

MEDICAL INJURIES AND EMERGENCIES

TFML Policy No. 8

The Thomas Ford Memorial Library Staff will respond in an appropriate and considerate manner to provide assistance in the event of a medical emergency or accident where injuries are sustained. **FOR ANY EMERGENCY OTHER THAN A MEDICAL ONE SEE THE *SECURITY PROCEDURES MANUAL* LOCATED IN EACH DEPARTMENT.**

8.1 Insurance

The Library will maintain liability insurance in a sufficient amount to address claims arising from accident and/or injury of patrons or staff.

8.2 Accidents

Response will be varied depending on the severity of injury.

8.21 Minor Injury

First aid will be provided only by trained persons. In the event or occurrence of any injury requiring first aid, 9-1-1 may be called. The Circulation Desk should be notified if 9-1-1 is called so that they can direct emergency personnel to the proper department. If a person in the building identifies himself/herself as a medical professional and offers assistance, staff should neither encourage or discourage treatment of the injured person. First aid kits are kept in Adult Services and Youth Services offices and are available as needed. Band-aids, antiseptic, gauze, etc. may be offered to those who have cuts, bruises, scrapes, etc.

8.212 Minor Injuries to persons under the age of 18

8.2121 Responsible Adult Present

If a responsible adult is present he/she should perform any treatment needed (as applying the bandage to the wound). Staff members should provide assistance as needed.

8.2122 Responsible Adult Absent

If no responsible adult is present, the parent/guardian will be called to 1) explain injury or illness, 2) report what actions have been taken by the staff member, and 3) ask the parent or guardian what further action the Library should take including whether the minor should be held for pick-up or if they will provide consent to release the minor. In some instances it may be appropriate to call 9-1-1 before calling the parent

A follow-up letter reporting the incident will be mailed to the parent/guardian by the Library Director. If the Library was unable to reach the parent/guardian this letter will note that an unsuccessful attempt was made to contact the parent/guardian. If consent was given to release the minor, mention will

be made that this was done at the direction of the parent/guardian. A copy of the letter will be included for return to the Library with a space for signature to acknowledge receipt.

8.213 **Minor Injuries to patrons 18 years of age and older**

Patrons 18 years of age or older will be asked if they want to contact a family member and receive first aid. **If first aid is refused, staff is required to call 9-1-1 anyway.** Emergency personnel will have the injured adult sign a release form stating that he/she voluntarily refused medical treatment.

8.22 **Major Injuries and Medical Emergencies**

9-1-1 will be called immediately and the responding paramedics will be directed through the main library entrance to the location of the injured individual(s). A member of the library staff will stay with the victim until help arrives. If the victim is wearing a "Medic Alert" tag this will be pointed out to the responding paramedics. Family will be notified as appropriate and when possible.

8.3 **Biohazard Safety**

The Library will provide in-service training for Staff concerning biohazard exposure. A biannual training/review session will be held for Staff in cooperation with the Village's paramedics/medical emergency staff. **Any incident involving biohazards should be handled only by professionally trained individuals. CALL 9-1-1 in these instances.**

8.4 **Accident Reports**

An Accident Report will always be prepared for any emergency incident or one in which a patron sustains an injury and given to the Library Director for the Library's records. A copy of this form is appended to this policy.

Attachment: Accident/Incident Report Form

Adopted: March 20, 1997

Reviewed: October 22, 2002

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THOMAS FORD MEMORIAL LIBRARY

ACCIDENT/INCIDENT REPORT FORM

Date of Incident _____

Time of Incident _____

Name(s) of person(s) injured or involved. Please provide phone number(s) if available:

Name of persons (including Staff) at the accident/incident site:

Location in the Library where accident/incident occurred:

Describe accident/incident (narrative format; please provide details of what happened, presenting facts rather than opinions):

Describe any injuries to people or property:

Action taken by Staff:

Was police report filed? If yes, please provide the report's number.

Name of staff person who completed this form: _____

Signature _____ **Date** _____

Signature of Director acknowledging receipt of form
_____ **Date** _____

PLEASE PLACE COMPLETED FORM IN DIRECTOR'S MAILBOX. Revised 5/21/01.