

# MINOT-SLEEPER LIBRARY

## COVID-19 SCREENING AND SAFEGUARD MEASURES POLICY

Effective as of June 1, 2020

In order to promulgate safety in the workplace and to continue to combat the transmission of COVID-19, all Library employees, officials, and volunteers are subject to and must adhere to the following policy during work, official, or volunteer duties at the library (the use of the term “employee” in this policy shall also refer to Library officials and volunteers). This policy is based on guidance provided by the Centers for Disease Control and Prevention (CDC) and the State of New Hampshire, and supplements the Library’s policy on Pandemics. To the extent this policy conflicts with the Library’s Pandemic Policy, this policy shall control.

### PROCEDURE:

1. If an employee is sick, he or she shall stay home. If an employee is exhibiting any of the possible COVID-19 symptoms currently listed as: *(fever, respiratory symptoms such as runny nose, sore throat, cough or shortness of breath, flu like symptoms such as muscle aches, chills and severe fatigue or have a change in your sense of smell or taste)*, he or she should stay home and call their healthcare provider immediately.
2. Prior to reporting to work, everyone must check in with the Library Director, her designee, or supervisor on duty with a completed COVID-19 Screening Questionnaire (attached). The Questionnaire is to be completed prior to the employee arriving and starting their day at the Library. This questionnaire must be provided at the entrance of the building upon the employee’s first entrance into the Library each day. The person performing the screening of employees shall wear a cloth face covering/mask, as must the employee. Such records shall be considered confidential health related personnel records.
  - a. An employee must take their temperature immediately prior to arriving at work and record the reading on the Questionnaire. The Library reserves the right to take employee’s temperatures by a touchless thermometer upon an employee arriving at work.
  - b. If an employee answers yes to any of the questions on the Questionnaire, the employee must stay home and contact their healthcare provider immediately. Do not report to work. **This questionnaire must be completed by everyone prior to starting their work day at the Library.**
3. Employees entering the Library must wear a face mask at all times when social distancing is not an option. This means, everyone must wear a mask while:
  - a. Working in common areas of the Library;
  - b. While conducting face to face meetings or interactions with patrons;
  - c. While moving throughout the Library.

Care should also be taken when putting masks on and taking them off; for example, hands should be washed or disinfected prior to putting a mask on and taking one off. While in an

office with closed doors or working alone or at distance from other staff, masks can be removed. Masks must be worn in hallways and common areas. Care should be taken to keep your mask clean and uncontaminated.

**The only exception to wearing a mask is when an employee is in her office or workspace at a distance from other staff or while socially distancing at lunch.**

4. Practice social distancing to the greatest extent possible with coworkers, patrons, vendors, etc. Keep a distance of at least 6 or more feet between one another at all times.
5. Increase hygiene practices, including:
  - a. Wash hands and use hand sanitizer frequently;
  - b. Avoid touching the face, eyes and mouth;
  - c. Practice good respiratory etiquette. This includes coughing and sneezing into a tissue or your elbow rather than into your hands.
6. Continue workplace cleaning and disinfecting practices, including:
  - a. Regular sanitation of high-moderate touch surfaces (copiers, computers, bathroom surfaces, banisters, etc.);
  - b. Sanitize rooms after meetings;
  - c. Sanitize shared workspace upon change of shift.

### **EMPLOYEE/VOLUNTEER ACKNOWLEDGMENT**

I hereby acknowledge receipt of the “Minot-Sleeper Library COVID-19 Screening and Safeguard Policy.”

Employee/Official/Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_