



**Office Management
and
Emergency Procedures Manual**

**County of Summit ADM Board
1867 West Market, Suite B-2
Akron, OH 44313**

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Section 1.0: Purpose

The purpose of the Office Management and Emergency Procedures Manual is to provide a ready source of information for the management of office activities. This manual also serves as an operational guideline on how to respond to a variety of emergency situations that may occur at the Fairway Center Building.

These policies are designed with two objectives:

A. TRAINING DOCUMENT

Before an incident, the policies are useful as a training document for employees. It is organized to permit rapid access of needed information.

B. EMERGENCY REFERENCE

During an incident's response phase, the policies refer to vital administrative, logistical and procedural information. This information is provided to facilitate accessibility during an emergency when time is critical.

Employees are required to learn procedures as outlined in this manual and are expected to adhere to these guidelines. Employees hosting meetings, students, interns and consultants are responsible for their guests while on premises and during building emergencies.

This manual does not and cannot cover all situations, nor does following the procedures in this manual assure or guarantee the safety of persons or property in the event of an emergency. This manual is for informational and educational purposes only.

Related Policy(s): **2.6 Asset Protection**

Section 2.0: Phone Numbers

The contact numbers that you dial to access assistance in an emergency or non-emergency

2.1: Emergency Phone Numbers

An emergency is a situation that in the opinion of the employee, poses an immediate risk to health, life, property, or the environment.

In the event of an EMERGENCY, dial **9-1-1**.

2.2: Non-Emergency Phone Numbers

It is NOT an emergency when the situation is not dangerous and immediate action is not necessary.

Non-Emergency Phone Numbers

Police.....330-375-2658

Fire.....330-375-2101

Section 3.0: Building Contact Information

The ADM Board offices are co-located with Summit County Public Health in the Fairway Center building.

3.1: ADM Board Facility Contact Information

County of Summit ADM Board
1867 West Market Street, Suite B-2
Akron, Ohio 44313
330-762-3500
Business Hours Monday through Friday, 8:00am to 4:30pm
Jerry Craig, Executive Director

Emergency Contacts Outside of Business Hours

Jerry Craig, Executive Director 330-931-6377

Jackie Steward, Manager of Administration 216-926-4721

Computer Related Emergency Contacts Outside of Business Hours

Nick Veauthier, Manager of Information Technology 330-922-3129

Tom Mino, Information Technology Specialist 330-861-3451

3.2: Summit County Public Health Facility Contact Information

Fairway Center
1867 West Market Street
Akron, Ohio 44313
330-923-4891
Business Hours Monday through Friday, 8:00am to 4:00pm
Donna Skoda, Health Commissioner

Heather Pierce, Administration Director 330-926-5605 or 330-283-3480

Melody Salzwimmer, Facilities Specialist 330-926-5672

Section 4.0: Office Coordination

The Manager of Administration will serve as the Office Coordinator. An Alternate Office Coordinator will be identified and posted on the Employee Communication Page. It is important to note that while the Office Coordinator is away from the building, the Alternate becomes the Office Coordinator.

4.1: Office Coordinator Responsibilities

The Office Coordinator and Alternate are the communication link between ADM Board employees, Summit County Public Health (SCPH) Facilities Management and First Responders.

Any changes in the contact information of the Office Coordinator or the Alternate will be communicated in writing to Summit County Public Health.

Office Coordinator responsibilities include:

- (1) Communicating the pre-planned emergency procedures to ADM Board employees.
- (2) Informing all ADM Board employees of the evacuation procedure and designated meeting area(s).
- (3) Accounting for ADM Board employees during building evacuation utilizing the ADM Board Employee Evacuation Checklist and Visitor Sign-In Sheet(s).
- (4) Securing and carrying a flashlight during an evacuation in the event of an electrical power failure.
- (5) Checking restrooms, turning off lights, and closing doors during a building evacuation.
- (6) Reporting hazards, submitting repair tickets and facility requests to Summit County Public Health.
 - IT non-emergency requests HelpDesk@schd.org
 - Facilities Non-emergency repair requests Facilities@schd.org

NOTE: ADM BOARD EMPLOYEES MUST SEND FACILITY REQUESTS TO THE OFFICE COORDINATOR. THE OFFICE COORDINATOR WILL SUBMIT THE REQUEST TO SUMMIT COUNTY PUBLIC HEALTH.

4.2: ADM Board Evacuation Employee Checklist

This checklist will be used to account for ADM Board Employees during building evacuations and emergencies.

ADM Board Evacuation Employee Checklist	August 2015
Arndt, Joanne	
Craig, Jerry	
Ellington, Aaron	
Flinn, Audrey	
Freeman-Clark, Chris	
Grande, Tom	
Howland, Donelle	
Kuckuck, Beth	
Leffler, Tom	
Masters, Regina	
Mino, Tom	
Rabinowitz, Paula	
Rudell, Fran (ALTERNATE OFFICE COORDINATOR)	
Shuttlesworth, Sheila	
Smith, Douglas	
Sonnhalter, Mary Alice	
Steward, Jackie (OFFICE COORDINATOR)	
Veauthier, Nick	
Wade, Aimee	
OTHERS: Contract Employees/ Visitors/ Students/ Interns/ Field Placement	

Section 5.0: Building Security and Safety

The Fairway Center premises are managed by Summit County Public Health, and, as tenants, the ADM Board is required to adhere to its security protocol.

This section of the manual has been established as operational guidelines to address a variety of security situations. It does not and cannot cover all conditions and situations that could occur and does not guarantee the safety of persons or property.

All employees have security responsibilities and are expected to be familiar with, and follow these guidelines. Employees are also encouraged to report any potential safety hazards, safety suggestions, and health and safety related issues immediately to their supervising manager or the Manager of Administration.

5.1: Office Security

The ADM Board's normal business hours are Monday through Friday from 8:00 a.m. to 4:30 p.m. Employees working outside of regular business hours are required to seek authorization from their supervising manager to permit building access and to prevent setting off any alarms.

5.2: Keys

Employees are prohibited from duplicating and redistributing any ADM Board issued key. Employees who have lost keys, or who are in need of additional access keys should report this immediately to the Manager of Administration.

Related Procedure: HR 1.9 ADM Keys and Keycards

5.3: Employees' Access Controls

An Identification (ID) badge reader controls access to the designated employee entrance and other authorized areas. Authorized employees are issued an ADM Board ID badge. All authorized employees are to enter the building and ADM Board Office Suite using their ID Badge. Temporary employees/students/ interns/ approved contractors not authorized to have an ID badge are to enter the building via "Entrance B" and must sign in and out at the ADM Board Reception window. Employees misplacing an ID badge are to immediately report the loss to the Manager of Administration so the ID badge can be deactivated.

5.4: Visitors and Guests

Visitors doing business with the ADM Board are required to sign in and out of the building for safety and security reasons.

Employees receiving guests are responsible for directing visitors on entering the building,

(Entrance Door A or Entrance Door B), greeting, accounting for, and escorting visitors for the duration of their visit and limiting access to authorized areas. In the event a visitor or guest is on the premises outside of ADM Board business hours, the accompanying employee is responsible for the visitor until he or she exits the building. At no time should the visitor be left on the premises alone.

5.5: Employee Only Areas

(NOTE: This procedure is adopted from Summit County Public Health's Safety and Security Procedure #615, dated 07/23/2015, and may be modified to best fit the needs of the ADM Board)

Locations identified as "Employee Only" areas are to be secured at all times. The general public is restricted from entering "Employee Only" areas unless signed in according to the visitor procedure.

Employees are not permitted to hold, prop or leave unlocked the entrances separating a public area to an "Employee Only" area. Employees may not allow an unauthorized person into any "Employee Only" area by allowing them to follow the employee into the restricted area.

If a member of the general public is in a designated employee area without escort or identification, employees are required to provide assistance and direct the individual(s) to a public area.

5.6: Fairway Building Restricted / Limited Access Areas

ADM Board employees are not permitted in the following areas/rooms at the Fairway Center Building unless authorized. Questions regarding access to restricted areas should be directed to the Office Coordinator.

- SCPH's Server Room, Information Technology Supply Room and Equipment Closets
- Utility /Custodial Closets / Rooms
- Non-public areas of SCPH
- Dedicated Storage Areas / Records

5.7: Panic Button Procedure

(NOTE: This procedure is adopted from Summit County Public Health's Safety and Security Procedure #615, dated 07/23/2015, and may be modified to best fit the needs of the ADM Board)

A panic button is installed at the ADM Board reception desk. When an employee feels personally threatened or observes a person with a weapon on the premises and the employee is unable to dial 9-1-1 safely, the panic button should be used to summon the police.

Upon receiving the alarm, SCPH's monitoring agent (identified below) will call the applicable police dispatcher 9-1-1 to notify them of the situation. The monitoring agent will then call the SCPH Point of Contact(s).

Business Hours Procedure when Panic Button is activated is outlined below:

- 1) During operating hours, initiating the button will contact the police and SCPH's monitoring company
- 2) The monitoring company will contact the SCPH's Fiscal Department (330-812-3911). The call will ring multiple phones within until an answer is received.
- 3) The employee in SCPH's Fiscal Department that answers the phone will ask for clarification regarding the location of the emergency.

- 4) The employee in SCPH's Fiscal Department who receives the call from the monitoring agent will provide notice to the first available employee in the following order:
 - Director of Administrative Services
 - Director of Community Health
 - Director of Environmental Health
 - Health Commissioner

Note: If all of the above are unavailable, any SCPH Supervisor will be notified of the incident.

If the location of the emergency is obvious, the SCPH Director /Supervisor accepting responsibility for assessing the situation should immediately proceed to a location from which the situation may be safely observed and assessed or call to ascertain the situation. Note: Extreme caution must be exercised at all times before entering a potentially volatile situation.

- 5) The SCPH director/supervisor assessing the situation may direct employees and visitors to evacuate the building or relocate to a safer location.
- 6) If the director/supervisor finds that there is no emergency, the monitoring agency will be notified.

If a panic button is accidentally pushed, the person who pushed it should immediately call 9-1-1 and the Fiscal Department (330-812-3911) to inform them that there is no emergency.

The Fiscal Department will notify the Fairway Center Building's monitoring company: **US Protective Services (1-216-404-1500).**

After Hours Procedure when Panic Button is activated is outlined below:

- 1) After business hours, initiating the button will contact the police, SCPH's monitoring company.
- 2) Notifications will be received by the SCPH's after business hours designated point of contacts.
- 3) If the button is activated in the ADM Board Office Suite, the Executive Director or the Office Coordinator will be notified by SCPH.

5.8: Security of Work Stations

The ADM Board is not responsible for the security of personal belongings within the workplace. Employees are responsible for securing their workstations, its contents and any personal items.

Appropriate measures must be taken by each employee within any office space to protect the confidentiality, integrity and availability of sensitive information, including protected health information (PHI) and ensure that sensitive information is restricted to authorized users. Questions about confidentiality can be directed to the designated ADM Board's privacy officer.

Related Policy: 12.5: Confidentiality and Protected Information

5. 9: Exterior Safety: Traffic Control / Speeding

Employees are advised to use caution when driving in the parking lot. Employees must be observant for pedestrians, as pedestrians have the right of way. Other guidelines include:

- Keeping speed below 10 MPH
- Using caution when driving around the buildings
- Reducing speed when driving around corners

5.10: Parking

Employees are required to park in spaces designated with yellow striping. Visitors should be directed to park in parking spaces outlined in white. Employees who require exemption from the current parking policy (i.e., parking closer to the facility) should contact their Supervising Manager or the Manager of Administration.

5.11: Snow and Icy Conditions

SCPH has contracted snow plowing services for the removal of snow. Employees are asked to use caution around plowing equipment and when entering and/or exiting the facility if icy conditions exist. Please report unsafe conditions to the Office Coordinator. .

5.12: Employee Work Related Injury Report

Employees who are injured while performing job duties must immediately report the work related injury or illness to their Supervising Manager. The employee and Supervising Manager are responsible for immediately reporting the injury, and completing the Work Related Injury and Illness Report.

Business Hours Reporting Procedure:

1. Immediately notify your Supervising Manager. If unable to do so, have a co-worker notify your manager.
2. If an emergency situation, call **9-1-1** for immediate assistance.
3. If a potential hazard(s) exists, immediately report it to the Office Coordinator and/or Alternate so that other employees and SCPH can be officially notified.
4. Create a record of the incident by completing the County of Summit, Department of Law, Insurance and Risk Management Work Related Injury and Illness Report. (**The online form be found located on The County of Summit Intranet Scene**)
5. Forms must be completed within 48 hours after the incident has occurred (regardless of whether or not you seek medical care or treatment).
6. Completed forms are to be submitted directly to the Manager of Administration.
7. In the event there is further medical follow up due to an occupational accident, illness or injury, employee may be required to complete additional forms.

After Hours Reporting Procedure:

If an occupational accident, illness or injury occurs after business hours and REQUIRES medical attention, report the incident to your Supervising Manager as soon as possible. If the incident does NOT require medical attention, see the Business Hours Reporting procedure.

Section 6.0: Fire Safety

Upon discovering an actual fire, pull the nearest fire alarm. An emergency tone will be heard over the fire alarm system. The emergency tone will continue automatically during an emergency until silenced by Facilities Management or the Fire Department.

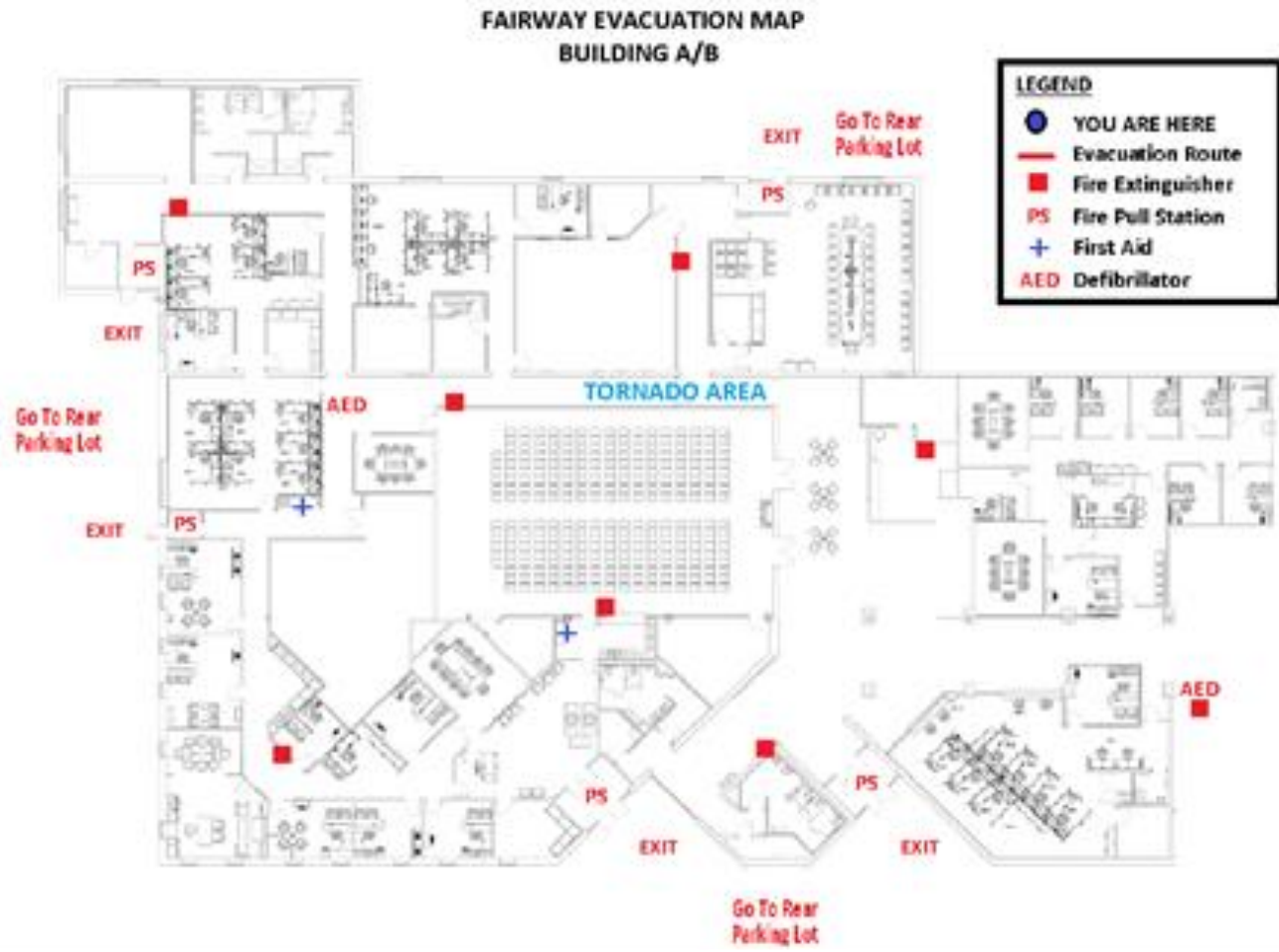
6.1: Fire Evacuation

- 1) Immediately evacuate the building via the closest and safest escape route present. An employee may take personal belongings (if it does not delay exiting), but should not return to the office area for personal belongings once evacuated.
- 2) If fire or smoke impedes your evacuation, attempt to exit via an alternate escape route. DO NOT EXIT TO A COURTYARD!
- 3) If you are trapped, close all doors separating you from the fire. If possible, stuff the cracks of the doors to keep out as much smoke as possible. Signal or call for help (9-1-1), notifying them of your exact position within the building.
- 4) If an alternate escape route is unavailable, crawl underneath the smoke toward the exit. DO NOT attempt if fire impedes your route.
- 5) Before opening doors, check the doors for warmth using the back of your hand. If the door is warm or smoke is visible, use an alternative door. Close all doors behind you (if vacated) to contain the fire.
- 6) Employees hosting guests are responsible for their visitors during building evacuation.
- 7) The Office Coordinator may be asked to check areas of the building (**on their way out**) where potential visitors or employees may be located, and to be sure doors are closed. Locations to check include:
 - a. Restrooms
 - b. Meeting Rooms

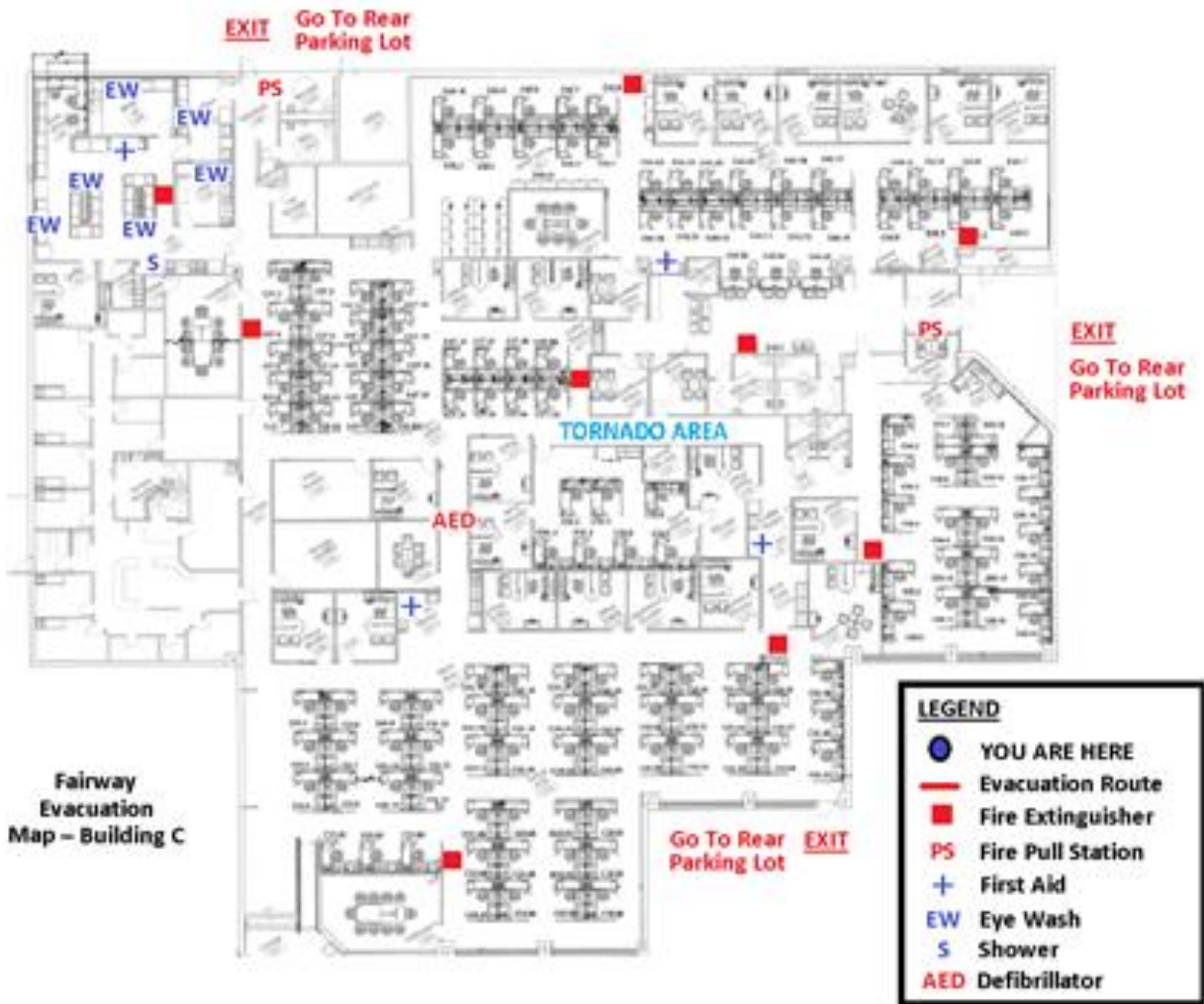
6.2: Fire Evacuation Area

- 1) Report to the designated evacuation meeting location: REAR PARKING LOT, BUILDNG B AREA.
- 2) A roster/sign-in sheets may be carried for employee and visitor accountability. If an employee or visitor is missing, immediately inform the Office Coordinator of the missing person(s).
- 3) Once out of the endangered area, do not attempt to re-enter without permission from authorized ADM personnel (via Operations Manager or Designated Alternate).
- 4) Remain in the evacuation location until advised by First Responders and given the clearance by Office Coordinator or Designated Alternate.

6.3: Fairway Building Evacuation Maps



FAIRWAY EVACUATION MAP
BUILDING B



Fairway
Evacuation
Map - Building C

Section 7.0: Utility Failures

If a utility failure (plumbing, electrical, heating, air conditioning, ventilation) occurs or presents a safety hazard, immediately notify the Office Coordinator or the Alternate Coordinator. The Office Coordinator will notify SCPH's facilities management.

If the utility failure requires an immediate evacuation, please follow the instructions below:

- 1) If an emergency exists, notify employees and visitors via the phone intercom (Dial 4444) or verbally (activate the building safety/fire alarm if immediate evacuation is required).
- 2) **Call 9-1-1** (if an emergency exists)
- 3) Assist the disabled in getting to a safety area so they can safely wait to be evacuated.
- 4) Once outside, move to a clear area (at least 500 feet) away from the affected building.
- 5) Keep streets, fire lanes, hydrants, and walkways clear for emergency vehicles and crews.

7.1: Information Technology Failures

For information technology failures, including Computers, Printers, Telephones, Internet, and/or other IT related functions, contact the Manager of Information Technology and or the Information Technology Specialist.

Section 8.0: Tornado Safety

Tornado Watch: This alert is issued by the National Weather Service when conditions are favorable for the development of tornadoes in and close to the watch area. Watch area can vary depending on the weather situation. "Watches" are usually issued for duration of 4 to 8 hours, if the conditions are right for a tornado, but none have been sighted. This is only a precautionary alert; employees are not in immediate danger. In the event of the issuance of a tornado watch, employees are to vigilantly continue their normal workday.

Tornado Warning: A tornado usually starts as a funnel cloud and may be accompanied by a loud roaring noise. A "warning" is issued by the National Weather Service when a tornado is indicated by radar or sighted by spotters; therefore, people in the affected area should seek safe shelter immediately. Tornadoes are unpredictable and should not be underestimated. If a tornado has been sighted in the area and emergency precautions need to be taken, notification is likely to first occur via an emergency weather radio with battery back-up, which is located in Area B43: Work Room.

- 1) Office Coordinator will notify office occupants/visitors of an impending tornado using the telephone intercom (dial 4444) or by personal verbal notification.
- 2) The Office Coordinator will bring the employee evacuation checklist, first aid kit, flashlight, and weather radio to the Designated Area (6.3: Fairway Building Evacuation Maps).

- 3) DO NOT attempt to leave the building. You are safer in the building than on the street or in a car. The greatest danger to employees may be from flying glass and other debris being tossed around.
- 4) All blinds on exterior windows should be closed as this will help protect from flying glass.
- 5) All doors to perimeter offices should also be closed as this will help to protect from flying glass and debris.
- 6) Remain calm and quiet, and listen for further instructions over the SCPH's public address system, SCPH's Facilities Management employee or the Office Coordinator.
- 7) Once the tornado danger passes, or if an "all clear" has been issued, employees may return to their work areas/offices.

Tornado Safety Procedure

- 1) Seek shelter immediately
- 2) If you are inside:
 - Go to the designated shelter
 - Close all doors and windows.
 - Stay away from windows or glass.
 - Move to the center of the room and if possible, under a sturdy table.
 - If possible assume the "**Drop and Tuck**" position.



Building B Tornado Designated Area

For maps of designated areas in Building A and Building C refer to 6.3: Fairway Building Evacuation Maps



Section 9.0: Medical Emergencies

Upon discovering or receiving information of a critical medical emergency, call **9-1-1** for the paramedics and give the following information:

- 1) TYPE of emergency: i.e. heart attack, stroke, seizures, etc.
- 2) LOCATION
- 3) NAME of person involved and STATUS of physical condition.
- 4) DO NOT TRY TO MOVE the person involved. This could do more harm than good. If you are qualified, perform emergency first aid.
- 5) CALL the Summit County Public Health Front Desk at 330-923-4891 or to relay the above information.

9.1: Automatic External Defibrillators (AEDS)

An automated external defibrillator (AED) is a lightweight, portable device that delivers an electric shock through the chest to the heart. Non-medical personnel and other lay rescuers who have been properly trained can use AEDs. (The American Heart Association, 2012)

AED Location: Building B
AED Location: Inside the SCPH Clinic

Employees are to refer to 6.3: Fairway Building Evacuation Maps for the location of AED's in Buildings A and C.

Section 10.0: Bomb Threat/ Telephone Threat

A bomb threat/ warning may be received by any employee. Persons making such calls do not normally call anyone in particular and will deliver their message to the first person contacted. Consequently, it is important that a call of this nature be handled in accordance with this established procedure. All bomb threats should be considered dangerous and should be taken seriously. The employee receiving the call should try to obtain all the information listed on the **Telephone Bomb Threat Checklist**.

The employee should immediately notify the Office Coordinator of the threat. If an emergency, call **9-1-1** and provide the dispatcher with information concerning the threat.

10.1: Bomb Threat/ Telephone Threat Checklist

TELEPHONE BOMB THREAT CHECK LIST

KEEP CALM: Do not get excited or excite others.

NAME of person who received call: _____ Dept: _____

EXACT WORDS of Caller: _____

TIME: Call Received _____AM/PM Terminated _____AM/PM

QUESTIONS TO ASK CALLER:

What time will the bomb go off? _____AM/PM

Where is it located? _____ What floor? _____ What area? _____

What does it look like? _____

What will cause it to explode? _____

“Why did you place the bomb?”

“I don’t think we can get everyone out in time ... can you tell me a little more about the bomb, like what kind it is?”

“Why do you want to kill or injure innocent people?”

“Is there anything we can do to stop the bomb from exploding?”

“Would you like to give me your name?”

DESCRIPTION OF CALLER’S VOICE:

Circle appropriate descriptive words:

<u>CALLER</u>	<u>VOICE</u>	<u>SPEECH</u>	<u>LANGUAGE</u>	<u>ACCENT</u>	<u>MANNER:</u>	
Male	Loud	Fast	Obscene	Local	Calm	Incoherent
Female	Soft	Slow	Coarse	Regional	Angry	Deliberate
Adult	Rough	Distinct	Normal	Foreign	Rational	Hysterical
Juvenile	High Pitch	Slurred	Educated		Irrational	Aggravated
Elderly	Deep	Stutter	Taped		Humorous	Drunken
	Disguised	Nervous				
<u>BACKGROUND SOUND</u>		Street Noises	House Noises	Voices	Factory Machinery	
		PA System	Music	Motor	Office Machinery	

MISCELLANEOUS:

Did caller indicate knowledge of the building? YES _____ NO _____

If voice is familiar, whom did it sound like? _____

What number did the call come in on? _____

Is this number listed or unlisted? _____

10.2: Suspicious Object or Package

If you observe or come in contact with a suspicious object or package, follow the procedure as outlined below:

- 1) Avoid moving or tampering with the suspicious object, do not handle the object or package.
- 2) Immediately notify the Office Coordinator regarding the suspicious object or package.
- 3) If after hours, immediately report the threat to the Executive Director by calling 330-931-6377.
- 4) Clear the immediate area around the suspicious object or package.
- 5) If an emergency, Call **9-1-1** and provide the dispatcher with information concerning the threat.
- 6) If evacuation is required report to the designated evacuation location.
Location: Building B Rear Parking Lot
- 7) Remain clear of any vehicles during the evacuation.
- 8) Do not re-enter the building until an all clear is received from Executive Director or Office Coordinator
- 9) Remain Calm – Do Not Panic

<u>Characteristics of a Suspicious Letter or Package</u>		
<u>Inappropriate /unusual labeling</u>	<u>Appearance</u>	<u>Other suspicious signs</u>
<ul style="list-style-type: none"> ○ Excessive Postage ○ No Return Address ○ Not Addressed ○ Misspellings ○ Incorrect Titles ○ Marked “Do Not X-Ray” ○ Threatening Language 	<ul style="list-style-type: none"> ○ Powdery Substance ○ Oily Stains, Discolorations ○ Lopsided or Uneven ○ Excessive wrapping 	<ul style="list-style-type: none"> ○ Excessive Weight ○ Ticking Sound ○ Protruding wires or aluminum foil

10.3: Hazardous Chemical Incident

The purpose of this policy is to protect employees and visitors in the event of having a hazardous materials chemical spill or release in the area of the ADM Board Offices. Hazardous chemicals are substances that are flammable or combustible, explosive, toxic, noxious, corrosive, oxidizable, an irritant or radioactive. A hazardous material spill or release can pose a risk to life, health or property. In the event of a hazardous chemical incident, notice will be given to the Office Coordinator. The Office Coordinator will investigate the incident and may direct employees and visitors to evacuate the building or relocate to a safer location.

In addition to any on-site hazards, there is the potential for an off-site incident that can affect the building. In the event, there is a hazardous chemical incident outside of the building the Executive Director may instruct employees to an area of refuge inside the Fairway Building. This is a controlled location has been identified within the facility in which egress will be possible. The location is intended to protect and/or limit the exposure from chemical, biological, or radiological contaminants instructions will then be provided when it is considered safe to leave the building.

Location 1: Summit County Public Health Auditorium

Note: If an employee or visitor requests to leave the facility at any given time they have a right to leave at their own discretion, regardless of the threat to their well-being.

10.4: Workplace Violence

The ADM Board strives to provide a safe and healthful working environment for its employees. Therefore, the ADM Board maintains a zero-tolerance policy towards workplace violence. Threats, threatening conduct, intimidation or any other acts of aggression or violence will not be tolerated. Any employee determined to have committed such acts will be subject to disciplinary action up to and including termination. If non-employees engage in violent acts on the Board's premises, they may be reported to law enforcement, crisis mental health services or other appropriate authorities for prosecution and/or treatment.

Employees shall inform their supervising manager if any employee, client or other individual exhibits any violent or threatening behavior in the workplace. Signs may include, but are not limited to, discussing weapons, displaying overt signs of extreme stress, resentment, hostility, or anger, making threatening remarks, sudden or significant deterioration of performance or displaying irrational or inappropriate behavior. If the supervising manager is not available, employees shall report any of the previously mentioned behavior to the Manager of Administration.

Related Policy: Employee Handbook 14.3: Workplace Violence Policy

10.5: Civil Disturbances

Civil disturbances, or unrest, can cause a variety of subsequent issues such as violence and assault, disorderly conduct, vandalism. When a civil disturbance threatens an area and employees in the building, immediately call **9-1-1**. It is imperative that you are able to give vital information such as (i) the exact location of the situation, (ii) the suspect(s) description, including if any weapons were seen, (iii) the direction of travel, if known, in the event the suspect(s) has left the scene, and (iv) a brief report of the event. If you are in a threatened location and are able to remove yourself do so immediately before making the notification(s).

The employee should communicate the disturbance to the Office Coordinator, who will pass the necessary information to employees to keep them up to date on the situation. Where possible the office Coordinator will continue to provide security with updates on what is actually occurring at the location (how many people involved, what activities they are engaging in, etc.).

Employees may consider any or all of the following actions to protect themselves and property;

- 1) Close and lock all external doors – considering need for emergency egress.
- 2) Make special arrangements for any visitors to safely leave the premises.
- 3) Secure essential or confidential records, consider backing up important computer files and lock away disks, files and papers.
- 4) Ensure that all offices and non-public areas are locked or sealed off.
- 5) Ensure someone knows where you are.
- 6) Avoid physical conflict with persons even if provoked.
- 7) Follow verbal instructions of police.

- 8) Consider evacuation if your safety is at risk

The office coordinator will notify employees when the incident is over, and advise when to return to business as usual.

10.6: Firearms and Other Weapons

It is the purpose of this policy to ensure that all employees understand that the possession of firearms and other weapons while on duty, while conducting Board business and on Board property is prohibited. The ADM Board prohibits employees from possessing any handguns, firearms, explosives, knives and other dangerous ordinances on the business premises. Employees are further prohibited from possessing any concealed or visibly carried firearm or other dangerous ordinance while on duty or while conducting ADM Board business, regardless of whether an employee possesses a concealed weapons permit under Ohio's Concealed Carry law, the employee may not carry or bring any weapon onto Board property, including parking lots and employee-owned vehicles parked in the ADM Board parking lot. The ADM Board also prohibits customers, vendors, visitors, and guests from possessing a weapon on ADM Board property. Any violation of this policy must be immediately reported to the employee's supervisor and/or the Manager of Administration for prompt investigation. In the event that a policy violation has occurred, the employee may be subject to disciplinary action. An employee who, in the course of her or his job duties, is confronted with a weapon should immediately leave the area and notify the police. The Office Coordinator or Alternate supervisor should be notified as soon as possible within the limits of personal safety.

11:0: Unusual Incident Reporting

This procedure does not supplant the employee work related injury report procedure. Employees injured or involved in an accident must follow the employee accident procedure as outlined in 5:13.

This procedure it is to provide a process whereby unusual incidents are recorded and investigated if warranted. The purpose of the investigation is to provide a systematic effort to gather relevant facts, to establish responsibility, to identify trends that might be developing, and to determine why and how the incident occurred so that conclusions and recommendations can be made about what can be done to provide a safer environment and to prevent recurrence.

An "unusual incident" shall be understood to mean any event that poses a danger to the health and safety of an individual and which is not consistent with routine operations.

Examples of a reportable unusual incident include:

- 1) Personal injury of a visitor or guests while on premises (including injuries requiring first aid, medical
- 2) Incidents involving employees, volunteers, vendors, visitors, Board members while serving in an official capacity of the ADM Board, regardless of the location attention, or property damage)
- 3) Involves a physical security breach, fire or explosion;
- 4) Involves unsafe practices and unsafe acts;
- 5) Incidents involving employees, volunteers, vendors, visitors, Board members while serving in an official capacity of the ADM Board, regardless of the location.

- 6) Near misses describe incidents where no property was damaged and no personal injury sustained, but where, given a slight shift in time or position, damage and/or injury easily could have occurred.
(National Safety Council)

In the event that an unusual incident occurs the employee should create a record of the incident by completing the "**Report of Unusual Incident**" form. Employees and individuals witnessing the reportable incident shall complete the: "**Statement of Witness to Unusual Incident**" form.

Report of Unusual Incident

This form is to be used as a formal mechanism regarding reporting and reviewing unusual incidents, which occur while at ADM Board Office or while doing activities undertaken on behalf of the ADM Board. This form is for incident investigation data collection and process improvement only.

1. Status of Person Reporting: <input type="checkbox"/> Board Member <input type="checkbox"/> Employee <input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other _____			2. Date of incident (mm/dd/yyyy): 			3. Time of incident: <div style="text-align: right;">AM <input type="checkbox"/> PM <input type="checkbox"/></div>	
4. Name: (Last, First, MI) 			5. Phone #: 		6. Alternate #: 		
7. Address, City, State, Zip Code: 			8. Email: 				
9. Address or location of incident: (Building, City) 							
10. Specific location where incident occurred: (Stairs, Conference, Room or Lobby. Give direction for more detail - N,S,E,W) 							
11. Nature of incident: <input type="checkbox"/> Minor Injury (First Aid Only) <input type="checkbox"/> Major Injury (Medical Attention required) <input type="checkbox"/> "Near Miss" Incident <input type="checkbox"/> Lost / Stolen Property <input type="checkbox"/> Unsafe Equipment <input type="checkbox"/> Workplace or Family Violence <input type="checkbox"/> Security / Trespassing <input type="checkbox"/> Non-Physical Hostility (Verbal threat/aggression) <input type="checkbox"/> Other (Explain below)							
12. Cause of incident: 							
13. How and why did this incident occur: (Be as detailed as possible, type, severity, conditions and if any injury occurred. Use additional sheets if necessary.) 							
14. Witnesses name, and contact information: (Witnesses should complete the <i>Witness Report of Unusual Incident</i> form.) 							
15. Signature of Person Completing Report: <i>I the undersigned acknowledge reporting this incident as described above.</i> 			16. Person Completing Report: (if different than named in Question 4.) 		17. Date Submitted: 		
16a. Phone #: (if different than named in Question 4.) 			16b. Email: (if different than named in Question 4.) 				

This form should NOT be used to report EMPLOYEE injury or illness.

Witness Report of Unusual Incident

This form is to be used as a formal mechanism regarding reporting and reviewing unusual incidents, which occur while at ADM Board Office or while doing activities undertaken on behalf of the ADM Board. This form is for incident investigation data collection and process improvement only.

1. Status of Person Reporting: <input type="checkbox"/> Board Member <input type="checkbox"/> Employee <input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other _____	2. Date of incident (mm/dd/yyyy): 	3. Time of incident: <div style="text-align: right;">AM <input type="checkbox"/> PM <input type="checkbox"/></div>
4. Witness Name: (Last, First, MI)	5. Phone #:	6. Alternate #:
7. Address, City, State, Zip Code:	8. Email:	
9. Address or location of incident: (Building, City)		
10. Specific location where incident occurred: (Stairs, Conference, Room or Lobby. Give direction for more detail - N,S,E,W)		
11. Nature of incident: <input type="checkbox"/> Minor Injury (First Aid Only) <input type="checkbox"/> Major Injury (Medical Attention required) <input type="checkbox"/> "Near Miss" Incident <input type="checkbox"/> Lost / Stolen Property <input type="checkbox"/> Unsafe Equipment <input type="checkbox"/> Workplace or Family Violence <input type="checkbox"/> Security / Trespassing <input type="checkbox"/> Non-Physical Hostility (Verbal threat/aggression) <input type="checkbox"/> Other (Explain below)		
12. Witness Statement (What did you observe? Be as detailed as possible, type, severity, conditions and injury. Use additional sheets if necessary.)		
13. Signature of person completing this report: <i>I the undersigned acknowledge reporting this incident as described above.</i> <hr style="width: 50%; margin-left: 0;"/>	14. Date Submitted: <div style="text-align: center;">Date should be within 24 hours of the Incident</div>	

12.0: Acknowledgment & Agreement

I acknowledge that I have received instruction on how to access the County of Summit Alcohol, Drug Addiction & Mental Health Services Board's Office Management and Emergency Procedures Manual.

I understand that I am obligated to familiarize myself with the ADM Board's safety, health, and emergency procedures as outlined. I further understand that this manual is for informational and educational purposes only and cannot cover all situations, nor does following the procedures in this manual assure or guarantee the safety of persons or property in the event of an emergency.

My signature below indicates that I have read, understand, and agree to abide by the ADM Board's procedures. I agree if there is any provisions in the policy and procedures I do not understand, I will seek clarification from my supervising manager or the manager of administration.

Print Name: _____

Signature of Employee _____

Date Signed _____