Employee Safety Rules**
SECTION: **1-4**
PAGE: **ONE OF ONE**
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Chairperson of the Safety/Joint Loss Management Committee Responsibilities

- Coordinate and schedule Committee meetings, at least quarterly.
- Oversee and coordinate the record of meeting minutes and all other pertinent data.
- Oversee and coordinate the selection of Committee members to ensure that the Committee is representative of the various programs and locations.
- Maintain Safety Manual to ensure it is up-to-date and current for all locations.
- Ensure corrective action is taken on all reported recommendations.
- Submit Committee reports to the Risk Management Committee.

Easter Seals recognizes the importance of providing a safe and healthy work environment for its employees. To that end, the following highlights the responsibilities and expectations.

Employees Shall.....

- Not perform any task they feel is unsafe.
- Wear clothing appropriate to the job.
- Use personal protective equipment for job functions which require its use.
- Immediately report all unsafe working conditions and unsafe practices by co-workers.
- Not smoke on the property of any Easter Seals buildings. Employees also must respect and follow smoking restrictions of other employer worksites.
- Cooperate with members of the Safety/Joint Loss Management Committee.
- Not deliberately destroy Easter Seals property.
- Never use defective tools or equipment and report any such item to a supervisor for immediate corrective action.
- Be responsible for putting equipment and supplies away when finished with their tasks.
- Keep their work areas free of clutter and shall keep walkways, aisles, entrances and exits clear at all times.
- Practice proper housekeeping.
- Conform to the agency safety policies and other vehicle safety rules when operating an Easter Seals vehicle transporting consumers or operating your own vehicle for Easter Seals purposes.
- Abide by any work rules specific to their worksite or satellite location.
- Be responsible for attending and completing all required safety training programs as prescribed by Easter Seals work rules.
- Not misuse Easter Seals equipment or supplies.
- Keep the floor free of tripping hazards such as telephone cords, electric extension cords, and paper cartons.
- Pull out only one drawer of a file cabinet at one time in order to avoid its tipping over (unless the cabinet is securely fastened to the wall or other cabinets).
- Store material on shelves carefully to prevent falling. Place heavy objects on lower shelves.
- Never put broken glass or other sharp objects directly in wastepaper containers. Also chemicals, batteries or matches should not be discarded with waste paper. Use the special container provided.
- Never use boxes, chairs, etc. in place of step stools.

EASTER SEALS

POLICY:	Disciplinary Policy
SECTION:	1-5
PAGE:	ONE OF ONE
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Safety and health policies are incorporated as routine ways of doing business in our daily operations. To reinforce the importance of these policies, failure to comply with the safety practices may warrant disciplinary action. As stated in Easter Seals Personnel Policy Handbook, Easter Seals recognizes that corrective action can take the form of discussion, written notice, suspension and termination of employment depending on the nature and seriousness of the violation. Easter Seals need not follow any particular process and may skip any of these forms of corrective action. Employees are expected to adhere to established policies, procedures and standards in the course of performing their job tasks.

EASTER SEALS

POLICY:	Training
SECTION:	1-6
PAGE:	ONE OF ONE
ORIGIN DATE:	DECEMBER 1, 1998
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Easter Seals acknowledges the need for training to support a safe work environment. Easter Seals supports safety training for its employees through the use of both internal and external training resources.

Training programs offered through Easter Seals include, but are not limited to the following:

- CPR;
- First Aid;
- Fire Prevention;
- Personal Protective Equipment;
- Defensive Driving;
- Blood Borne Pathogens (infection control programs);
- Back Injury Prevention;
- De-escalation and Physical Intervention Techniques;
- Human Resource Department Orientation.

Attendance at many of these training programs is mandatory depending on the department and the exposure to certain risks. Orientation by the Human Resource Department, which includes trainings mandated by OSHA, is required of all new employees.

EASTER SEALS

POLICY:	General Information
SECTION:	1-8
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Due to the large number of people who come in and out of Easter Seals facilities on a daily basis it is the responsibility of all staff to take routine safety precautions.

Offices should not be left unattended. In the event that it is necessary to leave an office unattended the door should be closed and locked. Employee vehicles should be locked when unattended with all valuables removed.

If a person is seen loitering in the building(s), looks lost, or suspicious, staff should approach him/her politely and inquire if he/she needs assistance. If he/she has no reason to be in the building he/she should be asked to leave. If staff feels uncomfortable when approaching someone or if the individual resists leaving the building when asked, employees are encouraged to ask supervisor staff for assistance.

EASTER SEALS

POLICY: Infection Control Policy
SECTION: 2-1 to 2-5
PAGE: ONE OF FIVE
ORIGIN DATE: DECEMBER 1, 1998
REVISED DATE: SEPTEMBER 19, 2011
REVIEW DATE: FEBRUARY 08, 2017
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Easter Seals maintains an environment to help prevent the growth and transmission of infection. Easter Seals' policies shall encompass both general policies and specific program policies mandated by licensure and certification and Easter Seals' policy shall be adhered to in all facilities and programs. Medical oversight/approval of policies will be provided by a designated Physician.

Definitions

BLOOD: Human blood, human blood components and products made from human blood.

CONTAMINATED: The presence, or the reasonably anticipated presence, of blood or other potentially infectious materials on an item or surface.

DECONTAMINATED: The use of physical or chemical substances to remove, inactivate or destroy blood borne pathogens on a surface or item to the point it is no longer capable of transmitting infectious particles.

ENGINEERING CONTROLS: Controls within the workplace that isolate or remove the blood borne pathogens and reduce the risk of exposure.

EXPOSURE INCIDENT: A specific contact with potentially infectious materials through eye, mucous membrane, non-intact skin, or skin puncture that results from the performance of an employee's duties.

HAND WASHING FACILITIES: A facility providing an adequate supply of running water, soap, and single use towels. If water is not available antiseptic cleansers will be made available.

OCCUPATIONAL EXPOSURE: Reasonably anticipated skin, eye, mucous membrane, or parental contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.

OTHER POTENTIALLY INFECTIOUS MATERIALS: Refers to the following human body fluids: semen, vaginal secretions, saliva, sputum, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids.

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POLICY: Infection Control Policy
SECTION: 2-2 to 2-5
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PARENTERAL: Means piercing mucous membranes or the skin barrier through such events as needle sticks, human bites, cuts, and abrasions.

PERSONAL PROTECTIVE EQUIPMENT (PPE): Specialized clothing or equipment worn by an employee for protection against a hazard (i.e. gloves, face mask, goggles, gown).

STANDARD PRECAUTIONS: An approach to infection control that considers all human blood and certain other body fluids as potentially infectious for HIV, Hepatitis B or other blood borne pathogens.

UNIVERSAL PRECAUTIONS: Practice of avoiding contact with body fluids by means of wearing non-porous articles such as gloves, goggles and face shields.

Methods used to control infection will include, but not be limited to:

- Post job offer and pre-employment, each new employee will complete the Medical Health Questionnaire. Those required by program regulation will present a statement indicating satisfactory completion of a physical exam signed by a physician or other licensed health practitioner.
- Employees may be required to furnish Easter Seals with a statement from a physician or other Agency recognized qualified professional attesting to the employee's physical and/or mental capacity for continued employment in the employee's current position.
- Some programs, in order to comply with licensing requirements, may require ongoing physical examinations.
 - STS drivers: DOT requires a physical exam every 2 years.
 - Adolescent Residential Programs staff require a physical exam every 3 years.
 - Childcare staff require a physical exam every 3 years.
- TB testing: When required by program licensing agencies, employees will either be required to show results of a TB screening prior to the start of employment or have the TB screening as part of the new hire process. Subsequent TB screenings will be conducted in accordance with program licensing requirements. The TB screening will be conducted by the Agency, or an outside organization/clinic contracted by the Agency at no cost to the employee.

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POLICY: Infection Control Policy
SECTION: 2-3 to 2-5
PAGE: THREE OF FIVE
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- Easter Seals will provide employees with annual in-service training in control of infectious diseases. This will include but not be limited to:
 - Universal/Standard Precautions;
 - Handling of Biohazardous Materials;
 - Post-exposure Procedures.
- Easter Seals will offer, free of charge, Hepatitis B immunization to all employees considered at occupational risk. Generally this includes all employees who have direct care responsibilities.
- All employees are responsible for recognizing potentially infectious situations and refer such condition(s) to the program supervisor and/or the Occupational Health and Wellness Nurse Manager.

General Policies

- Each department that provides direct care services must maintain written policies pertaining to infection control. These policies will include:
 - Cleaning of equipment, laundry and food preparation areas;
 - Disposal of hazardous materials;
 - Other terms deemed necessary by the supervisor or Safety Committee
- All infection control policies will be reviewed at least annually.
- All staff will adhere to Universal Precautions.
- Each department is responsible for providing the necessary supplies to staff for adherence to Universal Precautions. (This may include gloves, hot water, antibacterial soap, protective eyewear, plastic bags for the disposal of non-hazardous materials, and RED bags, or Sharps Containers for the disposal of hazardous materials.)
- ALL SHARPS (needles, finger sticks, broken glass, etc.) will be disposed of in appropriate, secured containers labeled "BIOHAZARD". Easter Seals will provide self-covering/safety-lock syringes to be used whenever possible. All work-related needle sticks will be recorded on the OSHA 300 Log in compliance with OSHA regulations.
- Disposable products will be used only one time and disposed of after use.

EASTER SEALS

POLICY: Infection Control Policy
SECTION: 2-4, 2-5
PAGE: FOUR OF FIVE
ORIGIN DATE: DECEMBER 1, 1998
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- Infectious material shall be disposed of in a RED BAG or SHARPS container clearly labeled as BIOHAZARD. Contact Easter Seals Senior Vice President of Facilities for the storage of infectious material and to arrange for disposal. (*Materials needing to be RED bagged are those materials which are soiled enough to release blood or other fluid.*)
- Potentially infectious material (blood or other body fluids which contain blood) is a safety and infection hazard.
 - Any mishap or spill must be cleaned up immediately, or as soon as feasible.
 - Easter Seals will provide *Blood Spill Kits* in all facilities.
 - Each department is responsible for maintaining these kits, informing employees of the location of each kit, and ensuring that employees know how to properly utilize the kit.
 - Materials contaminated with *small amounts* (soiled not enough to release blood or other fluids) of potentially hazardous waste can be discharge into the general garbage collection system.
 - Material contaminated with potentially hazardous waste must be double bagged before discharged into the general garbage collection system.
- All staff will wear shoes except when specific activity precludes it (e.g. working on a mat or an asleep overnight). All aquatic therapy staff are required to wear aqua shoes and footwear is recommended for all staff when in pools, lakes or ponds.
- Consumers will wear shoes except when the nature of the diagnosis, treatment or activity warrants removal.
- All Easter Seals refrigerators will be cleaned out every Friday. Each department will:
 - For refrigerators that contain any client food, monitor the temperature on a weekly basis and keep a record.
 - Ensure that all food is stored at 40 degrees or less in the refrigerator and 0 degrees or less in the freezer.
 - Food will not be stored in a refrigerator containing biological samples such as blood or urine.

EASTER SEALS

POLICY: Infection Control Policy
SECTION: 2-5
PAGE: FIVE OF FIVE
ORIGIN DATE: DECEMBER 1, 1998
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- When any staff or customer comes to Easter Seals whose health is questioned in terms of infection or communicable disease this individual will be brought to the attention of the program Vice President, Department Director, program Medical Director, Occupational Health and Wellness Nurse Manager, and/or the Chief Human Resources Officer as appropriate, who will make a decision based on regulatory statute, agency policy, consultation with the local department of public health (where appropriate), or in the best interest of the individual and facility.

- Each department will maintain policies and procedures as mandated by individual licensing/certification requirements. (Examples: laundry, dish washing, food storage, medication procedures).

EASTER SEALS

POLICY:	Tuberculosis Screening Policy
SECTION:	2-6
PAGE:	ONE OF ONE
ORIGIN DATE:	DECEMBER 1, 1998
REVISED DATE:	JANUARY 27, 2007
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Purpose

The purpose of the policy is to protect all employees and customers by the early detection of exposure to Tuberculosis.

- When required by program licensing agencies, employees will either be required to show recent (within the past six months) results of a TB screening prior to the start of employment or have the TB screening as part of the new hire process.
- Subsequent TB screenings will be conducted in accordance with program licensing requirements. The TB screening will be conducted by the Agency, or an outside organization/clinic contracted by the Agency at no cost to the employee.
- All TB screening will be done with PPD (Mantoux Test). Results are to be evaluated within 48-72 hours after the test is given. A TB test not evaluated in this time period will have to be repeated.
- All employees with a newly positive PPD will be reported to the appropriate Board of Health as required by law. The employee will be immediately released from work and referred for further evaluation. She/he may not return to work until there is documentation of a negative chest x-ray, or treatment has begun and medical clearance provided.
- Any employee with a history of positive PPD will complete the Tuberculosis Questionnaire. If the employee indicates any positive response to the questionnaire, she/he will be treated as with a positive PPD screening.
- Consumers receiving treatment at Easter Seals may be requested to have a TB screening according to program policy. Consumers identified with active TB will be admitted to Easter Seals programs after appropriate medical treatment is initiated and medical clearance documented.

EASTER SEALS

POLICY:	Hepatitis B Policy
SECTION:	2-7
PAGE:	ONE OF ONE
ORIGIN DATE:	DECEMBER 1, 1998
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Purpose

Easter Seals is committed to providing a safe and healthy work environment for all employees. For this reason and to meet the Standards required by OSHA regulations, Easter Seals will:

- Provide training in the following subjects:
 - Blood borne diseases and how they are spread;
 - The exposure control plan, including post exposure evaluation and follow-up;
 - Engineering and work practice controls, including personal protective equipment;
 - Hepatitis B vaccine;
 - How to respond to emergencies involving blood and other potentially infectious bodily fluids;
 - Signs and labels used to warn of potential hazards.

- Provide Hepatitis B vaccinations, at no cost, to those employees considered at risk for occupational exposure (as defined in the Infection Control Policy).

- This vaccination program will be offered within 10 days of the start of employment. Any employee may refuse to take part in the vaccination program. In this situation, the employee must sign a waiver. If at a later time the employee decides to take advantage of the vaccination program it will be offered at no cost to the employee. Employees should request the vaccination program through their supervisor or the Occupational Health and Wellness Nurse Manager.

EASTER SEALS

POLICY:	HIV Policy
SECTION:	2-8 to 2-9
PAGE:	ONE OF TWO
ORIGIN DATE:	DECEMBER 1, 1998
REVISED DATE:	JULY 1, 2002
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Purpose

To provide employees and customers of Easter Seals with information and guidelines for dealing with issues related to HIV(Human Immunodeficiency Virus).

Overview

Easter Seals recognizes that until a cure or vaccine for HIV is discovered, members of the public and employees will have special concerns regarding the disease. Since experience with this disease confirms that HIV is not spread by casual person-to-person contact it is appropriate that all members of the public be treated with equal care and respect. Easter Seals encourages compassion for those with a serious or chronic medical condition or terminal illness (including HIV). Persons who have or who are perceived to have HIV will not be denied or limited access to Easter Seals services, programs, or public facilities. Easter Seals will maintain as personal and confidential all medical information relating to an individual's HIV status or other health condition.

Easter Seals further recognizes that employees may have specific concerns relating to HIV and their particular job function. Easter Seals will provide protective equipment to appropriate groups, as well as ongoing education on HIV and preventive measures to be followed, to insure that transmission does not occur in the workplace.

For the purpose of this policy, any individual with HIV or conditions associated with the HIV virus shall be defined as follows:

- Any person diagnosed as having the medical condition known as "Acquired Immune Deficiency Syndrome" (AIDS), which is in accordance with the Center for Disease Control case definition.
- Any person who is antibody or culture positive for HIV (the HIV virus).

Education

Easter Seals recognizes the importance of a well-informed workforce for the provision of appropriate services to the public. All employees are encouraged to attend free Easter Seals sponsored educational presentations about HIV and the HIV virus.

EASTER SEALS

POLICY:	HIV Policy
SECTION:	2-8 to 2-9
PAGE:	TWO OF TWO
ORIGIN DATE:	DECEMBER 1, 1998
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Personnel Issues

Easter Seals is committed to providing all employees a safe workplace. In this regard, every effort will be made to ensure that any employee illness does not pose a health or safety risk to other employees. There is no medical basis for employees refusing to work with fellow employees or customers who are infected with the HIV virus. Nevertheless, the concerns of these employees should be taken seriously and should be addressed with appropriate information and counseling. If concerns continue, the matter should be referred to the Chief Human Resources Officer or the Occupational Health and Wellness Nurse Manager for review and guidance.

As long as an employee is able to perform the duties of his/her position and medical evidence indicates an individual's medical condition is not a direct threat to him/herself or others the individual may continue to work. Any employee known to have HIV or conditions associated with HIV who is able to continue safe and effective work performance shall be entitled to remain in the same job classification and work location unless the employee's physician or the Agency's designated physician makes a finding that this would endanger the health of the public, the employee or his/her co-workers. If such a finding is made, efforts will be made to modify the employee's duties based on the medical recommendations of the employee's physician and an Easter Seals designated physician.

No employee or candidate for employment shall be required to submit to an HIV test as a condition of maintaining or beginning employment with Easter Seals. Employees who have had an exposure incident will be strongly encouraged to have follow-up testing to determine HIV antibody status subsequent to the incident. The same strict confidentiality requirements that apply to any medical disclosure regarding an employee or candidate for employment will be followed for HIV-related incidents.

Customers and employees may be discharged due to unmanageable loss of body functions and/or if their primary physician deems that they are at risk due to unavoidable exposure to everyday viruses and bacteria.

EASTER SEALS

POLICY: Universal/Standard Precautions Policy
SECTION: 2-10
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Universal precautions are a set of techniques that are intended to prevent the transmission of infection, disease or illness. All human blood, deep body fluids, or fluids with visible blood are treated as if known to be infectious for HIV, HBV, HCV or other pathogens. These are practical, simple techniques, including the use of personal protective equipment (PPE), which should be incorporated into everyday routines.

- a. Hand washing is the single most effective, and most frequently neglected, infection control practice. The hand washing procedure itself is simple.
 1. The hands should be vigorously lathered with an antibacterial soap and rubbed together for at least thirty seconds.
 2. The hands should be rinsed under a moderate sized stream of water at a comfortable, warm temperature and dried with paper towels.
 3. Paper towels are used to turn off the faucet.
- b. Disinfect equipment and surfaces soiled with blood or body fluids.
 - 1) The area must be washed clean of any visible soil.
 - 2) Disinfect with a bleach solution of ¼ cup bleach to 1-gallon water.
 - This solution is only potent for 24 hours.
 - Mix at time of use.
 - If mixed daily the container must be labeled with date/time/initials, content and hazards associated.
 - 3) In the event of a major contamination the area must be cleaned and then flooded with disinfectant for 20 minutes or use of wipe twice method using PPE
 - a) Clean item/surface with absorbent towels.
 - b) Spray item/surface with disinfectant and wipe dry.
 - c) Spray item/surface with disinfectant a second time and wipe dry.
 - 4) Commercial products used for general cleaning purposes must contain chlorine bleach or an EPA veridical.
 - c. Personal protective equipment includes all equipment which protects from direct contact with potentially infectious materials. This includes disposable gloves, gowns, masks and protective eyewear/face shields.
 - 1) Gloves shall be worn when likely to touch body fluids.
 - 2) Gloves are changed after each client contact and may not be reused or used if torn.
 - 3) Masks and goggles or face shields are worn when there is risk of splashing.
 - 4) Gowns should be worn in the event of a large spill and contamination of clothes is likely.
 - 5) Clothing contamination should be reported promptly to the supervisor. The following actions should be taken:
 - a) Evaluate to determine if an exposure incident may have occurred.
 - b) Change of clothing provided to the employee.
 - c) Contaminated clothing bagged for transport to washer for decontamination.

EASTER SEALS

POLICY: Infectious Materials Management Policy
SECTION: 2-11
PAGE: ONE OF ONE
ORIGIN DATE: DECEMBER 1, 1998
REVISED DATE: JULY 1, 2002
REVIEW DATE: FEBRUARY 08, 2017
APPROVED BY: BOARD OF DIRECTORS

To handle incidents involving spills of blood and other potentially contaminated body fluids in such a way as to reduce risks of infection for staff and consumers. Spills of blood and other potentially contaminated body fluids will be cleaned immediately, or as soon as feasible, after an incident. Universal Precautions will be followed.

Contents of a Blood Spill Kit

- Plastic pail;
- Non sterile latex/vinyl gloves;
- Bleach (sodium hypochlorite);
- 2 cup measuring cup;
- Roll of paper towels;
- Plastic garbage bags and Biohazard red bags;
- Container of super absorbent powder;
- Small plastic dust pan and brush;
- Personal Protective Equipment (gown, mask, goggles, bonnet, booties).

Bleach Solution

- ¼ cup bleach per 1 gallon of water (or EPA approved virocidal) **** to be freshly prepared for each use****

Clean up Procedure

- Use non-sterile latex/vinyl gloves and other appropriate protective equipment.
- Sprinkle a blood spill with a super absorbent powder (follow directions on container).
- Using the dustpan and brush in the kit, sweep up all jelled material. Dispose of material in double plastic bag. If material is grossly contaminated with blood a Biohazard marked red bag will be used.
- Using a bleach solution flood the area and allow to sit for 20 minutes. Clean up with paper towels and dispose in a double plastic bag.
- For soiled laundry, pre-rinse and then wash separately with bleach and detergent.
- Remove protective equipment in this order; top layer of gloves, mask, goggles, bonnet, booties, gown, and second pair of gloves. All but the goggles are disposed of in the double plastic bag.
- Using a clean pair of gloves wash the pail, goggles, dust pan and brush in a utility sink with soap and hot water and then wipe with the bleach solution. The dustpan and brush should soak in bleach solution for 20 minutes. Allow to dry before returning to blood spill kit.
- Throw away the gloves and wash hands well with antibacterial soap and hot water.

EASTER SEALS

POLICY: Exposure Control Plan
SECTION: 2-12 to 2-14
PAGE: ONE OF THREE
ORIGIN DATE: DECEMBER 1, 1998
REVISED DATE: FEBRUARY 08, 2017
REVIEW DATE: FEBRUARY 08, 2017
APPROVED BY: BOARD OF DIRECTORS

Easter Seals is committed to providing a safe and healthy work environment for all its employees. This policy is to provide Easter Seals employees, who are at risk of occupational blood borne exposures. Staff who provide direct support to our customers (including but not limited to Residential Instructors, Paraprofessionals, Direct Support Associates, Medical and Dental Staff, Child Care Workers, Teachers and Teachers Assistants), may be at risk for occupational exposures. This would exclude administrative staff that are in facilities with little or no customer contact. The following guidelines are intended to eliminate or minimize possible exposure and to detail post-exposure procedures.

All tasks and procedures in which there is a risk of occupational exposure to blood, deep body fluids, or body fluids with visible blood (such as, but not limited to, providing personal care and administering first aid), are covered by this policy in conjunction with the Universal Precautions Policy, Infection Control Policy, and Personal Protective Equipment Policy.

- All employees will follow Universal Precautions
- All care staff will be provided with the personal protective equipment required to follow Universal Precautions. Employees will be trained in the appropriate use of the personal protective equipment.
- Latex/vinyl gloves will be worn when the employee is at risk of coming in hand contact with infectious material, blood, non-intact skin, mucous membranes, or contaminated surfaces/materials (i.e. dressings, clothing contaminated with urine, feces or blood).
- All Easter Seals employees will be provided with yearly training sessions in infection control policies, infectious diseases, and Bloodborne Pathogens; including HIV, TB and Hepatitis B, and a review of Universal Precautions and the Exposure Control Plan.
- All employees, considered to be at occupational risk, as defined as direct support personnel, will be offered Hepatitis B immunizations as outlined in the Hepatitis B policy and in accordance with OSHA regulations.

Engineering and Work Practice Controls

- It is the responsibility of all employees to identify any potential work practice controls and report to their Supervisors in an effort to reduce the risk of percutaneous injuries from contaminated sharps.

Post –Exposure Procedures

- Any individual involved with a parental (puncture of the skin with a sharp or human bite) or mucosal exposure to potentially infectious material will immediately inform the department supervisor. The wound will be cleansed/treated as appropriate and an Incident/Injury Report will be completed.
- The supervisor, in consultation as necessary with the Occupational Health and Wellness Nurse Manager or other medical personnel, will determine if a blood exposure has occurred.

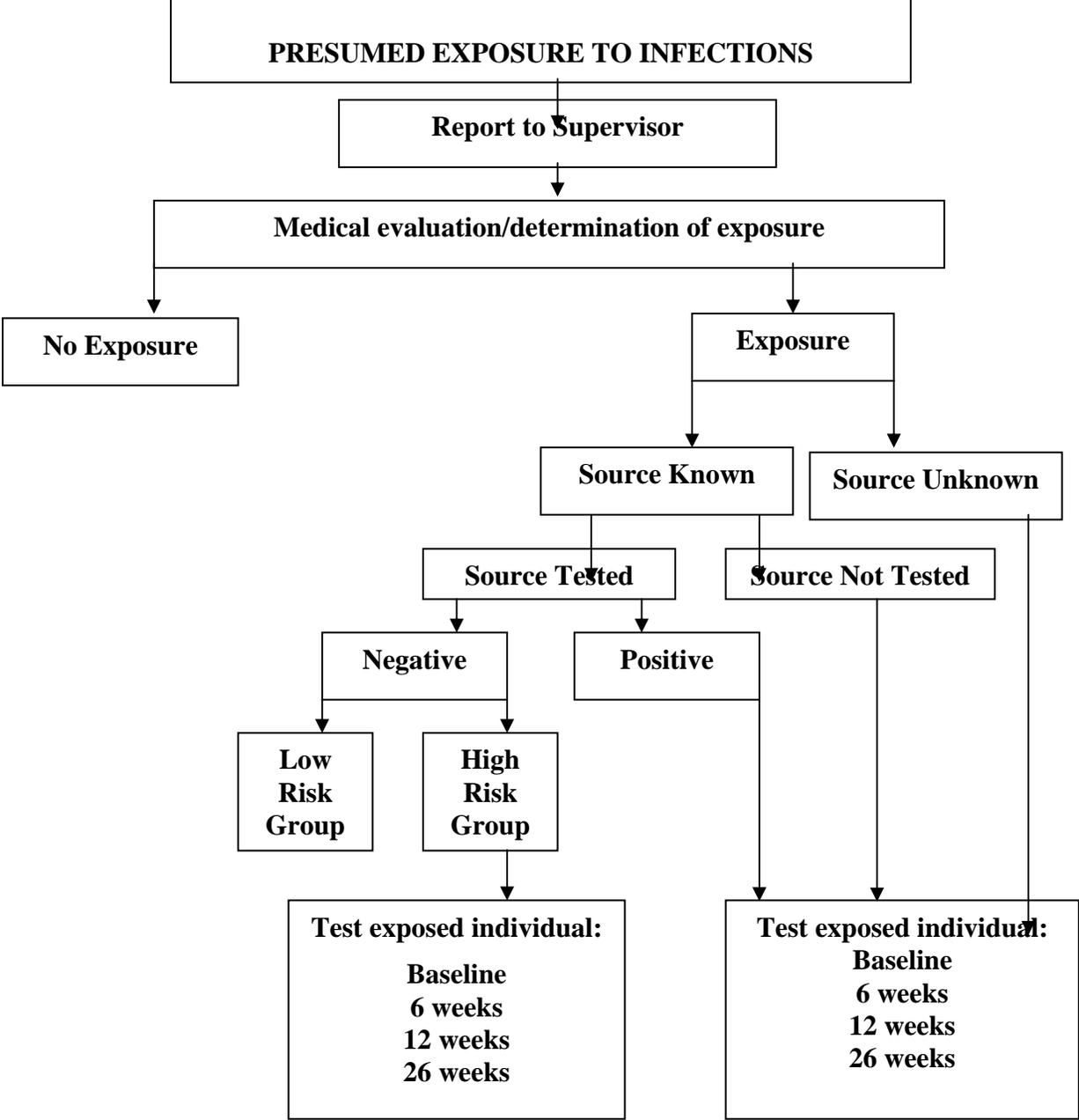
EASTER SEALS

POLICY:	Exposure Control Plan
SECTION:	2-12 to 2-14
PAGE:	TWO OF THREE
ORIGIN DATE:	DECEMBER 1, 1998
REVISED DATE:	JULY 1, 2002
REVIEW DATE:	FEBRUARY 08, 2017
APPROVED BY:	BOARD OF DIRECTORS

- If a blood exposure has occurred the individual will be referred for medical evaluation. Easter Seals will provide follow-up as prescribed by the treating physician. This follow-up will include re-offering of the Hepatitis B vaccination if waived, other vaccinations as ordered, and post-exposure lab work as ordered by the treating physician and with the individual's consent. The physician providing the post-exposure evaluation will provide Easter Seals a written opinion within 15 days of the evaluation.
- The supervisor or designated Easter Seals health care professional will also meet with the customer, his/her guardian, if appropriate, or other involved employee, to review Easter Seals' Exposure Policy and request permission to have that individual tested for HIV, Hepatitis B, Hepatitis C in accordance with OSHA regulations.
 - If consent is obtained and testing completed, the results of this testing will be made available to the employee involved in the exposure incident as mandated in the OSHA Blood Borne Pathogens regulations. At Easter Seals this procedure occurs by meeting with the Occupational Health and Wellness Nurse Manager or other designated health care professional, to review the results of the testing.
 - If consent is not obtained from the customer, his/her guardian or other involved employee, the employer shall establish that legally required consent cannot be obtained.
- The exposed employee may be referred for further counseling if indicated.
- The results of any customer or employee blood testing for HIV, Hepatitis B or Hepatitis C are confidential information and must be treated as such. Breach of this confidentiality is grounds for termination of employment as outlined in the Agency's personnel policies.
- A Post-exposure Report will be completed. The Post-exposure Report will document the route of exposure, the circumstances under which the exposure occurred, what follow-up treatment was given, and when feasible or not prohibited by state or local law, the identification of the source individual.
- The original Post-exposure Report will be maintained in the employee's confidential medical file. Results of all lab work will be made known to the employee. The employee will maintain confidentiality regarding results of the source individual's blood tests for HIV/Hepatitis B/Hepatitis C. Results of all lab work will be placed in a sealed envelope and securely stapled to the Post-exposure Report.
- All Post-exposure Reports are confidential and will be treated as such. Post-exposure Reports will be maintained for the duration of the employee's employment plus 30 years per OSHA regulations (paragraph (H) (I) (IV)).

**When Program licensing regulations exceed these guidelines, follow the regulations of the licensing agency.

PROTOCOL FOR EXPOSURE FOLLOW-UP



****Baseline testing should be completed within 24 hours of the presumed exposure**

EASTER SEALS

POLICY: Bed Bugs
SECTION: 2-15 to 2-16
PAGE: ONE OF TWO
ORIGIN DATE: JANUARY 1, 2014
REVISED DATE: FEBRUARY 7, 2014
REVIEW DATE: FEBRUARY 08, 2017
APPROVED BY: BOARD OF DIRECTORS

Bed Bug Policy Statement:

Easter Seals is committed to providing a safe and healthy workplace for all of our staff members. Unfortunately, bed bug infestations are becoming more common and can be transported into programs, buildings, etc.

Education:

Easter Seals encourages all staff to familiarize themselves with the identification of bed bugs. Adult bed bugs are visible but the nymphs (the youngest ones and the eggs) are very small in size. Eggs are glued to objects by female bed bugs. It is important to remember that bed bugs are nocturnal, they crawl, they do not fly, and they only spend 10% of their lives feeding. They like to be in areas where people rest (beds and recliners) and they stay mostly in cracks and crevices. The Center for Disease Control had excellent information on bed bugs and can be viewed at: <http://www.cdc.gov/parasites/bedbugs/> .

Guideline for Control and Prevention:

Home visits:

If Staff identify signs of bed bugs while on a home visit with families or learn of a bed bug infestation, decisions will be made on a case by case basis regarding future services provided.

- o Family may be requested to provide name of exterminator providing treatment and/or evidence treatment has been completed.
- o Family may be requested to present themselves to an Agency location or outside area (i.e. park) for future services.

While on home visits, do not take personal belongings into the home. This includes but not limited to; bags, purses, briefcases and coats.

While on home visits be smart about where you sit. Sit on a hard chair or bring a portable stool. Avoid couches and other upholstered furniture, especially if these are doubling as a sleeping area.

Set belongings on a table or solid surface floor.

Staff bringing activities into the home are encouraged to use plastic bags or containers for toys/activities and plastic table covers or mats as a play area on the floor.

EASTER SEALS

POLICY: Bed Bugs
SECTION: 2-15 to 2-16
PAGE: TWO OF TWO
ORIGIN DATE: JANUARY 1, 2014
REVISED DATE: FEBRUARY 7, 2014
REVIEW DATE: FEBRUARY 08, 2017
APPROVED BY: BOARD OF DIRECTORS

Protect your car by placing all items in a plastic storage container with an airtight lid. Vacuum your car after the home visit. Using a commercial carwash vacuum cleaner will prevent you from contaminating your personal vacuum. If you use your personal vacuum suck up some talcum powder prior to and immediately after vacuuming. Remove the vacuum cleaner bag outside and seal it in a plastic bag. Dispose of the vacuum bag in an outside trash receptacle.

Inspect yourself before getting into your car. You may also want to keep an extra set of clothes and shoes in your vehicle. Put contaminated clothes into a sealed plastic bag or tote. Then place the clothes directly into your dryer. Dry clothes for 20 minutes on medium heat. Steam heat is also effective.

Staff is expected to appropriately clean and disinfect all items before use in next home visit.

On-Site:

Keep all areas as uncluttered as possible. Clean regularly, paying extra attention to upholstered furniture and/or bedding, wall mounted items (clocks, pictures, mirrors) and bookcases.

Discourage and limit unnecessary cloth items being brought into facility.

If client's home is *known* to have a bed bug infestation or the client/family reports an infestation, place client's belongings (handbag, coat, etc) into a plastic tote with an air tight lid.

Request that client provide an extra set of clothes. These can be treated by putting in a dryer on medium heat for 20 minutes.

EASTER SEALS

POLICY:	Outside Service Providers/Independent Contractors
SECTION:	3-1
PAGE:	ONE OF ONE
ORIGIN DATE:	DECEMBER 1, 1998
REVISED DATE:	JANUARY 27, 2007
REVIEW DATE:	FEBRUARY 08, 2017
APPROVED BY:	BOARD OF DIRECTORS

Easter Seals recognizes its responsibility to ensure that Outside Service Providers/Independent Contractors are apprised of hazards to which they may be exposed while working with the Agency. It is the responsibility of the Manager engaging the Outside Service Provider/Independent Contractor to ensure that information is disseminated.

Likewise, Easter Seals has the right to request from its Outside Service Providers/Independent Contractors information regarding specific safety procedures and work practices associated with their services.

EASTER SEALS

POLICY: Hazard Communications Programs
SECTION: 3-2 to 3-4
PAGE: ONE OF THREE
ORIGIN DATE: DECEMBER 1, 1998
REVISED DATE: DECEMBER 31, 2013
REVIEW DATE: FEBRUARY 08, 2017
APPROVED BY: BOARD OF DIRECTORS

In order to comply with OSHA 1910.1200 Hazard Communication Standard, the following written Hazard Communication Program has been established for Easter Seals.

All satellites of Easter Seals are included within this program. The written program will be available at Auburn Street and in an accessible designated location at each satellite for review by any interested employee.

A. Container Labeling

The Senior Vice President of Facilities and his/her designated alternate will verify that all containers received for use are clearly labeled to indicate:

- The identity of the contents (the identity must match the corresponding SDS);
- Appropriate hazard warnings (including routes of entry and target organs, if known);
- The name and address of the manufacturer, importer or responsible party.

The Manager/Supervisor in each program will ensure that all secondary containers are labeled with either an extra copy of the original manufacturer's label or with generic labels which have the identity of the substance and the hazard warning. For help with the labeling, please see the Senior Vice President of Facilities or the Occupational Health and Wellness Nurse Manager.

The Senior Vice President of Facilities will review Easter Seals' labeling system quarterly and update as required.

B. Safety Data Sheets (SDS)

Each site is responsible for having an SDS sheet for each toxic and hazardous substance used (i.e., cleaning, maintenance, office supplies). It will be the responsibility of the employee making the purchase to obtain the SDS. SDS's may be obtained through the product's website or by calling or writing the manufacturer (check the product label for contact information). In addition, a copy of each SDS must be provided to the Senior Vice President of Facilities for review prior to use of a non approved ESNH product. SDS's will be available to all employees in their work area for review during all work hours. If SDS's are not available or new chemicals in use do not have SDS's, immediately contact the Senior Vice President of Facilities or the Occupational Health and Wellness Nurse Manager.

EASTER SEALS

POLICY: Hazard Communications Programs
SECTION: 3-2 to 3-4
PAGE: TWO OF THREE
ORIGIN DATE: DECEMBER 1, 1998
REVISED DATE: DECEMBER 31, 2013
REVIEW DATE: FEBRUARY 08, 2017
APPROVED BY: BOARD OF DIRECTORS

Copies of SDS's for all toxic and hazardous substances to which employees of Easter Seals may be exposed will be kept with the Facilities Department as well as at each satellite office.

The Senior Vice President of Facilities will be responsible for obtaining and maintaining the data sheet system. Employees may access the data sheet system ("ES SDS info page") which lists all the toxic and hazardous substances used within the Agency along with the phone numbers that can be called for emergencies or questions regarding those substances.

The Senior Vice President of Facilities will review incoming data sheets for new and significant health/safety information. S/he will ensure that any new information is passed on to the affected employees.

C. Employee Training and Information

The Senior Vice President of Facilities, or designated staff is responsible for the employee-training program. S/he will ensure that all elements specified below are carried out.

Prior to starting work, each employee of Easter Seals will attend a health and safety orientation and will receive information and training on the following:

- An overview of the requirements contained in the OSHA Hazard Communications Standard 1910.1200;
- Chemicals present in his/her workplace;
- Location and availability of the Agency's written hazard communication program;
- Physical and health effects of the toxic or hazardous substances;
- Methods and observation techniques used to determine the presence or release of toxic and hazardous substances in the work area;
- How to use toxic and hazardous substances in the safest possible manner, including safe work practices and personal protective equipment requirements;
- Steps the Agency has taken to lessen or prevent exposure to toxic and hazardous substances;
- Emergency procedures to follow if s/he is exposed to these toxic and hazardous substances;
- How to read labels and review SDS's to obtain appropriate hazard information;
- Location of SDS file and location of toxic and hazardous substances list.

After attending the training class each employee will sign a form to verify that s/he attended the training, received the written materials and understood Easter Seals' Hazard Communication policies.

EASTER SEALS

POLICY:	Hazard Communications Programs
SECTION:	3-2 to 3-4
PAGE:	THREE OF THREE
ORIGIN DATE:	DECEMBER 1, 1998
REVISED DATE:	DECEMBER 31, 2013
REVIEW DATE:	FEBRUARY 08, 2017
APPROVED BY:	BOARD OF DIRECTORS

Prior to a new chemical hazard being introduced into any work environment each employee of the work area will be given information as outlined above.

The Senior Vice President of Facilities is responsible for ensuring that SDS's on the new chemical(s) are available.

2. Lists of Hazardous Chemicals

Easter Seals will maintain a list of all known toxic and hazardous substances used by employees of Easter Seals. Information on each noted substance can be obtained by reviewing Safety Data Sheets located at Auburn St., Maintenance and the satellite offices. An online list is available on Agency Favorites list as "ES SDS info page."

3. Hazardous Non-routine Tasks

Periodically, employees are required to perform hazardous non-routine tasks. Prior to starting work on such projects, each affected employee will be given information by the Senior Vice President of Facilities and/or his/her supervisor about hazardous chemicals to which s/he may be exposed during such activity.

This information will include:

- Specific hazard;
- Protective/safety measures the employee can take;
- Measures the Agency has taken to lessen the hazard, including ventilation, respirators, presence of another employee, and emergency procedures.

4. Informing Contractors

It is the responsibility of Easter Seals employees to provide contractors the following information:

- Toxic and hazardous substances to which they may be exposed while on the job site;
- Precautions the employees may take to lessen the possibility to exposure by usage of appropriate protective measures.

Easter Seals employees will be responsible for contacting each contractor before work is started in the Agency to gather and disseminate any information concerning chemical hazards that the contractor is bringing to the Agency workplace.

EASTER SEALS

POLICY:	Employee Identification Badges
SECTION:	4-1
PAGE:	ONE OF ONE
ORIGIN DATE:	DECEMBER 1, 1998
REVISED DATE:	JANUARY 27, 2007
REVIEW DATE:	FEBRUARY 08, 2017
APPROVED BY:	BOARD OF DIRECTORS

It is the goal of management to identify staff throughout Easter Seals facilities. To that end, Easter Seals has adopted an employee identification badge program. This is just one of the many efforts taking place to address safety within Easter Seals. New Easter Seals employees will be issued picture identification at the time of hire. These badges are to be worn or in the employee's possession at all times when the employee is within any Easter Seals building or doing Easter Seals business. Employees must report lost badges to the Facilities office. A replacement badge will be issued and a fee will be charged.

EASTER SEALS

POLICY: Auto Safety and Seat Belt Rules
SECTION: 4-2
PAGE: ONE OF ONE
ORIGIN DATE: DECEMBER 1, 1998
REVISED DATE: JULY 1, 2002
REVIEW DATE: FEBRUARY 08, 2017
APPROVED BY: BOARD OF DIRECTORS

All Easter Seals employees must obey all federal, state and local motor vehicle laws and regulations when operating Easter Seals vehicles or using their own vehicle and being reimbursed for authorized travel, including all laws prohibiting distracted driving and requiring the use of hands-free technology. Employees should also familiarize themselves with the provisions relating to safe driving in the Personnel Policy Handbook.

If an employee is assigned an Easter Seals vehicle, that vehicle must be maintained in accordance with Easter Seals specifications (available through Special Transportation Services, STS). Additionally, seat belts must be worn at all times when an employee is driving an Easter Seals owned vehicle.

Customers, students or volunteers being transported by Easter Seals employees are required to use the safety restraints available with the vehicle. For the safety of every employee, Easter Seals strongly recommends every employee wear seat belts when driving his/her vehicle for both authorized Easter Seals travel and private vehicle use.

EASTER SEALS

POLICY: Worksite Air Quality
SECTION: 4-3
PAGE: ONE OF ONE
ORIGIN DATE: DECEMBER 1, 1998
REVISED DATE: SEPTEMBER 19, 2011
REVIEW DATE: FEBRUARY 08, 2017
APPROVED BY: BOARD OF DIRECTORS

Easter Seals is committed to providing a safe work place for employees. Included in this commitment is the responsibility of monitoring maintenance protocols designed to provide maximum air quality. Periodic testing and maintenance of heating, air conditioning and air exchange systems are performed. Heating, air conditioning and air exchange systems operation cycles are set for maximum efficiency. If an employee has questions or comments concerning air quality, please contact your supervisor or the Senior Vice President of Facilities.

Questions to consider when assessing air quality:

- Are ceiling tiles free from water stains?
- Is the air free of objectionable odor?
- If there is a carbon monoxide (CO) monitor, have the batteries been checked?
- Are housekeeping products stored in sealed containers or in a cabinet?
- Are dumpsters, idling cars and other potential pollutants located away from doors, windows and outside air intakes?
- Are walk-off mats cleaned regularly?
- Is the building free from past or present water issues such as roof leaks, ground water entering basement, etc.?
- In the colder months, are windows and cold surfaces free from condensation?
- Are air quality problems and/or employee complaints logged into the existing work order system to maintenance?
- Were remedial actions taken and follow-up completed?

EASTER SEALS

POLICY: Report of Injury
SECTION: 4-4 to 4-5
PAGE: ONE OF TWO
ORIGIN DATE: DECEMBER 1, 1998
REVISED DATE: FEBRUARY 08, 2017
REVIEW DATE: FEBRUARY 08, 2017
APPROVED BY: BOARD OF DIRECTORS

Any injury to employees, customers, volunteers or any person on the premises must be reported immediately (no more than twenty-four (24) hours). A work-related fatality must be reported no more than 8 hours after the incident to the Senior Vice President of Programs and the Occupational Health and Wellness Nurse Manager

Incident /Injury Report Forms may be obtained from the Human Resource office or from your supervisor.

Injury/Incident Review and Investigation

Understanding and responding to incident/injuries is vital to Easter Seals' comprehensive safety program particularly in our efforts to develop appropriate corrective action and recommendations to prevent future occurrences.

To that end, staff are encouraged to report all incidents and injuries to the Occupational Health and Wellness Nurse Manager even if the occurrence does not require medical attention or lost time from work. The Occupational Health and Wellness Nurse will evaluate the incident and may advise the employee of treatment or monitoring needs. The goal is that reporting all incidents will help the Safety Committee and Easter Seals Management with the means to better understand the number and types of occurrences identify trends, and establish appropriate responses as well as updates to policies and procedures.

The Risk Management and Safety/Joint Loss Management Committees conduct regular reviews of the injury/incident information throughout Easter Seals. That review shall include the following:

- Evaluate the hazards or exposure that led to the incident.
- Understand the causes involved.
- Develop an appropriate action plan to prevent future occurrences.
- Update the policy/procedures.
- Identify training needs.
- Identify trends that need to be addressed by Management.
- Conduct follow-up to ensure that recommendations are followed and implemented.

Reporting an incident/injury:

- Report all injuries as soon as possible. It is mandatory that the injured employee, or someone on his/her behalf, call the Occupational Health and Wellness Nurse Manager to report the incident. Fax a copy or e-mail of Incident/Injury report to the Occupational Health and Wellness Nurse Manager. (If the injured employee is unable to complete form, a supervisor or witness may do so. The injured employee should then submit his/her own form A.S.A.P.)
- The supervisor, with at least the injured employee and any witnesses, will conduct an Incident Review Process (IRP) meeting. This is to identify the root causes of the incident and corrective action. As necessary, people other than those identified above may be involved in this process.
- The Incident Review Process (IRP) needs to be completed within (3) days and submitted to the Occupational Health and Wellness Nurse Manager or as soon as the supervisor is able to communicate with the injured staff following hospitalization.
- Fax or e-mail the original to the Occupational Health and Wellness Nurse Manager.

EASTER SEALS

POLICY: Report of Injury
SECTION: 4-4 to 4-5
PAGE: TWO OF TWO
ORIGIN DATE: DECEMBER 1, 1998
REVISED DATE: FEBRUARY 08, 2017
REVIEW DATE: FEBRUARY 08, 2017
APPROVED BY: BOARD OF DIRECTORS

- If employee is to be out of work for more than (3) days an Employee Action Form (EAF) must be sent to HR.
- When an employee is treated for an injury he/she should get a copy of the State Worker's Compensation Medical Form or other appropriate documentation. A copy of this must be faxed/sent to the Occupational Health and Wellness Nurse Manager. This is the form that specifies return to work information and any restrictions the employee may have.
- An employee who has been injured and missed time from work cannot return without a work release from the treating provider.
- Any change in the employee's status needs to be reported. For example, report if the employee was on temporary alternative duty and now has been released to full duty.

EASTER SEALS

POLICY: Alternative Duty and Return-to-Work Program
SECTION: 4-6
PAGE: ONE OF ONE
ORIGIN DATE: DECEMBER 1, 1998
REVISED DATE: JANUARY 27, 2007
REVIEW DATE: FEBRUARY 08, 2017
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Easter Seals has established a temporary alternative work program which is aimed at bringing injured employees back to work as soon as possible.

A **temporary alternative duty (TAD)** program is a transitional collection of jobs or tasks that can be performed by an injured employee during his/her recovery from an injury. This program may include modified tasks from the employee's existing job, or tasks from other positions within Easter Seals. The goal of the alternative duty program is to meet the injured employee's restrictions, gradually increase the employee's work capacity, and maintain close contact with the employee while he/she is recovering.

The **temporary alternative duty** program shall be developed by the Occupational Health and Wellness Nurse Manager, and the appropriate Management representative based on the employee's physical capacity. As a general practice, in developing a temporary alternative duty program Easter Seals works closely with the Workers' Compensation carrier/administrator, the employee, and the employee's Health Care Provider to tailor the program to meet the needs/limitations of the injured employee.

This program is required by the State of New Hampshire and although it may not be required in the other states we do business in, it is Easter Seals' policy to provide temporary alternative duty to all injured employees whenever possible.

EASTER SEALS

POLICY:	Personal Protective Equipment
SECTION:	4-7
PAGE:	ONE OF ONE
ORIGIN DATE:	DECEMBER 1, 1998
REVISED DATE:	JULY 1, 2002
REVIEW DATE:	FEBRUARY 08, 2017
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Personal Protective Equipment (PPE) is intended to protect employees from potential hazards. Easter Seals recognizes that Personal Protective Equipment (PPE) provides a barrier between the employee and the specified hazard. Protective equipment includes but is not limited to such items as gloves, protective eyewear and clothing. All employees are to be trained in the proper use of protective equipment, as well as how the equipment is to be maintained, cleaned, stored and/or discarded. Easter Seals conducts regular training/orientation sessions to new employees as they begin their employment. Additionally, Easter Seals staff conducts annual training programs which are open to all staff.

Easter Seals recognizes and supports Management's responsibility to enforce the use of personal protective equipment consistently and uniformly.

EASTER SEALS

POLICY:	Emergency Action Plan and Response Procedures GENERAL PREPAREDNESS
SECTION:	4-8 to 4-10
PAGE:	ONE OF THREE
ORIGIN DATE:	DECEMBER 1, 1998
REVISED DATE:	SEPTEMBER 19, 2011
REVIEW DATE:	FEBRUARY 08, 2017
APPROVED BY:	BOARD OF DIRECTORS

Each facility will have available emergency response instructions that pertain to your worksite. The following are general instructions; you should follow instructions unique to your individual worksite.

GENERAL PREPAREDNESS

- Establish an incident command structure.
- Establish relationships with essential partners, such as law enforcement and first responders.
- Plan for monitoring and assessing factors that determine types and levels of response.
- Develop message strategies, including “hot-lines.”
- Plan to ensure provision of essential services and supplies including:
 - Food and water;
 - Shelter;
 - Medicines and medical consultations;
 - Mental health, psychological and other support services;
 - Transportation to medical treatment, if required.
- Develop training programs and drills.
- Share plan with all agency contacts such as parents, home providers, food providers, etc.
- Communicate changes and updates.
- Identify local radio and television stations to be source of broadcast communications.
- Keep emergency contact information available.
- Have out-of-town contact number for each client and employee.
- Identify back up communication plan if phone service is interrupted.
- Know mass evacuation plan for community and identify what resources will be quickly needed to quickly and safely transport clients.
- If program is near a nuclear power plant consider having Potassium Iodide available along with permission slips as necessary authorizing dispensing of the pills when ordered to do so by the state health department.
- Understand the Department of Homeland Security’s Alert System for potential acts of terrorism. Pre-determine what actions your program will take in the event the United States goes to Alert Level RED.
- Have at least one cell phone or walkie-talkie (preferred) in each building area.
- Consider purchasing and professionally installing a generator for back-up power. Realize that an adequate supply of fuel needs to be safely and properly stored.

EASTER SEALS

POLICY: Emergency Action Plan and Response Procedures
GENERAL PREPAREDNESS

SECTION: 4-8 to 4-10

PAGE: TWO OF THREE

ORIGIN DATE: DECEMBER 1, 1998

REVISED DATE: SEPTEMBER 19, 2011

REVIEW DATE: FEBRUARY 08, 2017

APPROVED BY: BOARD OF DIRECTORS

Important information to know:

- Electricity shut off and how to do it;
- Gas shut off and how to do it;
- Water shut off and how to do it;
- Air vent shut off and how to stop circulation if necessary (toxins in the air);
- Where the emergency kit, first aid kit and fire extinguishers are located;
- Where the alarm is for evacuation, if applicable;
- How to quickly reach 911 and the Poison Control Hotline.

Data Recovery Preparedness

To ensure data is recovered in the event of an emergency the following functions must be performed by the IT department:

- Backups incrementally, nightly Monday-Friday;
- Full weekly backups on Saturday;
- Back up data tapes are sent to offsite vendors;
- A battery backup must be available.

Medical Emergencies

- Check breathing and pulse before administering other first aid. In an emergency, contact medical personnel, if available, or nurse on-site.
- Administer first aid, as needed. Each facility should have an accessible first aid kit.
- If additional help is needed - call 911.
 - You will be asked if you need the Police or Fire Department.
 - Identify the emergency.
 - If transportation and/or oxygen is needed, ask for an ambulance.

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GENERAL PREPAREDNESS

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Emergency Phone Numbers

Fire/Police/Medical Emergency..... 911

Center for Disease Control..... 800-311-3435

Poison Control..... 800-222-1222

American Red Cross..... www.redcross.org

 Manchester, NH Area..... 603-225-6697

 Portland, ME Area..... 207-874-1192

 Berlin, VT Area..... 802-773-9159

Easter Seals Main Office Numbers

Manchester, NH..... 603-623-8863

Portland, ME..... 207-828-0754

Berlin, VT..... 802-223-4744

EASTER SEALS

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FIRE SAFETY

All smoke/heat detectors should be tested at least quarterly. Batteries should be replaced at least once a year and cobwebs/dust removed with a vacuum. Faulty detectors are to be replaced when needed. Smoke detectors are to be replaced once every ten years unless the manufacturer recommends replacement sooner. In residential programs smoke detectors are required in sleeping areas and must be hard wired.

Sprinkler systems will activate only in the area of the fire. Staff should be trained in turning off the sprinkler system in the event that it goes off due to being tampered with. Sprinkler systems must be tested quarterly.

The following fire hazards should be eliminated from residential environments:

- Space heaters;
- Use of kerosene for cooking or lighting;
- Rubber tubing used as connection for gas burners;
- Accumulation of combustible materials in the attic, basement, garage or other locations;
- Unsafe storage of flammable substances such as paint, varnish, oil, etc.

The following practices should be followed to prevent fires:

- Never leave anything unattended in the stove or oven.
- Never place paper near a stove, toaster, coffee maker, etc.
- Do not place hot pans, etc. on a counter or paper without the use of a hot pad.
- Irons should be turned off and unplugged when not in use.
- All small appliances should be unplugged when not in use (i.e., iron, hair dryer, toaster, coffee maker).

Reporting a Fire

If an employee discovers a fire or detects smoke he/she should:

1. Activate the alarm system by pulling the lever on the nearest fire alarm box.
2. Evacuate the customers within the area and/or the building to safety according to the evacuation map in the area.
3. Close the doors.
4. Do not reenter the building until the alarm is silenced and employees are notified that it is safe to return by a Fire Marshall or representative from the Fire Department.

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Fire Extinguisher – Location

Fire extinguishers are located in each building in easily accessible areas, especially in such areas as kitchens, garages, basements. It is the responsibility of each employee to identify the exact location of the fire extinguisher closest to his/her workstation and to know the general location of fire extinguishers throughout the building. Fire extinguisher locations will be marked on the emergency exit map.

Fire Extinguisher - Use

- Employees are encouraged to read the instructions on the fire extinguisher in their vicinity/work area.
- Become familiar with the types of fires for which that extinguisher is effective.
- Aim the extinguisher in front of the base of the fire(s); sweep from side to side working towards the base.
- Maintenance staff or a designated safety representative will ensure that the extinguishers are serviced after any use, and/or at least annually. Each month extinguishers need to be inspected to make sure they have the correct amount of pressure, are in the correct location, and are undamaged.

Fighting the Fire

Personnel in the area of the fire should take immediate steps:

- Evacuate customers, volunteers and staff.
- Control and isolate the fire by:
 - Closing doors;
 - Using the fire extinguisher, if it is a small fire;
 - Turning off electrical equipment.

Fire Marshals

- It is the responsibility of the Fire Marshal or designated representative to check every room in his/her assigned area to ensure that the area has been evacuated and to close all open doors.
- After checking rooms in their assigned areas, the Fire Marshals or designated representative will meet at the front entrance or designated area.
- When possible, Fire Marshals shall be employees of Easter Seals and members of the Safety Committee, working onsite full-time. They must be responsible and reliable. They will receive training on the evacuation procedures and other safety program(s) training.

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Alarm System

- Some locations are equipped with a fire alarm system that is directly connected to a local station.
- Buildings that do not have an alarm system should dial 911 to notify the appropriate authorities.
- Alarm systems must be inspected annually.
- When powered by electricity there must be an alternate power source with an automatic trigger present.

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EVACUATION PROCEDURE

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EVACUATION PROCEDURE

In the event of an evacuation the fire alarm will sound. If the alarm is malfunctioning word of mouth shall be used to notify staff of the evacuation. Upon this notification staff, clients and visitors are to exit the building as quickly as possible in an orderly manner through the nearest emergency exit and proceed to the pre-designated meeting area. While evacuating always check closed doors for heat before opening; if a door is hot do NOT open it.

No one is to reenter the building until it has been declared safe to reenter by the appropriate authority. If someone is missing do not reenter the building. Notify the appropriate authority or highest level administrator of the building.

In the event that the building needs to be evacuated during inclement weather take jackets, gloves, hats, boots, umbrellas and/or blankets when evacuating.

Evacuation Preparedness

- Post current and accessible written evacuation plan with at least 2 unobstructed escape routes.
- Determine which individuals may require additional assistance to evacuate during a drill or actual emergency.
- Ensure that a system is in place to account for all clients and employees (be sure daily attendance records are accurate and available). The staff census list should have a place for the staff to sign when there is an evacuation.
- Regularly practice drills, practice at different times of day, using different exit routes.
- Fire drills must be conducted once a month in buildings that provide client services.
- Conduct drills for different types of disasters.
- Include plans for relocation.
- Obtain written permission to use relocation sites.
- Inform parents, home providers, etc. of relocation sites.
- Have appropriate forms (emergency information, authorizations, etc.).
- When dealing with children have detailed documentation regarding to whom the children can be released.
- Take emergency medical supplies.
- Take cellular phone and/or walkie-talkie.

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LOCKDOWN

The decision to lockdown the facility will be made by the highest ranking administrator on the premises. Options for lockdown are full building lockdown, impacted area of the building lockdown (partial building lockdown) and evacuation for non affected parts of the building. Situations that could warrant a lockdown situation include intruder, hostage taker, civil disturbance and violent incident.

Staff will be notified of a lockdown by announcement over the loudspeaker, word of mouth from an administrator or designee or phone call.

Lockdown Procedure

- All doors and windows in the area impacted by a disturbance need to be closed and locked.
- Staff members are to report to the nearest department to find a safe room to lockdown in.
- If the department has clients, staff need to make sure that all clients are accounted for. This can be done using attendance lists.
- With full building lockdowns everyone in the building needs to observe the general lockdown procedures.
- With partial building lockdown only the part of the building that has been notified needs to follow the lockdown procedures. The part of the building that was not impacted is to be evacuated.
- A lockdown is over when notified by the highest ranking administrator or designee or police or fire department personnel.

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SHELTER-IN-PLACE

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SHELTER-IN-PLACE

Shelter-in-place simply means staying inside the building. This may be used during an accidental release of toxic chemicals or other emergencies where air quality outside is threatened. Shelter-in-place may also be used for extreme weather. Local authorities issue orders for shelter-in-place via the Emergency Alert System (EAS). Once such an order has been given no one can leave the building until there is official notification that the danger has passed. Do not walk or drive outdoors. If there are customers and visitors in the building provide for their safety by asking them to stay.

- Close and lock all doors and windows to the outside.
- Close air vents and fireplace dampers.
- Turn off all heating systems.
- Turn off all air conditioners and switch intakes to the “closed” position.
- Seal any gaps around window-type air conditioners.
- Turn off all exhaust fans in kitchens, bathrooms and any other spaces.
- Close as many internal doors as possible.
- Use duct tape and plastic sheeting or food wrap, wax paper or aluminum wrap to cover and seal bathroom exhaust and grilles, range vents, dryer vents, air vents and dampers and other openings to the outdoors to the extent possible.
- Seal any obvious gaps around external windows and doors.
- Close drapes, curtains or shades for additional protection.
- If vapors begin to bother individuals hold wet cloths over nose and mouth.
- For higher degree of protection go into bathrooms, close the door and turn on the shower in a strong spray to “wash” the air.
- If time allows change the voicemail recording of the mainline to indicate that the business is closed and that staff, clients and visitors are remaining in the building until authorized to leave. If possible turn on call forwarding so all incoming calls go to this message.
- Emergency supplies need to be brought from their storage area to the area of need.

When selecting a room for sheltering-in-place, choose a location that is easily sealed off from outdoor contact. Things to consider when selecting a location are:

- The room should be an interior room above ground level.
- It should have the fewest number of windows and vents possible.
- The room should have adequate space for everyone (if needed more than one room can be selected).

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- Avoid selecting rooms with mechanical equipment such as ventilation blowers or pipes, as this equipment may not be able to be sealed from the outdoors.
- Large storage closets, utility rooms, copy and conference rooms (without windows) work well for sheltering.
- A room with a hard-wired telephone is ideal for emergency calls if a life-threatening situation arises and cellular services are overwhelmed.

Extreme Cold Sheltering-In-Place

- Alternative heat sources shall be brought into the location.
- To conserve heat plastic shall be taped over windows located near the shelter-in-place location to seal cold air out.
- Doors near the area are to be shut and rugs, blankets and sheets are to be placed under/at the base of the door to block the flow of cold air.

Notification of Families/Emergency Contacts

If there is no imminent threat calls may be made to families or emergency contact before proceeding to the shelter-in-place location. If there is an imminent threat calls can only be made to families or emergency contacts once safely in the designated shelter-in-place area.

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OFF-SITE SHELTERING

In the event that the building cannot be occupied for safety reasons, the highest ranking administrator present at the time will be responsible for making the decision to relocate clients and staff. Identify potential evacuation sites to use in the event of a local emergency, if necessary. In the event that a disaster would strike a large area surrounding the facility, it is wise to identify a secondary site. Ensure that all contacts know the location of both sites. Emergency information and supplies need to be transported to the relocation site. If clients are leaving with a parent/guardian the identification of the parent/guardian needs to be checked to ensure the client is being released to the proper person(s).

Auburn St. Building Off-site Shelter:

- Child Development Center – Wilson St. School, Manchester, NH

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OPERATIONAL DISTURBANCE

Operational disturbances can occur from emergency situations or non emergency situations such as routine weather events (winter storms). In the event of a disturbance to operations follow the procedures relevant to the disturbance. In the event that the crisis situation impacts the department operations, it is the responsibility of the Senior VP of the program to decide if the program should close.

In an emergency situation it is important that the essential operations that need to be performed to keep the business in operation are continued. It is the responsibility of each department to identify these functions and make sure staff is aware of what needs to be done to keep the department operational.

After an emergency situation the following procedures need to be followed by appropriate personnel to get the business back on track after the disaster:

- Check for any structural damage (once the building has been cleared to enter).
- Take photos of any damage.
- Report any damage to the insurance company.
- Check for downed or damaged utilities and report any to the proper authorities.
- The President will make the decision on when operations can be moved back into the facility.
- The Development Department will create and release statements about the emergency/disaster to be released to the public.

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CHEMICAL ACCIDENTS

Chemical accidents occur when chemicals used onsite become ingested, come into contact with skin or are spilled. If a community toxic material release occurs follow the Shelter-in-Place procedure and requirements of appropriate officials. In the event that the building suffers damage from a chemical accident and operations cannot continue in a normal manner, follow the protocol for Operational Disturbance.

Ingestion & Contact with Skin or Eyes

In the event of accidental chemical ingestion or contact with skin or eyes contact Poison Control at 1-800-222-1222. If Poison Control cannot be reached procedures for dealing with ingestion or skin/eye contact may be found on the SDS. However, SDS alone should not be used as a substitute for Poison Control. Once proper medical procedures have been initiated the supervisor of the injured person needs to be notified. If need be the family/guardian or emergency contact of the injured person will be notified.

Spill

In the event of a chemical spill the person witnessing or causing the spill needs to notify their supervisor as quickly as possible. The SDS needs to be referred to for directions for clean-up. Poison Control may also be called at 1-800-222-1222 for instructions on clean up. If the chemical spilled can or will potentially cause harm to any other persons in the building, the affected area or potentially affected areas need to be evacuated. In the event that another department can continue operations without the spill impacting the department they may do so, however it is the decision of the highest ranking administrator or most qualified personnel to make this call. In the event of a spill where injury occurs Poison Control is to be called at 1-800-222-1222 and their directions are to be followed. If Poison Control cannot be reached, refer to the SDS for handling of the injury, and if possible call 911. The supervisor of the injured is to be notified and the supervisor will then decide what actions are to be followed (i.e., evacuation, continuation of operations, notification of the injured person's family, etc.). The spill is to be cleaned up after the injured person is taken care of, with clean up done according to the instructions of SDS or Poison Control.

Safety Data Sheet (SDS)

Safety Data Sheets (SDS) are located at each Easter Seals facility. The SDS will have instructions specific to the chemical involved in the accident. SDS need to be obtained for every potentially harmful chemical used onsite (i.e., cleaning, maintenance, office supplies). These sheets may be obtained directly from the manufacturer (check the product label for contact information). The SDS binder for each facility should be updated when new materials are used onsite and/or updates to the SDS's are provided by the manufacturer.

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A copy of each SDS must be provided to the Senior Vice President of Facilities, who will be responsible for obtaining and maintaining the data sheet system. Employees may access the data sheet system (“ES SDS info page”) which lists all the toxic and hazardous substances used within the Agency along with the phone numbers that can be called for emergencies or questions regarding those substances.

SDS sheets contain information on:

- Product information;
- Hazards identifications;
- Firefighting measures;
- Handling and storage;
- Physical and chemical properties;
- Toxicological information;
- Disposal considerations;
- Regulatory information;
- Composition/information on ingredients;
- First aid measures;
- Accidental release measures;
- Exposure controls/personal protection;
- Stability and reactivity;
- Ecological information;
- Transport information;
- Other information.

Emergency Action Plan and Response Procedures
CHEMICAL ACCIDENTS

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POWER FAILURE

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POWER FAILURE

In the event of power failure:

- Emergency lighting, if available, will come on automatically.
- Appropriate action will be taken to ensure customer's safety.
 - Customers should be removed immediately from the whirlpools, baths and showers.
 - In case of an electrical storm, customers should be removed from window areas and electrical appliances should be unplugged.
 - If dark use flashlights.
 - If the hallways or floors become wet, mark them as such and use mops and towels to dry the floors as much as possible.
 - If the outage occurs in winter and clients become chilled, the emergency supply of clothes and blankets may need to be used.
- Notify the electric company.
- If the power outage seems widespread listen to the radio for general instructions to the community.
- If water needs to be conserved due to the outage, limit the use of faucet water and flush toilets sparingly.
- If the power outage is temporary (a few hours) normal operations of the facility will be maintained as much as possible.
- If the power outage is ongoing (longer than a few hours) relocation may be necessary and the offsite sheltering procedure may be followed. If it is winter and there is the danger of freezing pipes, close the main water valve and open spigots and supply lines to drain them.

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LOSS OF HEAT

Any staff noticing heat loss is responsible for notifying the appropriate maintenance staff or administrator/director. That person is then responsible for contacting the heating vendor as needed. Follow the evacuation procedure if temperature falls below 45 degrees.

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LOSS/CONTAMINATION OF WATER

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LOSS/CONTAMINATION OF WATER

Any staff noticing a loss of water or water contamination is responsible for notifying the appropriate maintenance staff or administrator/director. The maintenance staff or administrator/director is then responsible for attempting to locate the source of the problem and determining if the problem is confined to the facility or is neighborhood wide. If the problem is internal the plumber is to be notified. If the problem is external the local Water Authority is to be contacted.

In the event of water contamination the designated person will:

- Contact the local Health Department. If the Health Department cannot be reached listen to the local TV or radio for details on procedure.
- Advise staff to closely supervise individuals and ensure that no one drinks or uses the water.
- Determine the expected duration of contamination and procedure for making the water safe for use. Advise the program managers of the anticipated duration of water loss or contamination.
- Assess the water supply for the facility and needs to ration available water.
- Determine the ability to maintain individuals at the location.
- If deemed necessary instruct staff to purchase bottled water or obtain water as advised by the Health Department for drinking, washing and brushing teeth.
- If necessary order evacuation of the facility.

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SEVERE WEATHER

Staff members are responsible for staying aware of when storms are approaching the area. Emergency supplies for storms and severe temperatures are to be kept up to date. They should be checked quarterly to make sure all items are functional and accounted for.

Any vehicle that is used to transport staff or clients must be safe for winter travel. Vehicle inspection must include:

- Winter tires;
- Antifreeze levels;
- Battery and ignition systems;
- Brakes;
- Exhaust systems;
- Fuel and air filters;
- Heater and defroster;
- Lights and flashing hazard lights;
- Windshield wiper fluid and windshield wipers;
- Thermostat;
- Oil.

Winter Storms

In the event of a winter storm watch:

- Listen to the weather, local radio and TV for updates.
- Be alert to changing weather conditions.
- Avoid unnecessary travel.
- Check to make sure all emergency supplies are accessible.
- ONLY the SVP of the program is authorized to make the decision to close the program. If the program closes see instructions for Operational Disturbance.

In the event of a winter storm warning:

- Staff and clients are to stay indoors during the storm.
- Be prepared to gather all emergency supplies.
- Listen to the local radio and TV for updates.
- Avoid travel.
- ONLY the SVP of the program is authorized to make the decision to close the program. If the program closes see instructions for Operational Disturbance.

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During a winter storm:

- Walkways need to be kept clear from snow.
- Rock salt needs to be put on the walkways and entrances periodically to keep them from becoming slippery.
- Keep floors dry by mopping up excess water and/or using fans to dry hard floor surfaces.
- Use wet floor signs as needed.

If you must travel during a winter storm:

- Only travel if it is absolutely necessary.
- Make sure the vehicle used is prepped for winter travel. A vehicle with a full tank of gas is the best choice.
- If possible travel during the day.
- Inform others of your destination and, if possible, the route you will be taking.
- Stay on main roads.

If you get stuck:

- Stay with your car. Do NOT try to walk to safety unless help is visible within 100 yards.
- Display a “call for help” sign. A brightly colored cloth (preferably red) tied to the antenna will work.
- To keep warm turn the car on for 10 minutes every hour (avoids running battery down).
- Keep one window away from the blowing wind open slightly for fresh air.
- Run the heater only while the car is on.
- Keep exhaust pipes clear so fumes won’t back up into the car.
- Keep the overhead light on when the car is running to increase your visibility (avoids running battery down).
- Do light exercises to keep warm.
- If alone, stay awake as much as possible.
- If more than one person is in the car, take turns sleeping.
- Huddle together with passengers for warmth.
- Use extra clothes, newspapers, blankets, maps and removable car mats to wrap your body in for extra warmth.

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EXTREME COLD

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EXTREME COLD

In the event of extreme cold staff and clients are to stay inside as much as possible. If going and traveling outside is necessary the individuals going outside are to wear (as much as possible) hat, mittens/gloves, scarf, several layers of loose fitting clothing, boots and winter jacket. Assure that all clothing remains dry.

- Time outside should be as limited as possible.
- Avoid inactivity when outside, but also avoid exertion as cold weather puts excess strain on the heart.
- Encourage consumption of nutritional liquids and high-energy foods to help prevent dehydration which can increase the chances of hypothermia.
- Be aware of the wind chill to help prevent frostbite and hypothermia.

Hypothermia

The cause is exposure to cold temperatures but can occur at 40 degrees if a person becomes chilled from rain, sweat or submersion in cold water. Symptoms in adults include: shivering, exhaustion, confusion, memory loss, slurred speech, fumbling hands, drowsiness, weakness and cold, pale skin. Symptoms in infants include: very low energy and bright red, cold skin. A person's chances of getting hypothermia are increased if they are ill, wearing wet clothing, taking medications causing vasodilation, lack subcutaneous fat, are very young in age or are very thin.

Upon noticing any of the above symptoms, take the person's temperature. If the temperature is below 95 degrees seek medical attention IMMEDIATELY. A person with severe hypothermia may become unconscious and may appear to not be breathing or have a pulse. Get emergency assistance immediately.

If medical attention is not available:

- Get the victim into a warm room or shelter.
- If the victim is in wet clothing, remove them.
- Warm the center of the body first (chest, neck, head and groin) using an electric blanket or skin-to-skin contact under loose, dry layers of blankets, clothing, towels or sheets.
- Administer warm beverages to help increase the body temperature. Do not give alcoholic beverages. Do NOT give beverages to an unconscious person.
- After the body temperature has increased keep the person dry and wrapped in a warm blanket, including the head and neck.
- Get medical attention as soon as possible.

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Frostbite

At the first sign of redness or pain in any skin area, get out of the cold or protect any exposed skin. Symptoms of frostbite include: a white or grayish-yellow skin area, skin that feels unusually firm or waxy, numbness, paresthesia (burning, prickling sensation) and severe pain, swelling, redness and blistering of the skin (in severe cases).

If signs of frostbite are detected seek medical attention IMMEDIATELY. If there are signs of frostbite but no hypothermia and medical attention is not available:

- Get into a warm room as soon as possible.
- Unless absolutely necessary, do not walk on frostbitten feet or toes (this increases damage).
- Immerse the affected area in warm, not hot, water (the water should be comfortable to the touch for unaffected parts of the body) or warm the affected area using body heat (i.e., armpit for frostbitten fingers).
- Do NOT rub frostbitten area with snow as this can cause additional damage.
- Do NOT massage frost bitten area as this can cause additional damage.
- Do NOT use a heating pad, heat lamp or the heat of a stove, fireplace or radiator for warming as affected areas are numb and can be easily burned.

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EXTREME HEAT/HEAT WAVES

During a heat emergency the following should be practiced to prevent heat related illnesses:

- Slow down.
- Stay indoors as much as possible.
- If possible go to a location with air conditioning or room sized fans. Draw the window blinds/shades to keep the room in shade.
- Wear lightweight clothing.
- Eat small meals and eat more often.
- Avoid foods high in protein which increase metabolic heat.
- Avoid foods high in salt which dehydrate the body.
- Drink plenty of water; do not wait until you are thirsty to drink.
- Avoid alcoholic or caffeinated beverages as these dehydrate the body.
- When outside apply sunscreen and wear a hat.
- Report all heat related illnesses (i.e., elevation in temperature) to medical personnel or call 911 if there is an emergency.

Heat Stroke

Any of these signs could mean you are dealing with a life threatening illness:

- Body temperature of over 103 degrees (if taken orally);
- Red, hot or dry skin (no sweating);
- Rapid, strong pulse;
- Throbbing headache;
- Dizziness;
- Nausea;
- Confusion;
- Unconsciousness.

When these symptoms occur seek medical assistance as soon as possible.

- If outside get the victim to a shady area.
- Cool the victim rapidly using whatever means available, such as immersing them in a tub of cool water or cool shower, spraying the victim with cool water from a garden hose, sponging the victim with cool water.
- Monitor body temperature and continue cooling efforts until temperature is between 101-102 degrees.

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EXTREME HEAT/HEAT WAVES

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EXTREME HEAT/HEAT WAVES

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- Do NOT give the victim fluids to drink.
- If muscle spasms result as a symptom of heat stroke, keep the victim from injuring themselves. Do not place any objects in their mouth and do not attempt to give fluids.
- If vomiting occurs make sure that the airways remain open.

Heat Exhaustion

Symptoms of heat exhaustion include:

- Heavy sweating;
- Muscle cramps;
- Nausea or vomiting;
- Paleness;
- Headache;
- Tiredness;
- Dizziness;
- Fainting;
- Weakness.

If these symptoms are severe or the victim has a heart problem or high blood pressure, seek medical attention. Otherwise treat the individual with the following:

- Cool, non-alcoholic beverages;
- Rest;
- Cool shower, bath or sponge bath;
- An air conditioned environment;
- Lightweight clothing.

Heat Cramps

Symptoms include muscle pain or spasm, typically in the abdomen, arms or legs. For treatment:

- Stop all activity and sit quietly in a cool place.
- Drink clear juice or a sports beverage.
- Do not return to strenuous activity for a few hours after the cramps subside.
- Seek medical attention for heat cramps that do not subside in one hour.

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Sunburn

Symptoms include red, painful and abnormally warm skin after sun exposure. For infants one year of age and younger consult a doctor if there is fever, fluid-filled blisters or severe pain. Otherwise for treatment:

- Avoid repeated sun exposure.
- Apply cold compresses or immerse the sunburned area in cool water.
- Apply moisturizing lotion to affected areas.
- Do not use salve, butter or ointment.
- Do not break blisters.

Heat Rash

Symptoms include skin irritation in hot weather which looks like a red cluster of pimples or small blisters. For treatment provide a cooler, less humid environment and keep the affected area dry.

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FLOOD

A flood or flash flood watch is when these events are likely to occur in your area. A flood or flash flood warning is when the events are already occurring or will occur soon in your area.

If under a flood watch:

- Be prepared for an evacuation.
- Make sure vehicles have full gas tanks.
- Listen to the radio or stay tuned to the Emergency Alert System (EAS).
- Gather emergency supplies.
- Be prepared to turn off electricity if flood waters reach your area.
- Keep an eye on the water levels and be aware of flash floods.

If under a flood warning:

- Engage flood gates as applicable.
- Keep an eye on the water level and be aware of flash floods.
- Try to avoid driving unless it is an emergency. If you must drive avoid large puddles so the vehicle engine will not flood. NEVER attempt to drive through moving water as you could become stranded with a flooded engine or the vehicle could get swept away.
- If flood waters reach your area follow the instructions of EAS. You will either weather the storm at your current location or be ordered to evacuate.
- Notify the appropriate staff of flooding.
- Determine actions necessary depending on the conditions.

If no evacuation is ordered monitor the radio and television weather updates. Be prepared for an evacuation in the event of rising flood waters.

If evacuation is ordered NEVER ignore the evacuation order.

- If there is time turn off the main power switch or valves.
- Take emergency supplies.
- Follow the emergency evacuation plan for the building.
- In the event of a flash flood get to higher ground immediately.

In the event that the building suffers damage from a flood and operations cannot continue in a normal manner, follow the protocol for Operational Disturbances.

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SEVERE THUNDERSTORM

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SEVERE THUNDERSTORM

A severe thunderstorm watch is when severe thunderstorms are possible in your area. A severe thunderstorm warning is when severe thunderstorms are occurring.

In the event of a severe thunderstorm:

- Get away from any body of water.
- Stay away from the tallest object in the area.
- Stay as far away as possible from trees.
- Seek shelter in the shelter-in-place location if the storm gets severe enough.
- In the event that someone is struck by lightning call 911 immediately.

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TORNADO

A tornado watch is when tornadoes are possible in your area. Remain alert for approaching storms. A tornado warning is when a tornado has been sighted or indicated by weather radar. Tornadoes occasionally develop in areas in which severe thunderstorm watches or warnings are in effect. Remain alert to signs of an approaching tornado and seek shelter if threatening conditions exist.

Warning signs of a tornado:

- A dark or green colored sky;
- A large, dark, low-lying cloud;
- Large hail;
- A loud roar that sounds like a freight train;
- Funnel clouds.

In the event of a tornado watch:

- Monitor local news and radio stations.
- Keep a watchful eye to the sky.
- Listen for sirens.
- Have a flashlight, portable radio and blankets on hand.
- Do NOT call police or fire dispatchers unless it is an emergency.
- If any tornado warning signs are spotted take shelter.

If a tornado warning is issued for your area and the sky becomes threatening, seek shelter immediately.

Taking shelter:

- In the office/building/residence:
 - Staff and clients are to go to the innermost part of the building (closets, interior hallways) on the lowest possible floor away from windows, exterior walls, doors and corners. Staff are to assist clients in this process.
 - If the building has elevators do NOT use elevators.
 - Do NOT open windows.
 - Stay in your shelter until EAS advises you otherwise. No all clear siren will sound.

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- In a vehicle:
 - Do NOT try to outrun the tornado.
 - Get out of your vehicle.
 - If possible seek shelter in the lowest floor of any nearby sturdy building or a storm shelter.
 - If shelter is not possible lie flat in the closest ditch, gully or depression.
 - Cover your head with your hands.
 - If traveling with a client assist them with the above procedures.
- Outside:
 - If possible seek shelter in the lowest floor of any nearby sturdy building or a storm shelter.
 - If shelter is not possible lie flat in the closest ditch, gully or depression.
 - Cover your head with your hands.
 - If you are with a client assist them with the above procedures.

After a tornado has passed:

- Watch out for fallen power lines and stay out of damaged areas.
- Listen to the radio for information and instructions.
- Use a flashlight to inspect damage.
- Reenter buildings with extreme caution.
- Be alert to fire hazards.

In the event that the building suffers damage from a tornado and operations cannot continue in a normal manner, follow the protocol for Operational Disturbances.

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HURRICANE

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HURRICANE

When a hurricane watch is issued for your area:

- Listen to local officials.
- Check often for official bulletins on the radio and TV.
- If the facility is responsible for vehicles to transport clients make sure they are fueled in case of the event of an evacuation.
- Make sure emergency supplies are current.
- Be prepared for an evacuation.

When a hurricane warning is issued in your area:

- Staff and clients are to move to the lowest or innermost room of the building. Be sure to locate away from windows.
- Do not leave the building until the hurricane is over.
- Do not be fooled by the eye of the storm. Although it may calm down outside, do not attempt to move from your sheltered location as the eye will pass quickly and the storm will pick up again.

If ordered to evacuate follow the emergency procedures for your facility and any other procedures and instructions given by the proper authorities. In the event that the building suffers damage from a hurricane and operations cannot continue in a normal manner, follow the protocol for Operational Disturbances.

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EARTHQUAKE

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EARTHQUAKE

If indoors:

- Stay calm.
- Take cover by getting under a sturdy desk or table, or if that is not possible crouch in an inside corner of the building or under a doorway (only if you know it is a strongly supported, load bearing doorway). Cover your face and head with your arms. Stay away from glass, windows, outside doors and walls and anything that could fall, such as furniture, fixtures, etc.
- Stay where you are until the shaking has stopped.
- If the building has elevators do NOT use the elevators.

If outdoors:

- Stay calm.
- Do NOT attempt to seek shelter inside as most casualties and injuries from earthquakes occur near entrances and exits to a building.
- Move out into the open away from buildings, streetlights, utilities and trees.
- Stay there until the shaking has ended.

If in a moving vehicle:

- Stop the vehicle as quickly as safety permits.
- Try to stop in an open area.
- Avoid stopping under overpasses or bridges, trees and utility wires and buildings.
- Stay in the vehicle until the shaking has stopped.
- Proceed with caution after the earthquake has ended, avoiding bridges and ramps that may have sustained damage during the quake.

After the earthquake:

- Expect aftershocks. Aftershocks are secondary shockwaves that are usually less violent than the main quake but can still be strong enough to do additional damage.
- If you are in coastal areas and the earthquake is large enough, be aware of tsunamis.
- Use telephones only for emergency calls.
- Stay away from damaged areas unless your assistance is specifically requested by the police or fire department.

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Evacuation:

- It is the responsibility of staff members that are not seriously injured to evacuate themselves and clients from the building as quickly as possible.
- Be aware of structural damage to the building when evacuating. If an area looks structurally unsound or dangerous for any reason find another way out of the building.
- Help injured or trapped persons to the best of your ability.
- If a person is too seriously injured or trapped to be evacuated make a note of the location of the person and proceed to evacuate as it is the job of the fire fighters and emergency personnel to help these people.
- When outside the building notify an authority member immediately of the location and the severity of the injured/trapped person.
- Do NOT reenter the building until it is declared safe by the fire department or other proper authority.

If trapped:

- Do NOT light a match.
- Move about as little as possible so as not to kick up dust.
- Cover your mouth and nose with a handkerchief or clothing to avoid breathing in dust.
- Tap on a pipe or wall so rescuers can locate you. Scream only as a last resort as screaming could result in the inhalation of dangerous amounts of dust.
- If the area you are in seems structurally unsound and it is possible to do so, move to a more structurally sound location.
- If it is necessary to open cabinets, open them cautiously.

In the event that the building suffers damage from an earthquake and operations cannot continue in a normal manner, follow the protocol for Operational Disturbance.

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CIVIL DISTURBANCE**

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CIVIL DISTURBANCE

In the event of a civil disturbance:

- Verify that there is a disturbance on the property.
- Call 911, notify your supervisor, and lockdown/secure the area.
- The supervisor will consult the program SVP and/or administrator/director to decide which procedure to follow.
- Allow the police to take over the situation when they arrive.
- Do NOT try to handle the situation yourself as this could result in serious injury to yourself or others.
- Remain in the secured area until instructed to take further action by the highest ranking supervisor and/or police officer.

In the event that the building suffers from a civil disturbance and operations cannot continue in a normal manner, follow the protocol under Operational Disturbance.

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INTRUDER/HOSTAGE TAKER

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INTRUDER/HOSTAGE TAKER

In the event of an intruder/hostage taker:

- Always assume the intruder is armed.
- Take mental notes of the physical description of the intruder including, but not limited to, gender, height, weight, clothing, tattoos, piercings.
- Lockdown/secure your area.
- Call 911.
- Notify your supervisor. The supervisor will consult with the program SVP and/or administrator/director to decide on what lockdown procedures to follow.
- Allow the police to take over the situation when they arrive.
- Do NOT try to handle the situation yourself as this could result in serious injury to yourself or others.
- Remain in the secured area until instructed to take further action by the highest ranking supervisor and/or police officer.
- If an evacuation is necessary, follow the evacuation procedures.

In the event that the building suffers from an intruder/hostage taker and operations cannot continue in a normal manner, follow the protocol under Operational Disturbance.

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MISSING PERSON

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MISSING PERSON

When it is discovered that a client/staff is missing:

- Make a thorough search of the location last seen and the immediate vicinity.
- If the individual is not located, contact family and support staff/coordinator to see if the whereabouts of the individual is known.
- Notify the program supervisor and provide them with the name of the individual, description, area last seen and the length of time missing.
- The supervisor will be responsible for initiating the formal search procedures for any person whose absence constitutes a danger to themselves or others.
- If the individual is found during the preliminary search it is the responsibility of the person finding the individual to ensure that the person is not injured or in need of assistance, return the person to the supervised area as appropriate and complete the required incident report/program notes.
- If the individual is not found during the preliminary search it is the responsibility of the supervisor to authorize the calling of 911 to begin a formal search. Once the police have been involved it is the responsibility of the administrator/director to make the decision to notify parent/guardian of the individual. Required incident reporting paperwork is to be completed.
- After the individual is found the incident needs to be investigated, identifying the cause of the individual's disappearance and recommendations for actions to prevent future incident of a similar nature.

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BOMB THREAT

All employees responsible for answering phones should be familiar with the procedure for handling bomb threats. The procedure is:

- Stay calm.
- If possible record the message.
- If you cannot record the message take notes.
- Inform the caller that the building is occupied and the detonation of a bomb could result in death or serious injury to many innocent people.
- Obtain as much information as possible:
 - Keep the caller talking; ask questions or pretend to have difficulty hearing.
 - Establish whom they represent, timing and location of the bomb.
 - Pay attention to background noise, such as running motors, music playing or anything else that could give a clue to the location of the caller.
 - Listen closely to the voice of the caller, paying attention to details such as sex of the caller, quality of the voice (are they calm, excited, etc.), accents, speech impediments.
- Call 911 immediately after the caller hangs up and report the incident.
- Alert a coworker to evacuate the building (while or prior to getting on the phone with 911). The building is to be evacuated by triggering the fire alarm and following evacuation protocols.
- Inform the administrator/director as soon as possible.

Written bomb threats are less likely, but should never be ignored. When a written bomb threat is received:

- The building is to be evacuated by triggering the fire alarm and following evacuation protocols.
- Protect the bomb threat note from further unnecessary handling in order to preserve fingerprints, handwriting, postmark.
- Save materials associated with the note such as envelope or container.
- Place all the evidence into a box and cover with a lid.
- Bring the evidence box outside during the evacuation.
- Inform the administrator/director as soon as possible. The supervisor should be responsible for bringing the evidence box out of the building.

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EXPLOSION

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EXPLOSION

In the event of an explosion:

- Call 911.
- Do NOT stop to investigate what happened.
- Immediately pull the fire alarm box.
- All staff and clients are to evacuate following the evacuation procedures set for the location.
- In the event that the building suffers damage from an explosion and operations cannot continue in a normal manner, follow the protocol under Operational Disturbance.

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TERRORISM

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TERRORISM

In the event of terrorist threat follow the Homeland Security Advisory System recommendations for the current threat level.

- Be aware at all times of the level of Risk of Attack.
- Keep phone lines open for emergency communication, including cell phones.
- Listen to the radio to get local information and instructions.
- Maintain supplies to shelter-in-place.

In many instances it would be a serious risk for anyone to travel during a terrorist event. Staff would be putting themselves at risk and should have a plan to cover what they and their families would do in the event of an act of terrorism.

Chemical and Biological Agents:

- All are lethal.
- Chemical Agents – Generally liquid and often aerosolized. Most have an immediate effect or delayed by a few hours. Many chemical agents have a unique color and odor.
- Biological Agents – Liquid or powder. It takes less than a day to several days for symptoms to appear (i.e., botulinum toxin takes less than a day; anthrax or plague takes 2-5 days). Biological agents often have no odor or color.

Warning signs of an attack include:

- Droplets or oily film on surfaces;
- Unusual dead or dying animals in area;
- Unusual liquid sprays or vapors;
- Unexplained odors;
- Unusual or unauthorized spraying in the area;
- Victims displaying symptoms of nausea, difficulty breathing, convulsions, disorientation or patterns of illness inconsistent with natural disease;
- Low-lying clouds or fog unrelated to weather; clouds of dust; suspended, possible colored particles;
- People dressed unusually (long sleeved shirts or overcoats in the summertime) or wearing breathing protection, particularly in areas where large numbers of people tend to congregate.

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TERRORISM

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In the event of a real or suspected airborne attack:

- Stay alert for warning signs as early detection enhances survival.
- Immediately notify the administrator/director who will assess the situation and order an evacuation if appropriate.
- Protect breathing airways by immediately covering the nose and mouth with a handkerchief, coat sleeve or any piece of cloth to provide some moderate means of protection. Advise clients, coworkers, and customers to do the same.
- Evacuate or quarantine the exposed area to avoid further exposure to chemical or biological agents.
- If possible move upwind or to a higher elevation from the source of attack.
- If evacuation from the immediate area is impossible move indoors (if outside) and upward to an interior room on a higher floor.
- Once inside follow shelter-in-place.
- If splashed with an agent immediately wash it off using copious amounts of warm, soapy water or a diluted 10:1 bleach solution.
- In the event that the building suffers from an anthrax threat and operations cannot continue in a normal manner, follow the protocol for Operational Disturbance.

Suspicious letter from unknown source:

- If you suspect that a letter/package contains a biological or chemical agent do NOT open it.
- If an opened letter is suspected of containing a toxin it should be handled carefully. Note if there was a puff of dust or particles from the envelope when opened.
- Quarantine the contents by immediately covering it with clothing, paper, trashcan, etc. Do NOT remove the cover.
- Keep others away from the powder/substance.
- Leave the room and close the door or section off the area to prevent others from entering.
- Thoroughly wash face, hands and any other exposed areas of your skin with warm, soapy water before calling for assistance. Anyone else who was exposed to the substance should follow the same steps.
- Report the suspicious letter/package to the administrator/director who will notify 911.

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RESCUE OPERATION

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RESCUE OPERATION

If a rescue operation is necessary:

- Call 911.
- State your emergency and notify them of the need of a rescue, and they will send either the fire department or police department.
- Let these agencies handle the rescue. Do NOT attempt to rescue the individual as it could result in injury or death to both the person in need of rescue and the rescuer.

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NUCLEAR DISASTER

In the event of a nuclear disaster:

- A steady siren will sound for 3-5 minutes.
- Upon hearing this siren tune into the Emergency Alert System (EAS) for instructions.
- In the event that a broadcast from EAS does not provide immediate instructions as to shelter-in-place or evacuation, staff and clients should proceed to the designated shelter-in-place.
- If EAS advises to evacuate, follow the instructions given on the EAS system.
- Follow the evacuation protocol for the department, gathering emergency supplies (i.e., KI Go-Kit, client medications) and taking them to the relocation site.
- If advised to shelter-in-place follow the department's protocol for shelter-in-place, keeping the radio tuned to the EAS system. If you must go outside cover your mouth and nose with a folded, damp cloth and go back inside as soon as you can.

In the event of exposure to radiation:

- Immediately change clothes and shoes.
- Put exposed clothing in a plastic bag.
- Seal the bag and place it out of the way.
- Take a thorough shower.
- Follow the shelter-in-place procedure or evacuation procedure.

These directions include direct exposure to radiation or assisting someone who is suspected to have been exposed to radiation.

Potassium Iodide (KI)

- What it is - Potassium Iodide (KI) is an FDA approved drug to prevent the thyroid gland from absorbing radioactive iodine released during a nuclear disaster. It is distributed in 130mg tablets.
- What it does - KI saturates the thyroid gland with non-radioactive iodine to prevent the absorption of radioactive iodine by the thyroid gland. It is most effective if taken shortly before or shortly after exposure to radiation, but even if taken 3-4 hours after exposure it will still reduce the amount of radioactive iodine absorption. The protective effect of KI lasts 24 hours.
- When it should be administered – KI should be taken under recommendation of the Department of Public Health. If the Department of Public Health advises the administering of KI it will be broadcast over the Emergency Alert System.

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NUCLEAR DISASTER

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- Providers of KI – KI is available to the populations living within the Emergency Planning Zone free of charge from the local Board of Health.
- Potential side effects of KI – Possible side effects when taking KI include upset stomach, rash and/or allergic reaction.
- Risks of taking KI – KI is safe for most people, but should not be taken by people who are allergic to iodide, have Graves' disease, have any other thyroid illness or take thyroid medication.
- Administration of KI – KI will only be given in the case of radioactive emergency, if recommended by public health officials or if a parent/guardian signs a consent form for a child.

Potassium Iodide Informed Consent & Distribution

- Depending upon the location of the program (i.e., NH Seacoast and Rochester, NY) any new resident or staff member must complete an Informed Consent Form for Potassium Iodide (KI) distribution.
- Ensuring that the Informed Consent Forms are completed is the responsibility of the program administrator/director.
- These forms are to be stored in the same location as the KI (i.e., KI Go-Kit).
- A list of individuals who are eligible to receive KI is to be kept and this list is to be updated quarterly.
- In the event of a nuclear emergency KI distribution must be checked against Informed Consent Forms to ensure accuracy of distribution.
- KI pills are to be distributed at the shelter-in-place location by trained staff.
- The individual must be properly identified before receiving the KI tablet.
- After the KI is administered the letter "K" will be marked on the back of the individual's hand with a felt-tip marker.
- The staff administering the KI will record actions taken and events occurring which will include notification time, dose administered and adverse reactions.
- Any adverse reactions are to be reported to medical staff immediately or call 911.

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PANDEMIC

Influenza is a highly infectious viral disease. An influenza pandemic is considered to be a highly probable event. Given the potential for rapid transmission there may be as little as 1 to 6 months warning before outbreaks begin in the United States. Further complications may include a shortage of vaccine and antiviral agents.

Level 1 Plan – Standard influenzas

- Maintain strict infection control practices, including good hand washing, disinfecting, disposing of waste materials, collecting and laundering items.
- Encourage flu vaccination for both employees and clients where appropriate.
- Practice proper hygiene by coughing or sneezing into a tissue or one's elbow; and avoid touching the face, eyes, nose and mouth. Use antibacterial liquid, especially when proper hand washing is not possible.
- Maintain disaster supplies.

Level 2 Plan – Influenza Pandemic confirmed

- Continue activities initiated in previous phase.
- Isolate and/or group clients with influenza.
- Refer to the most current Center for Disease Control (CDC) or Dept of Health and Human Services (DHHS) guidelines at <http://www.cdc.gov/flu/> and <http://www.dhhs.nh.gov/DHHS/BCDCS/flu.htm>
- Arrange coverage for staff shortages.

Isolation and Quarantine

Isolation and quarantine are optimally performed on a voluntary basis although different levels of government have the basic legal authority to compel mandatory isolation and quarantine to protect the public's health.

Some of the community-based strategies to control the spread of disease that might be considered during a large scale outbreak of influenza are requiring fever screening before entry into schools, work-sites and public buildings, requiring face masks in certain settings, implementing widespread environmental disinfection strategies.

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A variety of quarantine strategies that may affect employees and their ability to work are:

- Restrictions on mass transit;
- Restrictions on access routes;
- Use of monitoring checkpoints, curfews, travel permits, health certificates to minimize movement into or out of quarantined areas;
- Consideration given to quarantine of contacts with high-risk exposures even in the absence of symptoms.

Types of quarantine include:

- Home – Most suitable for contacts that have a home environment in which their basic needs can be met.
- Work – Essential personnel who have been exposed to influenza cases and who may need to continue working (with the appropriate infection control precautions) but who are quarantined either at home or in a designated facility during off-duty hours.

Isolation of Individuals with Influenza

Limiting transmission of influenza requires limiting interactions between influenza cases and others. Individuals with influenza should be placed in a room with others with suspected or confirmed influenza. When a private room is not available or grouping is not possible and spatial separation of at least 3 feet should be maintained between the infected person and others. Doors may remain open.

Minimize the number of staff who has contact with infected clients by assigning all influenza clients to a small group of employees who have been vaccinated and/or are taking antiviral medications or prophylaxis (if medications are available and appropriate). Consider placing all clients with documented or suspected influenza in one designated unit.

Interactions between clients with influenza and other residents should be minimized. Persons at risk of serious influenza complications (those with underlying medical conditions) should not interact with the infected person.

Agency Control Measures

Agency control measures are designed to reduce the risk of influenza transmission by limiting the potential interactions while still maintaining essential programs. Priority will be the residential programs. These measures may include:

- Close all day programs, starting with the highest risk populations (elderly, preschool).
- Establish staffing levels at which a program can no longer safely operate.

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- Reassign staff by a prioritized list (i.e. those who know the clients from other programs, those who are trained in de-escalation and physical restraint, those with medical training).
- Close “non-essential” functions.

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STAFF SHORTAGE

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STAFF SHORTAGE

Call out

- When a staff member knows they will not be able to come to work they must call their supervisor as soon as possible.

Notification

- As soon as a staff shortage is noticed or predicted the head of the department is to be notified.
- The head of the department that has the shortage will notify the program SVP of the staff shortage.
- The program SVP will notify the Chief Human Resources Officer of the staff shortage.
- Staff will be notified of the need for their services by a phone call. They will be notified by the head of the department.
- The head of the department will use a contact list for the department to call the needed staff.

Coverage

- Anyone with days off or vacation time may be called in (if available).
- Any staff members that can be spared will move into departments with staff shortages. **Preferably those trained for the position will take it over first.**
- In the event that the position requires trained or certified persons to do the job and none are available, the program will need to close.

Working with Infectious Persons

- If the staff member is going to be working with clients who are infectious:
 - They must consent to do so;
 - They must be vaccinated or immune to the pandemic condition;
 - Or they must take every other precaution to ward off sickness such as:
 - Wearing a face mask;
 - Washing hands often, using antibacterial liquid;
 - Maintaining as much distance between the infectious clients/staff as possible to perform the job.

Returning to Work

- An ill staff member may return to work only after being fever free for 24 hours without the use of fever reducers.

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CASUALTIES

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CASUALTIES

In the event of a deceased staff or client:

- Call 911. Follow their instructions.
- After following 911's instructions, cover the deceased with a sheet or blanket and have a piece of paper listing the name, date of birth and approximate time of death. If 911 cannot be called, do the same.
- If 911 advises to move the deceased, place them in a restroom and cover with a sheet or blanket and have a piece of paper listing the name, date of birth and approximate time of death.

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RECOVERY

After an emergency the following procedures (if they apply to the situation) need to be followed to get the business back on track after the disaster:

- Follow the steps in the operational disturbance plan to get the business functioning temporarily.
- Once those steps have been followed:
 - Once the building has been cleared to enter, check for any structural damage.
 - Take photos of the damage.
 - Report any damage to the insurance company. It is the responsibility of the CFO to report to the insurance company.
 - Check for down or damaged utilities and report these to the proper authorities.
- Make arrangements with the insurance company to complete any work that needs to be done on the building.
- The President will make the decision on when operations can be moved back into the facility.
- The Development department will create and release statements about the emergency/disaster to be released to the public informing them of what happened and what programs are still open.

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EMERGENCY SUPPLIES

Water Supplies

In an emergency having a supply of clean water is a top priority for drinking, food preparation and hygiene. Drink at least 2 quarts of water a day, 3-4 quarts if pregnant, sick or a child. If supplies run low never ration water. Drink what you need each day and look for other sources.

- Store at least one gallon per person per day.
- Store at least a three-day supply of water for each person.
- Store in a cool, dark place.
- Preferably store in store-bought, factory sealed water containers. Alternately, food-grade quality containers made for storing water may be used. These must be thoroughly washed, sanitized and rinsed, and if the water is from a tap it may need to be treated before being stored.
- Change stored water every 6 months.

Avoid using:

- Store bought water past the expiration or “use by” date on the container;
- Containers that can’t be sealed tightly;
- Containers that can break, such as glass bottles;
- Containers that have ever held any toxic substances;
- Plastic milk bottles and cartons as they are difficult to clean and break down over time.

If disaster happens without a stored supply of clean water, if any of the following are safe, use water in:

- Hot water tank;
- Pipes and faucets;
- Ice cubes;
- Rainwater;
- Bodies of water, streams, ponds, natural springs.

Do NOT drink:

- Flood water;
- Water with floating material, an odor or dark color;
- Saltwater (may only be used if distilled first).

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Food Supplies

During and after disaster it is vital to have enough food to maintain strength. Store foods that are the same as those regularly eaten.

- Eat at least one well-balanced meal each day, more if an individual is doing physical labor. If activity is reduced, healthy people can survive on half the usual food intact for an extended period and without any food for many days.
- Foods that require no refrigeration, preparation or cooking are best.
- Include vitamin, mineral and protein supplements to ensure adequate nutrition.
- Store enough food for 2 weeks.
- Individuals with special diets and allergies will need particular attention, as will infants and toddlers, the ill and elderly.
- Have a manual can opener and disposable utensils.
- Food may be rationed safely, except for children and pregnant women.
- For emergency cooking a grill or camp stove can be used outdoors.
- Keep food in a dry, cool place, out of the sun if possible.
- Wrap perishable foods, such as cookies and crackers, in plastic bags and keep in sealed containers.
- Empty opened packages of sugar, dried fruits and nuts into screw-top jars or airtight cans to keep them fresh and unspoiled.
- Keep hands clean. If soap and water are not available use alcohol-based hand gels or wipes to clean hands.
- Inspect food for signs of spoilage before use. Throw out perishable foods, such as meat and poultry that have been left at room temperature for more than 2 hours.
- REPLACE STORED FOOD ON A REGULAR BASIS with fresh supplies, dated on container.
- Eat salt-free crackers, whole grain cereals and canned foods with high liquid content if water supplies are low.
- If there is a power outage, eat food in the refrigerator first, the freezer next and lastly from stored supplies. In a well-filled, well-insulated freezer, food will usually still have ice crystals in the centers (meaning foods are safe to eat) for at least 2 days.
- Avoid using:
 - Canned goods that have become swollen dented or corroded;
 - Fatty, high-protein or salty foods if water supplies are low.

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Disaster Supplies Kit

- Items for infants including formula, diapers, bottles, pacifiers, powdered milk, medications not requiring refrigeration;
- Items for seniors, people with disabilities and serious allergies including special foods, denture items, extra eye-glasses, hearing aid batteries, prescription and non-prescription medications that are regularly used, inhalers, and other essential equipment;
- Shelter-in-place items including duct tape, scissors, plastic sheeting, instructions on how to seal doors and windows;
- Kitchen accessories such as manual can opener, disposable cups, plates, utensils, utility knife, sugar and salt, aluminum foil and plastic wrap, re-sealable plastic bags;
- A portable, battery-powered radio or television and extra, fresh batteries;
- Several flashlights and extra, fresh batteries;
- A first aid kit;
- One complete change of clothing and footwear for each person including sturdy work shoes or boots, raingear and other items adjusted for the season, such as hats and gloves, thermal underwear, sunglasses, dust masks;
- Blankets and sleeping bag for each person;
- Sanitation and hygiene items, medications and any supplies regularly used such as toilet paper, towelettes, soap, hand sanitizer, liquid detergent, feminine supplies, plastic garbage bags, medium-sized plastic bucket with tight lid, disinfectant, household chlorine bleach;
- Other essential items such as paper, pencil, needles, thread, small A-B-C type fire extinguisher, medicine dropper, whistle, emergency preparedness manual;
- A map of the area marked with place you could go and the phone numbers of those places;
- An extra set of keys and IDs including keys for cars and copies of driver's licenses, passports and work identification badges;
- Cash and copies of credit cards;
- Copies of medical prescriptions;
- Matches in waterproof container.

Pack the items in easy to carry containers (duffle bags, back packs, covered trash receptacles), label the containers clearly and store them where they would be easily accessible.

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NOTABLE EVENT & REPORTABLE INCIDENT

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It is the responsibility of any staff member to report any emergency situation to their supervisor

NOTABLE EVENT & REPORTABLE INCIDENT

Notable events can be defined by the following situations:

- Medication related occurrences such as taking the wrong dose, at the wrong time, in the wrong form or by incorrect route; taking a non-prescribed medication (other than an over-the-counter medicine); failure to take a prescribed medication;
- Property damage;
- Potential health and safety issues;
- Staff behavior that threatens the health, safety or rights of an individual;
- Injury from an unknown cause requiring no more than basic first aid;
- When an individual has contact with the police for issues other than when the individual may be involved in a possible criminal act;
- Potentially dangerous, unpredictable or unusual behavior from the individual;
- Illness not requiring hospitalization or intervention exceeding basic first aid;
- Contact with the fire department or EMS;
- A significant external or internal complaint;
- Falls, not resulting in more than first aid treatment;
- Hazardous home conditions;
- Other issues that put the individual at a health or safety risk.

A reportable incident can be defined by the following situations:

- When a person is actually harmed, missing, has been abused or there are allegations of abuse or neglect.

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NOTABLE EVENT & REPORTABLE INCIDENT

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CRISIS COMMUNICATION

It is the responsibility of any staff member to report any emergency situation to their supervisor. It is the responsibility of the supervisor to report this information along the chain of command. In the event of an absence of one of the staff on the chain of command the person directly below the absent staff shall carry out their duties. All managers will be responsible for informing every staff member they oversee of the situation and what actions to take. If it is deemed necessary by the highest ranking administrator the board members shall be informed as well. The highest level of administration in each area is responsible for listening to the radio and keeping the staff up to date on what is happening in the area.

Communications between staff members and emergency services is to be done through use of work phones, cell phones or walkie-talkies. If cell service is not available use a hard wired telephone or email if possible. In the event of an emergency, maintenance will report to the building and they will help in communications through the use of walkie-talkies. Walkie-talkies should be checked for functionality quarterly with batteries replaced twice a year.

To aid in crisis communication (i.e. telephone tree) staff are responsible for making sure their contact information is up to date by informing their managers of any changes and/or making needed changes in PeopleSoft. Each program should update their emergency contact list at least quarterly.

Media Communication Plan

- The most important elements in dealing with a crisis event or media issue are information and planning.
- All crises and potential “incidents” should be reported to a supervisor. The supervisor should communicate all pertinent information through the proper channels to the Senior Program Vice President, and then to the Senior Development Officers and the President & CEO.
- In the event of a crisis, and depending on its severity and duration, a Crisis Management Team shall be activated and charged with overall strategy of how to handle the situation and implement the plan of action. The Team shall consist of the President, Chief Human Resources Officer, Senior VP and VP of the program(s) involved, Chief Development & Communications Office, Senior Vice President of IT, and Director of Communications. The need for advice of legal counsel shall be determined on a case by case basis.

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- The Chief Development & Communications Officer is designated as the crisis communications lead person, directing and coordinating all aspects of Easter Seals' response including managing the messages and the media.
- Depending on the nature of the situation, the Chief Development Officer, or their designee, may act as the spokesperson for Easter Seals, interacting with the media and other inquirers. Other spokespeople could include program Senior Vice Presidents. When the event is significant in nature, the President & CEO will represent the organization.
- Only the chief spokesperson and back-up spokespeople are authorized to release information to the media and the public. All other staff and members of the Board of Directors should be professional and helpful to the media by connecting them with the Chief Development & Communications Officer and/or President & CEO. Messages taken from the media should include the reporter's name, media outlet's phone number, and the reporter's deadline.
- All comments to the media should be guided by professionalism and transparency and serve to mitigate the crisis while reinforcing the leadership role of Easter Seals.
- Personnel matters are to remain confidential to extent permitted by law.
- When possible responses should be proactive, responsive, and action-oriented.
- Easter Seals recognizes the importance of media relations to the public trust. In times of crisis, maintaining effective media relationships will be particularly critical in bolstering public confidence in the non-profit sector as a whole.
- The Crisis Communication Plan is updated annually and kept on file.

This is a brief overview of crisis communication steps:

- Safety – Ensure safety of all staff, clients and site. Call 911 if needed.
- Notification – Staff should notify the Senior VP and President immediately.
- Crisis Management Team – The team, made up of the President, Chief Human Resources Officer, Senior VP and/or VP of program(s) involved, Chief Development & Communications Officer, Senior Vice President of IT, and Director of Communications, will be activated to strategically review and manage the situation.
- Before Going Public:
 - The Director of Communications is responsible for ensuring all tasks related to the Crisis Communication Plan are completed.

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- Depending on the severity of the situation, the crisis communications spokesperson will be the President or the Chief Development & Communications Officer.
- Assess the situation to determine the facts.
- Determine appropriate response/action.
- Create a plan of action for internal and external communications.
- Develop factual, detailed messages that reflect the status of the crisis, Easter Seals' response, including proactive steps to resolve the situation.
- Prepare talking points.
- Provide a script for the switchboard staff receiving incoming calls.
- Determine if a press release, web and/or voicemail updates are necessary.
- Assess what resources are necessary to manage the crisis (i.e., cell phone availability, press conference needs, on-location resources – signs, lectern, visuals, etc.).
- Appoint staff to:
 - Keep the Board of Directors informed. The President will contact the Chairman of the Board of Directors with information about the crisis, and the management and communications plans. After the Board Chairman has been contacted, the rest of the Board should be notified. The urgency of the situation will dictate whether to use phone, email, or letters for notification.
 - Contact partners, allies, and other key offices such as Easter Seals HQ, State offices, town/city officials, Department of Health, fire/police (use non-emergency numbers), major gift donors who have supported a specific program/service that is in crisis, parents and family members of clients as appropriate.
 - Record crisis details, actions taken, external responses, resolution
- Going Public
 - Begin corresponding with critical internal audiences, including staff, Board of Directors and others.
 - Begin media and other external audience outreach. Use press release if appropriate.
 - Update website and organization phone mail, if needed.
 - Update switchboard staff regularly as she/he is the first line of contact with incoming media calls.
 - Evaluate message effectiveness as the situation progresses.

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- Implement methods for updating key audiences with ongoing information.
- Distribute post-crisis communications.

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HOW TO HANDLE A CRISIS

In the Event of a Crisis Situation

Be Aware That:

- Situations can be volatile and fast moving. Circumstances can change very quickly.
- It is important to be flexible in handling situations because every situation is unique. An exact duplicate of actions in response to one crisis may not work for a different incident.
- Sometimes you may be on your own. Support may not be available for you to make decisions with; you will need to make them independently in these instances.

Manager Responsibilities:

- Overall responsibility for the site. This includes being aware of the vulnerabilities of the site.
- During an incident may act as the person “in charge” or “lead” person.
- Support recovery efforts as needed.

Emergency Response Guidelines

Implement the building’s Emergency Action Plan and Response Procedures.

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POLICY: WORKPLACE VIOLENCE
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WORKPLACE VIOLENCE

Easter Seals is committed to preventing workplace violence and to maintaining a safe work environment. Given the increasing violence in society in general, Easter Seals has adopted the following guidelines to deal with intimidation, harassment, or other threats of (or actual) violence that may occur during business hours or on its premises.

Easter Seals has a policy of zero tolerance for violence. Workplace violence shall mean any behavior, act or statement that:

- means physically harming another, shoving, pushing, harassing, intimidating, coercing, brandishing weapons, and threatening or talking of engaging in those activities.
- would be interpreted by a reasonable person to be aggressive, intimidating, harassing, or unsafe and
- which carries an expressed or implied intent to cause harm to a person or property.

****Due to the unique nature of our workplace see page three of three of this section****

All employees should be treated with courtesy and respect at all times. Employees are expected to refrain from fighting, "horseplay," or other conduct that may be dangerous to others. Firearms, weapons, and other dangerous or hazardous devices or substances are prohibited from the premises of Easter Seals.

It is the intent of this policy to ensure that everyone associated with this business, including employees and customers, never feel threatened by any employee's actions or conduct. Conduct that threatens, intimidates, or coerces another employee, a customer, or a member of the public at any time, will not be tolerated. This prohibition includes all acts of harassment, including harassment that is based on an individual's sex, race, age, disability, religion, or any characteristic protected by federal, state, or local law.

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Reporting Violence

All threats of (or actual) violence, both direct and indirect, should be reported as soon as possible to your immediate supervisor or any other member of management. This includes threats by employees, as well as threats by customers, vendors, solicitors, or other members of the public. When reporting a threat of violence, you should be as specific and detailed as possible. All suspicious individuals or activities should also be reported as soon as possible to a supervisor. If you see or hear a commotion or disturbance near your work area, do not try to intercede, unless required (per program policy) or requested. It is your responsibility to keep yourself safe.

If 911 is called, allow the police to take over the situation when they arrive. Depending on the severity of the situation, a lockdown or evacuation may be necessary. During a lockdown, remain in a secured area until instructed to take further action by the highest ranking supervisor and/or police officer. If an evacuation is initiated follow the procedure for your location. In the event that the building experiences a violent or potentially violent incident and operations cannot continue in a normal manner, follow the protocol for Operational Disturbance located in the Crisis Manual.

Confidential Reporting Information

Compliance Hotline – 1-800-870-8728 Ext. 3001, or compliance@eastersealsnh.org
Safety Committee Hotline – 1-800-870-8728 Ext. 3002

Investigation

Easter Seals will promptly and thoroughly investigate all reports of threats of (or actual) violence and/or suspicious individuals or activities. The reporting and the information disclosed in the internal investigation will remain confidential to the extent possible, but may be disclosed on a need to know basis in order to thoroughly investigate and effectively resolve the matter. The identity of the individual making a report will be processed as is practical. In order to maintain workplace safety and the integrity of its investigation, Easter Seals may suspend employees, either with or without pay pending investigation.

Anyone determined to be responsible for threats of (or actual) violence or other conduct that is in violation of these guidelines will be subject to prompt disciplinary action up to and including termination of employment. Easter Seals will support criminal prosecution of those who threaten or commit work-related violence against our employees, customers and visitors to our work environment.

All individuals who apply for (or) obtain a protective or restraining order which lists Easter Seals property locations as being protected areas, are required to provide to the Chief Human Resources Officer a copy of the petition and declarations used to seek the order, a copy of the temporary protective restraining order which is made permanent.

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Easter Seals encourages employees to bring their disputes or differences with other employees to the attention of their supervisors or Human Resources before the situation escalates into potential violence. Easter Seals would like to assist in the resolution of employee disputes, and will not discipline employees for raising such concerns.

Protection from Retaliation

All reasonable action will be taken to assure that the complainant and those involved on behalf of the complainant suffer no retaliation as a result of filing the incident or the complaint. Any employee who is found to have engaged in retaliation will be subject to disciplinary action up to and including termination from employment.

Employees who believe they have suffered retaliation as a result of reporting a safety violation or participating in an investigation regarding a safety violation should report the matter to their supervisor, the Chief Human Resources Officer, the Compliance Hotline – 1-800-870-8728 Ext. 3001, or compliance@eastersealsnh.org, or the Safety Committee Hotline – 1-800-870-8728 Ext. 3002.

All complaints will be investigated and appropriate steps will be taken to resolve the situation and to ensure that it does not recur.

Training Programs

As part of our commitment to preventing workplace violence, Easter Seals has established training programs for all employees. Training will be included as part of your orientation. Thereafter, you may be scheduled for refresher training. Please be advised that training is mandatory and attendance will be taken.

Employee Assistance Program

Easter Seals provides an Employee Assistance Program (EAP) for all full-time and part-time employees. The EAP offers services to our employees and their eligible dependents. Easter Seals does not receive information about individual contact with the EAP. Employees are encouraged to use the EAP whenever you feel the need for guidance in coping with life's difficulties. The EAP is a confidential service to be used when employees need help.

Unique Nature of Our Workplace

Easter Seals provides services to some individuals whose conduct or behavior may, at times, be sexually inappropriate, combative or otherwise inappropriate. In most cases this conduct or behavior will be addressed through the program treatment planning process. However, there are occasions when program guidelines and the needs of our customers will require a level of tolerance for inappropriate behavior that would not otherwise be tolerated under this policy.

If you are uncomfortable with the behaviors of the individuals you serve or feel that this is not a good fit, you should promptly discuss your concerns with your program's supervisor. All reasonable efforts will be made to respond to your concerns.

ACKNOWLEDGMENT / RECEIPT

I have received a copy of the Easter Seals 2017 Safety Manual and have either read it or have had it read to me carefully. I understand all of its terms and conditions and agree to abide by them. I realize that failure to do so may result in disciplinary action or termination. I understand and agree that my employment may be terminated at-will, so that both Easter Seals and I remain free to choose to end our work relationship at any time. I also understand that Easter Seals remains free to change, revise, or eliminate any or all of the provisions stated in the manual, including for reasons required by applicable law. I understand that nothing in this manual in any way creates an express or implied contract of employment between Easter Seals and me. I also understand that this manual is only intended to provide a better and more understandable working atmosphere and to ensure compliance with legal requirements, for so long as the employee/employer relationship exists.

_____ Date

_____ Employee's Signature

_____ *Employee's Printed Name*

_____ Date

_____ Representative's Signature