PHASE 3 LIBRARY REOPENING –
JUNE 15, 2020

N L
Naperville Public Library

Naperville Public Library buildings are open to the public in a limited capacity beginning June 15, 2020. The safety of staff and customers is the library's top priority. The following guidelines detail how the library will safely carry out Phase 3.

LIBRARY SERVICES AND HOURS

- Naperville Public Library will be open for browsing and check-out of materials. Customers will be asked not to spend an extended period of time in the library.
- We will continue to provide chat, text, email, and phone reference services.
- The library will be open normal summer hours:
  - Monday through Friday 9:00am – 9:00pm
  - Saturday 9:00am – 5:00pm
  - Sunday 1:00pm – 5:00pm
- Hours for vulnerable populations will be 9:00 –10:00am Monday through Friday. The classification of "vulnerable" will be self-monitored.
- Staff and customers are required to wear masks at all times in the library. The library will have a few masks available for customers should someone enter the building without a mask, but we cannot provide one to everyone.
- Drive-thru book returns and in-house material returns will remain open. All returned materials will be quarantined for a minimum of 3 days.
- Spaces in each building will be configured to ensure social distancing.
- All chairs will be removed in public seating areas. If certain chairs cannot be removed, we will prevent seating using tape or other barriers.
- Scanning stations will be available for self-service use.
- We will enforce an estimated total number of customers allowed in the library. A staff member will be at the front door ensuring we do not reach building capacity. The capacity for each building is:
  - Nichols: 215 customers
  - Naper Blvd: 75 customers
  - 95th Street: 165 customers
- Meeting rooms, study rooms, and similar areas will be closed to the public.
- All toys will be removed from Children's Departments.
- Water fountains and vending machines will be closed.

SELF-CHECK STATIONS

- Self-check stations will be reconfigured to encourage social distancing.
- A dedicated staff member will work with customers at the self-check stations.
- Customers will line up in one queue, spaced at least 6 feet apart (denoted by stickers on the floor). This line will be for used for all self-check stations.
- A staff member will call customers up to use self-check stations one at a time. When a customer finishes using their station, the staff member will clean the station before calling forward the next customer.
- Protective coverings will be added over the screens for easy sanitizing.
- If a customer has finished using a basket, they will leave it with the staff member at the self-check station. The staff member will sanitize the basket and handle so it is ready for the next customer.

PUBLIC COMPUTER LABS

- Public computers will not be available on June 15, but we are planning to make them available June 29.
- A lesser number of public computers will be available by appointment only.
- Customers will call the Adult Services desk to make an appointment.
- Computers will be spaced at least 6 feet apart.
- Protective coverings will be added over the screens and keyboards for easy sanitizing.
- Computers that cannot be used will be turned off, and mice and keyboards will be removed.
- Teen and children's computers will not be available for public use during this phase.
- All tech buffet equipment will be covered or removed.
- We will alert customers that one-on-one personalized service is suspended at this time. Staff can help answer questions at the service desk.

SERVICE DESKS

- Only 1 staff member will sit at the service desk at a time to maintain social distancing norms.
- Customers and staff at desks will follow social distancing recommendations.
- We will alert customers that one-on-one personalized service is suspended at this time. Staff can answer questions at the service desk.
- All desk materials (pens, pencils, staplers, etc.) should be put out of public reach and only available upon request. Staff will disinfect any shared supplies upon their return by a customer.
- Customers will be asked to check out at self-check stations or by using the library app.

PERSONS-IN-CHARGE (PICs)

- PICs will receive talking points and attend virtual training on dealing with difficult customer interactions regarding new safety measures, including how to deal with customers who are not wearing masks, and customers concerned about others' symptoms.
- Staff who are scheduled to work as PIC should not be stationed at any other location; their main duty during PIC shifts will be to be available to staff and customers to ensure cleaning and safety measures are being followed.

COLLECTION HANDLING

- Materials will continue to be quarantined for 72 hours or as suggested by CDC/IDPH.
- Check-in staff will continue wearing gloves to handle materials.
- Current issue magazines will be available for checkout.
- Newspaper subscriptions will be cancelled until further notice.
- We will ensure staff are not sitting within 6 feet of in-house return bins.
- Returned materials will not be accepted at the service desk.

SAFETY MEASURES

- Cleaning supplies, gloves, masks, and safety shields will be provided to all staff, including new staff hired during Phase 3.
- Staff and customers are required to wear masks at all times in the library.
- Gloves are optional. If a staff member chooses not to wear gloves, they should wash their hands or use hand.sanitizer frequently.
- Safety shields are also optional.
- Hand sanitizer stands will be available at all entrances for the public and staff.
- Staff will be provided with COVID-19 information to help them determine if they should stay home or quarantine. Staff should continue to stay home if they are feeling unwell.
- Staff scheduled in workrooms should be limited to help ensure social distancing.
- Service desk staff should sit at least 6 feet apart.
- Plexiglass shields will be installed at all public service desks.

PROGRAMS AND ROOM RESERVATIONS

- All in-person programs are cancelled until at least July 31.
- Programming can continue virtually.
- Staff can begin investigating and implementing "pick up" programming, where supplies can be provided, and tutorials can be followed via virtual channels.
- Children's Summer Reading program prizes will be provided upon registration in in a kit for parents/guardians.
- Adult and Teen Summer Reading Program prizes will be picked up at service desks.
- Room reservations are not available for public use until at least June 30. Customer room reservation is currently disabled on the library's website.
- When room reservations are opened back up, guidelines will be set, including limiting groups to fewer than 10 people and using one generic setup.
- There will be no printed program guide for the summer or fall sessions.

SIGNAGE AND MARKETING

- Promotion of our reopening date and plan began on May 29, 2020.
- Customers will be provided information prior to their visit so they can plan accordingly. We will highlight that we are doing a phased reopening with reduced services, social distancing and mask requirements, and other service changes via social media, website, newsletter, signage, etc.
- We will install foam core signs at all entrances to outline available services and provide a reminder of face coverings, social distancing, and other safety behavior .
- We will install floor markings for physical distancing at self-check stations and service desks.
- We will install signage at aisles for one-way usage.
- We will install COVID-19 best practice signage in bathrooms.

CLEANING

Additional cleaning information is available in the Cleaning Guidelines.

N P L COVID-19 EMPLOYEE TRAINING

Naperville Public Library

The attached documents provide information about COVID-19, how it spreads, what you can do to minimize the spread, and your options for different situations that you may encounter.

TABLE OF CONTENTS

COVID-19 Info Sheet

What is COVID-19?

- COVID-19 is the name for the disease caused by the virus **SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2)**, identified in 2019.

- A "Novel Coronavirus" is a coronavirus that has not previously been identified.

- Coronaviruses are a **large family of viruses** that are common in people and many animals.

What's up with that picture I see of the virus?
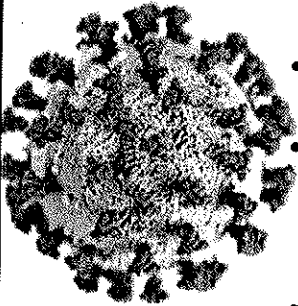
- This image is an **illustration** made by Alissa Eckert, a medical illustrator with the U.S. CDC. She designed this with the public in mind.

- The **gray surface** is a spherical envelope that surrounds the nucleus of the virus, which contains genetic material.
- **Orange bits** are a "membrane proteins," or M proteins, the most abundant structural protein in the virus and one that gives it form. These and other proteins vary from one type of virus to another, and can be used to help understand or identify one virus from another.
- **Yellow bits** are envelope proteins (E proteins), the smallest of the structural proteins. They play an important role either in regulating virus replication
- **Red spikes:** These clumps of proteins (called S proteins) are what the virus uses to gain entry into and attach to the cell. They also create the effect of a halo, or corona, around the virus.

How do I catch it?

- The virus is thought to spread mainly from person to person, through **respiratory droplets** produced when an infected person coughs or sneezes. These droplets can **land in mouths or noses, or are inhaled into the lungs**.

- Spread is more likely when people are in close contact with one another (within 6 feet)

Sources

- Medicalnewstoday.com
- John Hopkins (jhsph.edu)
- medlineplus.gov
- ncbi.nlm.nih.gov/genbank/sars-cov-2-seqs/
- dph.illinois.gov/

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General Virus Info

What is a Virus?

- Viruses are microscopic parasites, generally much smaller than bacteria.

- They lack the capacity to thrive and reproduce without a host cell, they are totally dependent on the host, and the only type of microorganism that cannot reproduce without a host cell.

- They are the most abundant biological entity on the planet.

- There are no cures for a virus, but vaccines can prevent them from spreading.

How do you treat a virus?

- Viral infections require either a vaccine to prevent them, or antiviral drugs to treat them.

- Often, you can only treat the symptoms of a viral infection, and wait for your body's immune system to create antibodies. **Antibodies** are molecules that attach to a virus and causes the virus to stop functioning.

- Many viruses are defeated by what is known as **"herd immunity."**

- **Herd Immunity** occurs when most of a population is immune to an infectious disease. This provides indirect protection to those who are not immune. If fewer that **92-95%** of people are immune, a break out can occur.

What viruses have been eliminated?

- In the US, there is a long list of viruses that have been eliminated. **Elimination** occurs when the virus has stopped circulating in a region, through the discovery of vaccinatons and the effects of herd immunity.

- **Eradication** is when a disease has been eliminated worldwide.

- To date, only one infectious disease has been eradicated: small pox. However, several are on the verge of eradication.

Sources

- Medicalnewstoday.com
- John Hopkins (jhsph.edu)
- medlineplus.gov
- ncbi.nlm.nih.gov/genbank/sars-cov-2-seqs/
- dph.illinois.gov/
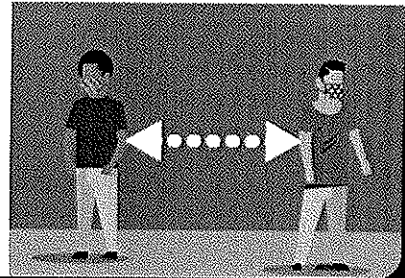
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Social Distancing

Social distancing, also called "physical distancing," means keeping space between yourself and other people outside of your home.

To practice social or physical distancing:

- Stay at least **6 feet** (about 2 arms' length) from other people.

- Do not gather in groups.

- Stay out of crowded places and avoid mass gatherings.

Tips for Social Distancing While at Work

- Avoid face-to-face in-person meetings, even if it's just a one-on-one.

- Stagger breaks and meal times.

- Don't congregate in break rooms, work rooms or other common areas.

- Do not share headsets or other objects that are near your mouth or nose.

- Take precautions to wipe down areas where you've been.

- Wash your hands before and after entering a shared workspace or break room.

- Remember to wear your mask while in the building, and wash your hands, or use an alcohol based hand rub, regularly.

How to Wear Your Mask

Cover mouth and nose with mask and make sure there are no gaps between your face and the mask

Avoid touching the mask while using it; if you do, clean your hands with alcohol-based hand rub or soap and water

Replace the mask with a new one as soon as it is damp and do not re-use single-use masks
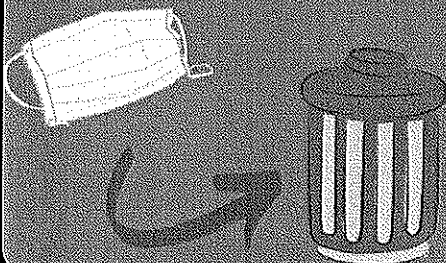
To remove the mask: remove it from behind (do not touch the front of mask); discard immediately in a closed bin; clean hands with alcohol-based hand rub or soap and water

World Health Organization

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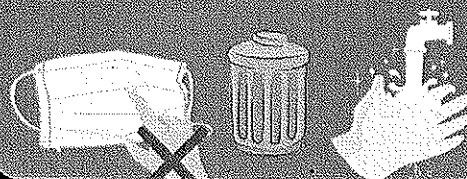
How to Use Your Gloves

I. HOW TO DON GLOVES:

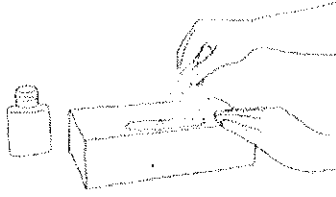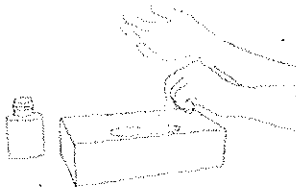1. Take out a glove from its original box

2. Touch only a restricted surface of the glove corresponding to the wrist (at the top edge of the cuff)

3. Don the first glove

4. Take the second glove with the bare hand and touch only a restricted surface of glove corresponding to the wrist
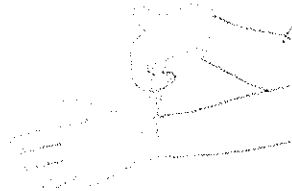
5. To avoid touching the skin of the forearm with the gloved hand, turn the external surface of the glove to be donned on the folded fingers of the gloved hand, thus permitting to glove the second hand
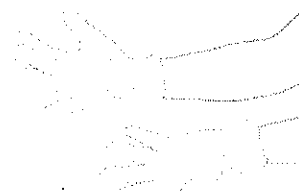
6. Once gloved, hands should not touch anything else that is not defined by indications and conditions for glove use

II. HOW TO REMOVE GLOVES:

1. Pinch one glove at the wrist level to remove it, without touching the skin of the forearm, and peel away from the hand, thus allowing the glove to turn inside out

2. Hold the removed glove in the gloved hand and slide the fingers of the ungloved hand inside between the glove and the wrist. Remove the second glove by rolling it down the hand and fold into the first glove
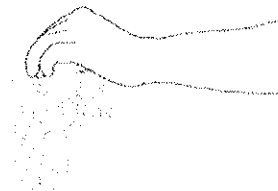
3. Discard the removed gloves

4. Then, perform hand hygiene by rubbing with an alcohol-based handrub or by washing with soap and water

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What should I do if...

I've been in close contact with someone...

- ...who has tested positive for COVID-19?
- ...who is being tested?
- ...who might have been exposed...
  - ...and IS experiencing symptoms?
  - ...but IS NOT experiencing any symptoms (yet)?
- ...who has been in close contact with someone ELSE who might have been exposed?

Self-quarantine AND self-monitor

Self-monitor AND practice social distancing

Practice social distancing

How do I...

...self-quarantine?

STAY HOME for 14 days.

AVOID CONTACT with other people.

DON'T SHARE household items.

Learn more at
medical.mit.edu/HowTo#self-quarantine

...self-monitor?

BE ALERT for symptoms of COVID-19, especially a dry cough or shortness of breath.

TAKE YOUR TEMPERATURE every morning and night, and write it down.

CALL your doctor if you have trouble breathing or a fever (temperature of 100.4°F or 38°C).
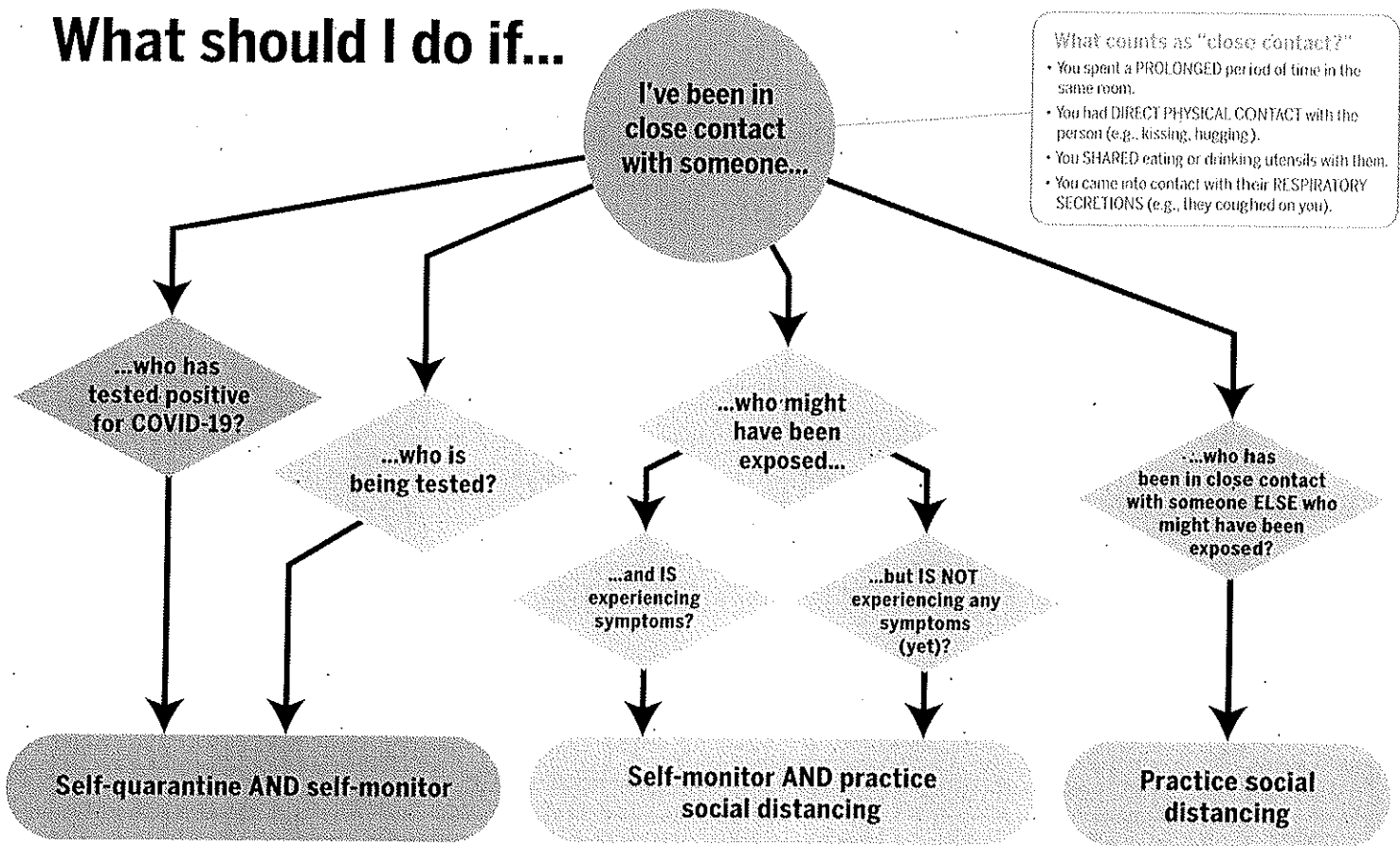
DON'T seek medical treatment without calling first!

Learn more at
medical.mit.edu/HowTo#self-monitor

...practice social distancing?

STAY HOME as much as possible.

DON'T physically get close to people; try to stay at least 6 feet away.

DON'T hug or shake hands.

AVOID groups of people and frequently touched surfaces.

Learn more at
medical.mit.edu/HowTo#distance

And practice great hygiene!

WASH your hands frequently • **AVOID TOUCHING** your face • **WIPE DOWN** frequently touched surfaces regularly

Learn more at medical.mit.edu/HowTo#hand-hygiene

What if I have symptoms?

If you experience symptoms, such as fever, dry cough, or difficulty breathing, **call MIT Medical's COVID-19 hotline: 617-253-4865.**

MITMedical

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I want to know more about COVID-19, who should I call?

For **general** questions about COVID-19, call the IDPH COVID-19 Hotline at 1 800 889 3931 or email DPH.SICK@illinois.gov. Note the Hotline does not make decisions about who should be tested for COVID-19.
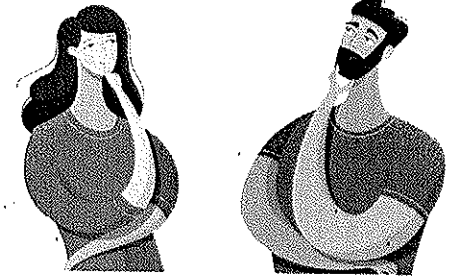
I am not feeling well and have respiratory symptoms, what should I do?

- If you are ill, stay at home and away from others. **You can leave home after three things have happened:** A *minimum* of 7 days have passed since your symptoms first appeared, you have had no fever without the use of medicine that reduces fever for at least 72 hours, and other symptoms (e.g., cough, shortness of breath) have improved.

You should consult with your doctor if you have:

- Fever, cough, trouble breathing, or other flu like symptoms that are not better or are worsening after 24-48 hours.

- Mild symptoms and are pregnant, have a weakened immune system, have chronic health conditions or are an older adult (60+).

Don't call the health department about getting testing

- Your health care provider will determine if you should be tested and, if necessary, contact the health department.

- Health departments do not collect specimens for COVID-19

I think I need immediate medical attention, who should I call?

- If you need immediate medical attention, and you think you may have COVID-19, call ahead to your health care provider before going in for care. This will allow them to take the right steps to protect themselves and other patients

- If you think you are having a medical emergency, call 911; if you have been exposed to COVID-19, notify dispatch personnel so emergency medical services personnel are prepared.

IDPH
ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Questions about COVID-19?
Call 1-800-889-3931 or email dph.sick@illinois.gov
Illinois Department of Public Health - www.dph.illinois.gov
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N P L **EMPLOYEE HEALTH QUESTIONNAIRE**
Naperville Public Library

Your supervisor may ask you to complete the following questionnaire if you are exhibiting symptoms of COVID-19 or may have recently been in a high-risk situation.

Employee Name:

Date:

Name of Person Completing Questionnaire:

1. Have you experienced one of the following symptoms over the past seven days:

Persistent cough?	⌊ Yes	⌊ No	Muscle Pain/Aches	⌊ Yes	⌊ No
Shortness of breath?	⌊ Yes	⌊ No	Headache	⌊ Yes	⌊ No
Chills	⌊ Yes	⌊ No	Sore Throat	⌊ Yes	⌊ No
Repeated shaking/chills	⌊ Yes	⌊ No	Loss of Taste/Smell	⌊ Yes	⌊ No
Fever (Temperature above 100.4 F)	⌊ Yes	⌊ No			

2. Have you recently (in the past 14 days) been in close contact with anyone who has exhibited any of the above symptoms? (Close contact means within less than six feet for a prolonged period of time). ⌊ Yes ⌊ No

3. Have you recently (in the past 14 days) been in contact with someone who has tested positive for COVID-19 or been advised to self-isolate by a medical professional due to COVID-19 reasons? ⌊ Yes ⌊ No

4. Have you recently (in the past 14 days) traveled internationally? ⌊ Yes ⌊ No

These responses are accurate to the best of my knowledge. I agree to follow the instructions provided to me by the employer. If I believe that my symptoms are related to a separate condition, I will seek documentation from my physician and provide it to my employer.

Employee Signature:

Date:

IF A STAFF MEMBER TESTS POSITIVE FOR COVID-19

1. We will notify all staff immediately.
2. We will include the date/time the employee was last in our building(s) and identify which building(s)
3. We will not identify the affected employee, in accordance with applicable privacy laws.

As part of our commitment to the health and safety of our employees, we will immediately begin taking steps to minimize the impact on our staff and workplace. This includes:

- Placing the affected employee on a leave of absence while the employee follows the quarantine recommendations of the CDC and their doctor.
- Reaching out directly to those employees and other contacts whom we are aware were in "close contact" with the affected employee which is defined by the CDC as "being within approximately 6 feet of a COVID-19 case for a ***prolonged period of time**" and would have been potentially exposed to the virus. We will ask these individuals to self-quarantine as recommended by the CDC and their doctor.
- Potentially closing the building(s) for a period of time (determined by various factors).
- Implementing regular routine cleanings, as well as deep cleanings and disinfections of our facilities, as recommended by the CDC, OSHA and/or Department of Public Health.
- Continue providing employees with appropriate personal protective equipment, such as gloves, masks, etc.

We continue to encourage all employees to follow recommended hygiene and social distancing practices included in this documentation to minimize the risk of infection

If you or someone in your household has been directly exposed to or experiences symptoms of COVID-19, please contact your supervisor and HR Manager as soon as possible. If you have any questions or concerns, please don't hesitate to reach out to your supervisor or Human Resources.

*Prolonged period of time: Recommendations vary on the length of time of exposure, but 15 min of close exposure can be used as an operational definition. Brief interactions are less likely to result in transmission; however, symptoms and the type of interaction (e.g., did the person cough directly into the face of the individual) remain important.

EMPLOYEE RIGHTS

PAID SICK LEAVE AND EXPANDED FAMILY AND MEDICAL LEAVE UNDER THE FAMILIES FIRST CORONAVIRUS RESPONSE ACT

The **Families First Coronavirus Response Act (FFCRA or Act)** requires certain employers to provide their employees with paid sick leave and expanded family and medical leave for specified reasons related to COVID-19. These provisions will apply from April 1, 2020 through December 31, 2020.

▸ PAID LEAVE ENTITLEMENTS

Generally, employers covered under the Act must provide employees:

Up to two weeks (80 hours, or a part-time employee's two-week equivalent) of paid sick leave based on the higher of their regular rate of pay, or the applicable state or Federal minimum wage, paid at:

- 100% for qualifying reasons #1-3 below, up to $511 daily and $5,110 total;
- ⅔ for qualifying reasons #4 and 6 below, up to $200 daily and $2,000 total; and
- Up to 12 weeks of paid sick leave and expanded family and medical leave paid at ⅔ for qualifying reason #5 below for up to $200 daily and $12,000 total.

A part-time employee is eligible for leave for the number of hours that the employee is normally scheduled to work over that period.

▸ ELIGIBLE EMPLOYEES

In general, employees of private sector employers with fewer than 500 employees, and certain public sector employers, are eligible for up to two weeks of fully or partially paid sick leave for COVID-19 related reasons (see below). *Employees who have been employed for at least 30 days* prior to their leave request may be eligible for up to an additional 10 weeks of partially paid expanded family and medical leave for reason #5 below.

▸ QUALIFYING REASONS FOR LEAVE RELATED TO COVID-19

An employee is entitled to take leave related to COVID-19 if the employee is unable to work, including unable to **telework**, because the employee:

1. is subject to a Federal, State, or local quarantine or isolation order related to COVID-19;	**5.** is caring for his or her child whose school or place of care is closed (or child care provider is unavailable) due to COVID-19 related reasons; or
2. has been advised by a health care provider to self-quarantine related to COVID-19;	**6.** is experiencing any other substantially-similar condition specified by the U.S. Department of Health and Human Services.
3. is experiencing COVID-19 symptoms and is seeking a medical diagnosis;	
4. is caring for an individual subject to an order described in (1) or self-quarantine as described in (2);	

▸ ENFORCEMENT

The U.S. Department of Labor's Wage and Hour Division (WHD) has the authority to investigate and enforce compliance with the FFCRA. Employers may not discharge, discipline, or otherwise discriminate against any employee who lawfully takes paid sick leave or expanded family and medical leave under the FFCRA, files a complaint, or institutes a proceeding under or related to this Act. Employers in violation of the provisions of the FFCRA will be subject to penalties and enforcement by WHD.

WAGE AND HOUR DIVISION
UNITED STATES DEPARTMENT OF LABOR

For additional information or to file a complaint:
1-866-487-9243
TTY: 1-877-889-5627
dol.gov/agencies/whd

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WH1422 REV 03/20

FAMILIES FIRST CORONAVIRUS RESPONSE ACT (FFCRA) AND OTHER FAQ

1. **What if I am not comfortable returning to work because I fear catching COVID-19?**
   General fear is not a qualifying reason for leave under the FFCRA, however, if anyone is afraid to return to work, we will discuss options with your supervisor and consider the use of PTO when applicable.

2. **What if I have been directly exposed by someone I live with, am I eligible for the two-week paid leave?**
   In order to qualify for the FFCRA Leave, you would need to provide medical documentation confirming your exposure.

3. **What if my elderly relative cares for my child(ren) while I'm at work and I am not comfortable sending my children there for fear of exposing the elderly caretaker, does this meet the qualification reason #5?**
   No. You would need to provide supporting documentation from your daycare provider stating they are unable to provide daycare due to COVID-19 related risk.

4. **What's the difference between the EPSL and EFMLA?**
   EPSL (Emergency Paid Sick Leave) allows two weeks pay/partial pay for qualifying reasons (six total) under the Act.
   1. The employee is subject to a federal, state or local quarantine or isolation order related to COVID-19. (100% pay)
   2. The employee has been advised by a health care provider to self-quarantine due to concerns related to COVID-19. (100% pay)
   3. The employee is experiencing symptoms of COVID-19 and seeking a medical diagnosis. (100% pay)
   4. The employee is caring for an individual who is subject to either number 1 or 2 above. (2/3 pay)
   5. The employee is caring for his or her child if the school or place of care of the child has been closed, or the childcare provider of such child is unavailable, due to COVID-19 precautions. (2/3 pay)
   6. The employee is experiencing any other substantially similar condition specified by the Secretary of Health and Human services in consultation with the Secretary of the Treasury and the Secretary of Labor. (2/3 pay)
   EFMLA (Emergency FMLA) allows up to twelve weeks partial pay for qualifying reason #5 only:

5. The employee is caring for his or her child if the school or place of care of the child has been closed, or the childcare provider of such child is unavailable, due to COVID–19 precautions. (2/3 pay)

5. **Can I use PTO during the first two weeks of EFMLA** *(the first two weeks of EFMLA are unpaid)***?**
   Yes. As long as it is agreed upon in writing.

6. **Can I use these leaves congruently? Can I take more than one leave per year?**
   You may use the two-week EPSL to supplement the first unpaid two weeks of the EFMLA, assuming you meet the qualifications and provided proper documentation.
   You may use these leaves concurrently, or separately, but not repeatedly.
   > Example: If you use the two week Paid Sick Leave, you may still be eligible for the Paid FMLA. But once you have used both leaves, you may not qualify to use them again.

7. **If approved for EFMLA, is it calculated separately from regular FMLA?**
   No. It is 12 weeks combined total.
   > Example: You have currently used 6 weeks FMLA during the 2020 calendar year, you would have 6 weeks remaining for EFMLA.

8. **If my daycare is a friend/relative who has decided to stop caring for children at this time due to COVID-19 risk, what do I need to provide?**
   You can use the FFCRA request form and attach a note from your daycare provider stating they are unable to provide daycare services due to COVID-19 related risks.

9. **If I have been <u>indirectly</u> exposed to someone <u>believed</u> to have COVID-19, what do I do?** *(refer to Flowchart)*
   1. Speak with your supervisor first.
   2. You may continue working, but communicate regularly, monitor your health, and notify your supervisor if anything changes or the alleged case is confirmed as COVID-19.
   3. Always seek medical evaluation if you develop symptoms or have concerns.

10. **If I have been <u>indirectly</u> exposed to someone with a <u>confirmed</u> case of COVID-19, what do I do?** *(refer to Flowchart)*
   1. Speak with your supervisor first.
   2. Determine based on circumstances whether you should isolate.
      i. Do you live with someone who was in direct contact with the person?

ii. Do you know, work with, or occasionally see someone who may have been exposed to the infected person?
3. Depending on the answers to number 2, you and your supervisor can decide if you should continue working or not.
4. In every situation, communicate regularly, monitor your health, and notify your supervisor if anything changes.
5. Always seek medical evaluation if you develop symptoms or have concerns

11. If I do not have any PTO available, and choose to stay home (or I'm sent home), what will happen?

You will be unpaid until you return to work and/or other arrangements are made.

> *Side note: if you are sent home because you are displaying symptoms, you will be paid for the day you were sent home and either PTO or regular pay thereafter depending on further diagnosis and confirmation of COVID-19.*

12. If I have PTO available, but would rather not use it, can I request time off without pay?

No. If you have PTO available, you will be paid with PTO.

13. How do I request the Leave?

1. Speak with your supervisor
2. Complete the appropriate Leave Request Form (the form will be provided to you upon request by either your supervisor or HR)
3. Submit to HR

14. Vacation Accruals Maxed out *(nonrelated but wanted to include as I have received many questions about this)*

Vacation hours do not expire. You accrue up to your maximum amount. And fortunately, we continued to allow accruals while we were closed.

For those who have reached your maximum accrual, you will have plenty of time available when we return to our full work schedules.

Please however keep in mind approvals will be handled according to organizational needs.

Naperville Public Library
Employee Receipt and Acknowledgment Form

As an employee of the Naperville Public Library, I have been provided the following documents and procedures related to COVID19 and the return to work. I am expected to read and fully understand these documents prior to June 15, 2020.

- COVID-19 Employee Training
- COVID-19 Staff Cleaning Guidelines
- Phase 3 Library Reopening

I understand it is my responsibility to monitor my health, report any illness and/or COVID19 related symptoms, and adhere to the procedures in place.

These documents are posted on Sharepoint and will be reviewed and updated regularly. The information may change as these are unpredictable times and circumstances, and revisions will be communicated library-wide. Revised information may supersede, modify, or eliminate existing policies and guidelines.

Employee's Printed Name: _____

Employee's Signature: _____

Date: _____

EMPLOYEE RIGHTS
PAID SICK LEAVE AND EXPANDED FAMILY AND MEDICAL LEAVE
UNDER THE FAMILIES FIRST CORONAVIRUS RESPONSE ACT

The **Families First Coronavirus Response Act (FFCRA or Act)** requires certain employers to provide their employees with paid sick leave and expanded family and medical leave for specified reasons related to COVID-19. These provisions will apply from April 1, 2020 through December 31, 2020.

► PAID LEAVE ENTITLEMENTS
Generally, employers covered under the Act must provide employees:

Up to two weeks (80 hours, or a part-time employee's two-week equivalent) of paid sick leave based on the higher of their regular rate of pay, or the applicable state or Federal minimum wage, paid at:

- 100% for qualifying reasons #1-3 below, up to $511 daily and $5,110 total;
- ⅔ for qualifying reasons #4 and 6 below, up to $200 daily and $2,000 total; and
- Up to 12 weeks of paid sick leave and expanded family and medical leave paid at ⅔ for qualifying reason #5 below for up to $200 daily and $12,000 total.

A part-time employee is eligible for leave for the number of hours that the employee is normally scheduled to work over that period.

► ELIGIBLE EMPLOYEES
In general, employees of private sector employers with fewer than 500 employees, and certain public sector employers, are eligible for up to two weeks of fully or partially paid sick leave for COVID-19 related reasons (see below). *Employees who have been employed for at least 30 days* prior to their leave request may be eligible for up to an additional 10 weeks of partially paid expanded family and medical leave for reason #5 below.

► QUALIFYING REASONS FOR LEAVE RELATED TO COVID-19
An employee is entitled to take leave related to COVID-19 if the employee is unable to work, including unable to **telework**, because the employee:

1. is subject to a Federal, State, or local quarantine or isolation order related to COVID-19;	**5.** is caring for his or her child whose school or place of care is closed (or child care provider is unavailable) due to COVID-19 related reasons; or
2. has been advised by a health care provider to self-quarantine related to COVID-19;	**6.** is experiencing any other substantially-similar condition specified by the U.S. Department of Health and Human Services.
3. is experiencing COVID-19 symptoms and is seeking a medical diagnosis;	
4. is caring for an individual subject to an order described in (1) or self-quarantine as described in (2);	

► ENFORCEMENT
The U.S. Department of Labor's Wage and Hour Division (WHD) has the authority to investigate and enforce compliance with the FFCRA. Employers may not discharge, discipline, or otherwise discriminate against any employee who lawfully takes paid sick leave or expanded family and medical leave under the FFCRA, files a complaint, or institutes a proceeding under or related to this Act. Employers in violation of the provisions of the FFCRA will be subject to penalties and enforcement by WHD.
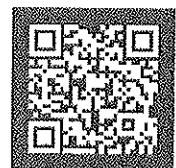
WAGE AND HOUR DIVISION
UNITED STATES DEPARTMENT OF LABOR

For additional information
or to file a complaint:
1-866-487-9243
TTY: 1-877-889-5627
dol.gov/agencies/whd

WH1422 REV 03/20

Naperville Public Library
FMLA Leave Extension and Emergency Paid Sick Leave Policy Due to COVID-19

The purpose of this policy is to provide an option for staff for reasons related to COVID-19, after the expiration of the Families First Coronavirus Response Act (FFCRA). These provisions will begin on January 1, 2021 and will expire on June 30, 2021. The policy may be modified or amended as mitigation levels change or as NPL deems necessary.

Employees who are seeking a leave for reasons outside of this policy may still be eligible under NPL's other leave policies such the Family Medical Leave Act Policy and General Leave of Absence Policy and should refer to those policies for additional information.

PAID LEAVE FOR COVID-19 EXPOSURE OR SYMPTOMS

Employees are eligible for up to two weeks (for example, 80 hours for a 40-hour employee) of paid sick leave time for COVID-19 related qualifying reasons. An employee is eligible to take leave, if employee is unable to work, including telework, for one or more of the following reasons:

1. The employee is subject to a Federal, State, or local quarantine or isolation order related to COVID-19.
2. The employee has been advised by a health care provider to self-quarantine due to concerns related to COVID-19.
3. The employee is experiencing COVID-19 symptoms and is seeking a medical diagnosis.

A part-time employee is eligible for leave time for the number of hours the employee is normally scheduled to work.

CHILDCARE FOR SCHOOL OR DAYCARE CLOSINGS

Employees who need to care for a child due to school or daycare closings can work with their supervisor to consider options such as:

- Adjusting their schedule, as long as the adjustments are mutually beneficial to the department and employee.
- Working a reduced schedule and using accrued paid time off or unpaid time to make up the difference.
- Teleworking for a portion of their schedule, not to exceed one half of their normal weekly hours.

ELIGIBLE EMPLOYEES

Employees must be employed for at least 30 days prior to start of leave.

DOCUMENTATION FOR ELIGIBILITY

Employees requesting a leave due to a quarantine must provide documentation to support the health care professional who is advising self-quarantine.

GUIDELINES FOR ADMINISTERING LEAVE

Employees may only use this leave one time between January 1 and June 30. If an employee needs further sick leave related to COVID-19, they will have the option to use accrued paid time off.

ENFORCEMENT

Employees who are sick and exhibiting COVID-19 related symptoms are encouraged to stay home and follow company guidelines established in line with the CDC and recommendations provided by their health care provider. Employees who take leave and paid sick leave related to COVID-19 will not be retaliated or discharged for doing so.

HR Source™

Employer Quarantine Chart

Employee has tested positive for COVID-19

- ▶ Employee should self-quarantine for a minimum of 10 days.
  - ▷ Employee who receives negative test result for COVID-19 during the quarantine period should still serve full 10-day quarantine period.
- ▶ Employee should not return until symptom-free AND fever-free for at least 24 hours.
- ▶ The loss of taste/smell may persist in some individuals for weeks/months. If other symptoms persist and employee wishes to return, a medical note should be required.

Employee has had close contact* with someone who has tested positve for COVID-19

- ▶ Employee should self-quarantine for 14 days from date of last contact.
  - ▷ Under new CDC Guidance effective December 2020, an employee may stop quarantining after 10 days, with no test being taken, and no symptoms developing, OR,
  - ▷ After 7 days, with a negative COVID-19 test result, and no symptoms developing.
  - ▷ Employers may continue to require a 14-day quarantine period, if they so choose.
  - ▷ Employees should still watch for symptoms for a full 14 days and, if they develop symptoms, contact their local health authority and health care provider, seek out testing and isolate.

Employee has symptoms of COVID-19

- ▶ Employee should self-quarantine for 10 days from first date symptoms experienced.
  - ▷ Employee who receives a negative test result for COVID-19 should still serve full 10-day quarantine period.
- ▶ Employee should not return until symptom-free AND at least fever-free for 24 hours.
- ▶ The loss of taste/smell may persist in some individuals for weeks/months. If other symptoms persist and employee wishes to return, a medical note should be required.

Employee has already had COVID-19 and is re-exposed

- ▶ Employee does not have to self-quarantine if the employee can answer yes to all three questions:
  1) Did employee develop COVID-19 within the previous three months;
  2) Is the employee fully recovered; and
  3) Does the employee remain symptom-free?
- ▶ If the employee cannot answer yes to all three questions, the employee should quarantine for 14 days from date of last contact.

Employee is vaccinated for COVID-19 and is exposed

- ▶ Employee does not have to self-quarantine if the employee can answer yes to the following questions:
  1) Is the employee fully vaccinated (i.e., ≥2 weeks following receipt of the second dose in a 2-dose series, or ≥2 weeks following receipt of one dose of a single-dose vaccine); and,
  2) Does the employee remain symptom-free?
- ▶ If the employee cannot answer yes to both of these questions, the employee should follow the employer's quarantine guidance.
- ▶ Employee should be tested for COVID-19 within three-five days following exposure and wear a face covering in public indoor settings for 14 days after exposure or until a negative test result is received.

▶ Additional steps to be taken when an employee tests positive:

- ▶ Direct the employee to seek assistance and testing through their medical provider.
- ▶ Provide the employee with FFCRA request form(s) if applicable.
- ▶ Use CDC recommended protocols and FDA approved material, clean and disinfect any areas the infected person(s) may have been during the infectious period.
- ▶ Gather information regarding close contacts and other people who may have interacted with the employee during the infectious period. Contact those individuals and advise them about quarantine procedures.
- ▶ Provide relevant information to your local Department of Public Health.
- ▶ Determine if you should notify all employees (non-close contacts) regarding the case.

Close contact is defined as: someone who was within six feet of an infected person for at least 15 minutes or more over a period of 24 hours starting from two days before illness onset (or, for asymptomatic employees, two days prior to positive specimen collection) until the time the patient is isolated. (For example, three 5-minute exposures over a 24 hour period meets the definition). Close contact can also include: providing care at home to someone who is sick with COVID-19; having direct physical contact with a person with COVID-19 (hugging or kissing them); sharing eating or drinking utensils with an infected individual; and/or, being sneezed on, coughed on, or somehow receiving respiratory droplets from an infected person.

IF A STAFF MEMBER TESTS POSITIVE FOR COVID-19

1. We will notify ALL staff immediately.
2. We will include the date/time employee was last in our building(s) and identify which building(s).
3. We will not identify the affected employee, in accordance with applicable privacy laws

As part of our commitment to the health and safety of our employees, we will immediately begin taking steps to minimize the impact on our staff and workplace. This includes:

- Placing the affected employee on a leave of absence while the employee follows the quarantine recommendations of the CDC and their doctor.
- Reaching out directly to those employees and other contacts whom we are aware were in "close contact" with the affected employee which is defined by the CDC as "being within approximately 6 feet of a COVID-19 case for a *prolonged period of time" and would have been potentially exposed to the virus. We will ask these individuals to self-quarantine as recommended by the CDC and their doctor.
- Potentially closing the building(s) for a period of time (determined by various factors).
- Implementing regular routine cleanings, as well as deep cleanings and disinfections of our facilities, as recommended by the CDC, OSHA and/or Department of Public Health.
- Continue Providing employees with appropriate personal protective equipment, such as gloves, masks, etc.

We continue to encourage all employees to follow recommended hygiene and social distancing practices to minimize the risk of infection. Specifically, we recommend all employees take the following steps/precautions:

- Avoid in-person meetings even when working in the same building and use alternative forms of communication, such as phones, group chats or video conferences.
- When you do see others, maintain appropriate social distancing of at least six feet.
- Avoid touching your face, especially your eyes, nose, and mouth.
- Cover your mouth and nose with a tissue when coughing or sneezing, then throw the tissue in the trash and wash your hands.
- Regularly and thoroughly wash your hands with soap and water for at least 20 seconds.
- Regularly clean and disinfect your work area.
- Carefully monitor your health, including symptoms of COVID-19 (i.e., fever, cough, chills, respiratory issues, loss of taste or smell)
- If you are sick or not feeling well, including experiencing any symptoms of COVID-19, stay home.

If you or someone in your household has been directly exposed to or experiences symptoms of COVID-19, please contact your supervisor and Human Resources manager as soon as possible. If you have any questions or concerns, please don't hesitate to reach out to your supervisor or Human Resources.

*Prolonged period of time: Recommendations vary on the length of time of exposure, but 15 min of close exposure can be used as an operational definition. Brief interactions are less likely to result in transmission; however, symptoms and the type of interaction (e.g., did the person cough directly into the face of the individual) remain important.

In the case of a COVID **Positive test:**

Leadership/HR Notification

- Employee reaches out to Supervisor, LM or Manager. Manager or supervisor notifies Human Resources.
- Supervisor, LM or Manager notifies HR immediately. (including evenings and weekends)
  - If Manager is not available, notify top of organization chart so management is informed
  - Conversation with scheduler to inform staff will not be in.
- LM and Supervisor will determine when the staff member was last in the building, where s/he may have been during their last shift(s) i.e.: staff lounge, hallways, workrooms, meeting rooms, and when symptoms began.
  - Schedule should be used as a guide to determine when employee last worked
  - Example: Employee last worked on 11/2/2020 from 8am-1pm.
- LM/Supervisor works with HR to address any staff who were in close contact with positive staff member. Both HR and Supervisor will review schedule and determine staff who were in close contact.

HR Follow-up

- HR will reach out to positive employee(s) to verify all close contacts when symptoms began and their last date in the building.
- HR notifies staff who were in "close contact" with positive person and ask them to quarantine.
- HR sends all staff email
  - HR will notify Exec Director or Deputy Director of all confirmed positive cases prior to sending all staff.

Facilities

- LM/Supervisor contacts Facilities Manager to inform him of affected areas that need to be cleaned. Facilities manager will work with facilities staff to ensure high touch areas have been
- Facilities Manager will contact (Name?) cleaning company.
  - If they are available, they will be dispatched to come out that evening to provide sanitation.
  - If they are not available that evening, facilities staff will spray affected areas with electrostatic sprayer and cleaning agents.
  - Cleaning company will come the following morning before hours or evening after hours, depending on availability to do an additional cleaning of affected areas.

Important Reminders - The importance of confidentiality when dealing with personal health matters.

Review and discuss the definition of **"close contact."**

- ✓ Someone who had contact with an infected person starting from 2 days before illness onset <u>and</u> last exposure to the positive person.

- ✓ Someone who was within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period starting from 2 days before illness onset (or, for asymptomatic individuals), until the time the patient is isolated.

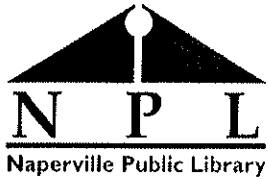# Families First Coronavirus Response Act (FFCRA) and other FAQ

1. What if I am not comfortable returning to work because I fear catching Covid19?
   a. General fear is not a qualifying reason for leave under the FFCRA, however, if anyone is afraid to return to work, we will discuss options with your supervisor and consider the use of PTO when applicable.

2. What if I have been directly exposed by someone I live with, am I eligible for the two-week paid leave?
   a. In order to qualify for the FFCRA Leave, you would need to provide medical documentation confirming your exposure.

3. What if my elderly relative cares for my child(ren) while I'm at work and I am not comfortable sending my children there for fear of exposing the elderly caretaker, does this meet the qualification reason #5?
   a. No. You would need to provide supporting documentation from your daycare provider stating they are unable to provide daycare due to Covid19 related risk.

4. What's the difference between the EPSL and EFMLA?
   a. EPSL (Emergency Paid Sick Leave) allows two weeks pay/partial pay for qualifying reasons (six total) under the Act.
      i. The employee is subject to a federal, state or local quarantine or isolation order related to COVID–19. (100% pay)
      ii. The employee has been advised by a health care provider to self-quarantine due to concerns related to COVID–19. (100% pay)
      iii. The employee is experiencing symptoms of COVID–19 and seeking a medical diagnosis. (100% pay)
      iv. The employee is caring for an individual who is subject to either number 1 or 2 above. (2/3 pay)
      v. The employee is caring for his or her child if the school or place of care of the child has been closed, or the childcare provider of such child is unavailable, due to COVID–19 precautions. (2/3 pay)
      vi. The employee is experiencing any other substantially similar condition specified by the Secretary of Health and Human services in consultation with the Secretary of the Treasury and the Secretary of Labor. (2/3 pay)
   b. EFMLA (Emergency FMLA) allows up to twelve weeks partial pay for qualifying reason #5 only:

      The employee is caring for his or her child if the school or place of care of the child has been closed, or the childcare provider of such child is unavailable, due to COVID–19 precautions.

Precautionary Health Measures

Cleaning and Supplies

- Maintain sufficient cleaning and disinfectant supplies
- Provide gloves to staff, to be used if desired, as supplies are available.
- Perform additional routine cleaning, as needed, of all frequently touched surfaces in the Library, such as workstations, countertops, materials, and doorknobs
- Staff should contact Facilities if an area needs to be thoroughly cleaned
- Consider soft materials (puppets, stuffed animals, etc.) be temporarily removed

Work Adjustments

- Authorities may request that persons returning from an infected area of the world not return to work for a period of time. Library employees are required to follow those recommendations. Absences for this purpose will be excused.
- Any employee presenting symptoms congruent with the outbreak will be asked to return home and/or refrain from coming to work
- Employees required to stay home and not report to work may be paid for the designated time off; to be evaluated case by case
- Employees have the option to use paid time off to stay home as a precautionary measure
- Inform other staff ahead of time that they may be needed to cover tasks when someone is out sick

Communicate to the Public

- Share official sources for health information with customers
- Recommend that customers with symptoms not enter the building
- Promote healthy habits, encourage washing hands
- Prepare a fast and effective method of communication to the public regarding new information

Communicate to Staff

Share this Pandemic Response Procedure

- Encourage staff to receive appropriate vaccinations and seek medical attention if they develop symptoms
- Emphasize that staff should stay home when sick and follow respiratory etiquette and hand hygiene
- Communicate any CDC reporting requirements
- Advise traveling staff to check the CDC's Traveler's Health Notices
- Promote healthy habits, encourage washing hands

1

Temporary Closure

During the course of a pandemic, the Library Director may temporarily close the Library under one or more of the following conditions:

- Public health authorities advise, request or order such a closure
- Public visitation is too low to warrant keeping the buildings open
- Staffing levels are too low to operate the Library
- Staff or customer reports a confirmed case of infection
- Any other conditions that prevent the Library from operating the facilities safely and effectively

Service Adjustments

- Extend due dates
- Close book drop drive thru's and post closed signs
- Inform vendors and delivery services that we are closed and not accepting deliveries
- Notify RAILS
- Notify after-hours cleaning company

Work Adjustments

- Staff and volunteers are to refrain from reporting to work in person
- Time off may be paid depending on length of closing, Library Director will determine
- Director and Executive Team will continue to work remotely to monitor building and systems conditions.
- Marketing Manager will continue to work remotely to communicate with the public.
- Library Director will continue to work remotely to coordinate response among staff and with Library Board of Trustees

Communicate to the Public

- Post an alert message on the website indicating the library is closed; homepage to include pointers to official sources of info about the pandemic
- Post library closed message on front door and implement standard closing procedures signage
- Continue to share official sources for health information and library service updates with customers via social media and signage
- When applicable, communicate plan to disinfect all buildings using a professional service

Communicate to Staff

Library Director will continue to monitor and coordinate response among authorities, schools, city, and Library

PLEASE NOTE: Should the situation call for a more immediate response than is outlined here, the Library Director and Board may adjust the library's response to meet emergent needs.

COVID-19 Library Reopening Plan

Introduction

Library will reopen in phases after the state and local stay-at-home order is lifted. Proper measures must be taken to reduce infection risk for both staff and customers. Starting date of each phase will be determined by local and state authorities' COVID-19 pandemic recommendations. We plan to reopen library service from most restricted phase and gradually relax restriction in each phase, but the specific timeline of each phase will be dependent on pandemic risk levels as advised by state and local authorities. Additionally, we may return to a more restricted phase if the risk assessment changes from low to high.

Phase 1

Library buildings are not open to the public. Curbside holds pickup service is available at all three libraries during reduced service hours. Drive-through book returns are open. Planned starting date: Monday, May 4, 2020.

Context: Stay-at-home order is lifted but infection risk is still very high. Physical distancing is recommended. Masks and gloves are encouraged. We may not have enough protective and disinfecting supplies.

Summary: Library buildings are not open to the public. Customers access physical library materials by curbside pickup during reduced service hours. Staff will pull holds for pickup to minimize physical contact. Email, text, and phone assistance to facilitate curbside pickup is provided. Reduced number of staff can work inside library buildings to maintain basic library operations. Staff continue to prepare for opening the buildings to the public.

Phase 2

Library buildings are open to the public for access to physical materials only with reduced hours. Other services are limited or restricted. Temporary curbside pickup service will be provided. Special hours for customers in high-risk groups may be considered. Planned starting date: Undecided, dependent on recommendations from state and local authorities.

Context: Stay-at-home order is lifted. Physical distancing is recommended. Infection risk is still high. Masks and gloves are recommended. We are able to secure necessary supplies for cleaning and staff protection.

Summary: All three libraries are open with reduced hours. Customers have access to holds as well as all circulating physical materials. Seating is removed to discourage extended stays or gatherings. All in-person library programs are cancelled. Study rooms, quiet rooms, and meeting rooms are closed. Computer labs and Tech Buffet equipment are not open for public use. Specific hours for high-risk group customers may be considered. Limited number of staff will assist customers to reduce crowding. Some staff members will still work remotely.

Phase 3

Library buildings are open regular hours, with additional services to the public. Planned starting date: dependent on recommendations from state and local authorities.

Context: Physical distancing is still recommended, but infection risk is declining.

Summary: Some seating is re-introduced to allow for physical distancing. Study rooms and quiet reading rooms may be used with physical distancing consideration. Limited number of computers are accessible with physical distancing consideration. Small group in-person programs may resume.

Phase 4

Library service returns to normal level. Planned starting date: dependent on recommendations from state and local authorities.

Context: Infection risk is low or non-existent.

Summary: Large group gatherings are allowed.

Reopening Considerations and Plans

Prior to and during Phase 1: Curbside Service, and preparation for reopening

- Signage
    - Install signage for Curbside Pickup Service
    - Prepare foam core signs at all entrances to outline available services and reminder of physical distancing, handwashing, face covering and other safety behavior
    - Prepare floor markings for physical distancing around hold shelves, new and popular picks shelves, self-check stations, and service desks
- Hours
    - Library buildings are not open to the public
- Space
    - Library buildings are not open to the public
    - Remove all chairs in public seating area
    - Remove or reconfigure self-check stations to insure physical distancing
    - Configure other spaces when possible to ensure physical distancing, such as entrance and exits
    - Consider an estimated total number of customers allowed in the library
    -
- Cleaning
    - Deep clean of all three libraries
    - Disinfect all surfaces and equipment of customer or staff use, such as trash cans, computer stations and counters, door handles, buttons, hand railings, chair armrest, etc.
    - Cover all computer lab and Tech Buffet equipment to prevent contamination
- Safety measures for staff
    - Secure supplies of gloves and face masks for staff who needs them
    - Secure supplies of hand sanitizers and disinfecting wipes
    - Install wipeable film/covers for public and staff computer stations screens, keyboards and mice
    - Possibly reconfigure phone routing to allow phone calls to be answered in the workroom
    - Supervisors devise scheduling for physical distancing in work spaces
    - Train staff to properly put on and take off gloves and face masks, if using
    - Consider purchasing headsets to avoid shared use of phone receivers.
- Collection handling
    - Install protective shield around in-house return bins in the workroom for proper quarantine of returned materials
    - Designate areas for material quarantine for at least 72 hours
    - May 1 – May 3: Shelvers come in to shelf materials to prepare for re-opening
    - Implement Curbside Pickup Service

Phase 1: Curbside pickup service

- Signage

- Curbside Pickup Service signage is installed
- All in-house signage is installed
- Hours
  - All library buildings are closed to the public
  - Consider reduced hours open for curbside pickup to limit number of staff working in the building
- Collection handling
  - Items currently on the hold shelves should be picked up via curbside first
  - New holds can be triggered to fill curbside pickup
  - Number of customers for curbside pickup may be limited by service hours
  - IT will restore paused operations such as notifications and due dates
  - Holds will be gradually triggered and filled
  - Returned materials must be quarantined at least 72 hours
  - Reconfigure in-house book returns for proper quarantine of materials

Phase 2: open for materials retrieval only

- Signage
  - All signage is in place, and can be adjusted when appropriate
- Hours
  - Consider reduced hours to allow shelvers to work during closed hours to minimize customer contact and reduce crowding
  - Designate one or two days a week with special hours for customers in high-risk groups
- Spaces
  - All study rooms and quiet reading rooms are locked
  - Close off computer lab and Tech Buffet area
  - Consider assigning staff by the entrance to limit the number of people entering the building
  - Consider assigning staff by self-check stations to maintain a waiting queue and to disinfect stations between customers
- Cleaning
  - Increased frequency of cleaning restrooms, entrances and exits, door handles, self-check stations and counters
  - Provide wipes next to self-check stations and OPACs
- Safety measures for staff
  - Staff must wear face masks and/or gloves
  - Encourage staff to stay home if they have any symptoms of any illness
  - Schedule no more than two staff members at each public desk depending on space available for physical distancing
  - Limit number of staff scheduled in workrooms for physical distancing
- Collection Handling
  - Paging and reshelving of materials preferably done during closed hours
  - Curbside pickup service may still be provided
- Reference Services
  - Provide text, email and phone reference services
  - In person reference service should follow physical distancing recommendations

- Programs and room reservation
  - All in-person programs are cancelled or provided virtually
  - Room reservations are not available for public use

Phase 3: open for materials retrieval plus limited other library services

- Hours
  - Libraries are open regular hours
- Spaces
  - Restore some public seating following physical distancing recommendations
  - Study rooms are available for one or two people
  - Quiet rooms are available, but with fewer seating to allow physical distancing
  - Limited numbers of computer stations are available to allow physical distancing, restriction on time may be required if demand is high
  - Customers are still reminded to follow physical distancing recommendations
- Cleaning
  - Increased frequency of cleaning restrooms, entrances and exits, door handles, self-check stations and counters
  - Provide wipes next to self-check stations, OPACs, and express computer stations
- Safety measures for staff
  - Staff is recommended to wear face masks and/or gloves
  - Encourage staff to stay home if they have any symptoms of any illness
  - Schedule 1 or two staff members at each public desk depending on space available for physical distancing
  - Limit number of staff scheduled in workrooms for physical distancing
- Collection Handling
  - Returned materials should still be quarantined
  - Paging and reshelving of materials returned to normal
  - Gradually resume home delivery if permitted by customer residences
  - Curbside service may still be provided
- Reference Services
  - Provide text, email and phone reference services
  - In person reference service should follow physical distancing recommendations
- Programs and room reservation
  - Small group in-person programs can resume but must allow sufficient physical distancing
  - Room reservations may be available for public for small group use

Phase 4: Libraries are open for regular library services

- Public seating is restored to normal
- All spaces, equipment, and services in library buildings are accessible with no restrictions
- Home deliveries and outreach activities are restored
- Large group programs and room reservations are permitted

N L COVID-19 STAFF CLEANING GUIDELINES

Naperville Public Library

The following document outlines cleaning responsibilities for the Facilities Department, staff in workrooms, staff in public areas and service desks, staff working at self-check stations, and staff working in public computer labs. For more information, contact your building's Facilities Department or a member of the Cleaning Team:

Scott Speidel (Team Lead), Denisse Alvorado, Tara Barnard, Ellie Hansen, Amanda Hanson, Paul Hollingsworth, Steve Lorenzen, Lori McCarthy, Becky Powers, Jackie Schaefers, and Karen Wickman.

FACILITIES DEPARTMENT CLEANING GUIDELINES

- All high contact surfaces throughout the public areas in each department must be cleaned every 2 hours per IDPH guidelines including:
    - Stair hand railings
    - Door handles
    - Handicap door access buttons
    - Light Switches
    - Elevator buttons, in and out of car
    - Tables/chairs (Once at beginning of day and as needed throughout the day)
- Department cleaning and sanitizing supply needs will be restocked upon email request.
- A staff member will be assigned to roam the facility to address spontaneous cleaning needs, i.e. patron just left, and area needs to be re-sanitized. They will also assist with the predetermined cleaning list.
- Bathrooms will be cleaned and inspected every 2 hours. Sanitizing includes:
    - Faucets
    - Counters
    - Stall handles/latches
    - Dispenser surfaces
    - Toilet/urinal flush valves
    - Door handles/handicap access buttons
- Staff Lounge/Sick Rooms cleaned every two hours, (faucets, microwaves, refrigerator handles, tables, chairs) and can be done during restroom cleaning round schedule.

FACILITIES DEPARTMENT CLEANING GUIDELINES (CONTINUED)

- Back -of-house areas will be cleaned every two hours – (stairwell railings, push bars and handles, etc.)
- Staff will always maintain social distancing recommendations throughout the building and stay minimum six feet from each other.
- The library's contracted cleaning company and other contractors have been notified about the Library's PPE requirements and our expectations that they follow them when they are in our buildings. Facilities will continue to search for and purchase gloves, sanitizer, wipes and cleaning supplies continuously to maintain an appropriate supply. .

WORKROOM CLEANING GUIDELINES

- Staff are responsible for disinfecting their workstations each time they begin and end their time at a computer workstation or other equipment. This includes:
  - Wiping down computer equipment (keyboard, mouse, screen)
  - Wiping down phone, including mouthpiece/earpiece
  - Wiping down chair arms and edges, or entire chair, if possible
  - Wiping down all table surfaces
  - Wiping down any other high traffic areas being used by multiple employees
- Each department has a supply of Clorox wipes, cleaner, and paper towels for cleaning purposes. If you are running low, please ask your supervisor to e-mail Facilities.
- Staff are responsible to keep their face masks on when within 6 feet of another person, and in any public areas of the library.
- Gloves will be available for use for those who want them while cleaning, but they are not required.

PUBLIC AREA/SERVICE DESK CLEANING GUIDELINES

Facilities will be regularly cleaning some public areas; however, to maintain a high level of sanitation, public services staff will be responsible for cleaning many areas in their departments:

- Staff are responsible for disinfecting their workstations each time they begin and end their time at a computer workstation or other equipment. This includes:
  - Wiping down computer equipment (keyboard, mouse, screen)
  - Wiping down phone, including mouthpiece/earpiece
  - Wiping down chair arms and edges, or entire chair, if possible
  - Wiping down all table surfaces
  - Wiping down both sides of the sneeze shield at the service desk
  - Wiping down any other high traffic areas being used by multiple employees
- Cleaning supplies will be kept at the service desks to be given to customers on an as needed basis. Because we have a limited supply, these should not be placed out in the public areas, and only provided upon request.
- Hand sanitizer will be available for the public in each lobby on each level.
- Staff will disinfect any shared supplies upon their return by a customer.

SELF-CHECK STATION CLEANING GUIDELINES

- Customers will line up in one queue, spaced at least 6 feet apart. This line will be for using all self-check stations. A staff member will call up a customer to use a self-check as it becomes available.
- When a customer finishes using a self-check station, the staff member will wipe down the screen. Once the station is clean, the staff member will call the next customer up to use the cleaned station.
- If a customer has finished using a basket, they will leave it with the staff member at the self-check station. The staff member will sanitize the basket so it is ready for the next customer.
- Cleaning supplies will be kept at the self-check stations. If you are running low, please ask your supervisor to e-mail Facilities.

PUBLIC COMPUTER CLEANING GUIDELINES

- Public computer usage will be by reservation only. Staff should wipe down all computer equipment (keyboard, mouse, screen) as well as the chair and table area after each customer finishes their session.
- Cleaning supplies will be kept at the service desk. If you are running low, please ask your supervisor to e-mail Facilities. Because we have a limited supply, these supplies should not be placed out in the public areas, and only provided upon request.
- Only 1 staff member will sit at the service desk at a time to maintain social distancing norms.
- All desk materials (pens, pencils, staplers, etc.) should be put out of public reach and only available upon request. Staff will disinfect any shared supplies upon their return by a customer.

NPL COVID-19 Staff Cleaning/Social Distancing Guidelines

Staff are responsible for the following cleaning tasks within their department workrooms and in their public areas.

STAFF WORKROOMS:

- Staff are responsible for disinfecting their workstations each time they begin and end their work. This includes:
  - Wiping down computer equipment (keyboard, mouse, screen)
  - Wiping down phone
  - Wiping down all table surfaces
  - Wiping down chairs
- Staff will always maintain social distancing recommendations throughout the building and stay at least 6 feet away from each other.
- In person meetings will need to accommodate social distancing norms and maintain the six-foot social distancing rule for all participants.
- At closing, all high contact surfaces are to be disinfected (light switches, door handles, etc.)
- Per the Governor's executive order, masks are required for use when interacting with public. Gloves will be provided for staff who wish to use them.

SOCIAL DISTANCING RECOMMENDATIONS

STAFF ENTRANCES:

- Social distancing begins when staff exit their cars, approach, enter, and move about the facilities. Normal staff patterns and behavior are different than pre-COVID-19. At staff entrance doors, staff may proceed, if a six-foot distance can be maintained—if not, staff need to back up and wait until it is safe to move forward. Gatherings at Novatime clocks, and in other areas, need to be avoided.

STAFF WORKROOMS/STAFF LOUNGES

- Remember to maintain social distancing especially in high traffic workrooms like Customer Services at NSL and NBL. Maintain a distance of at least six feet from other staff members.
- Clean and disinfect shared equipment such as computer stations, touch screens, desks, chairs, and carts before and after using them, focusing especially on frequently touched surfaces.
- Practice proper hand hygiene always, per CDC guidelines. This include washing hands for twenty seconds with soap and water, using hand sanitizers that contains at least 60% alcohol, wearing disposable gloves, and avoiding touching the eyes, nose, and mouth.
- For complete instructions, refer to the CDC's webpage on https://www.cdc.gov/handwashing/when-how-handwashing.html
- Limit of one person per table. Staff Lounge tables will be separated, staff need to practice the six-foot social distancing rule. Clean and disinfect kitchen area focusing specially on frequently touched surfaces such as sink, counter, microwave, chairs, and tables.

For complete instructions, refer to the CDC's webpage on https://www.cdc.gov/coronavirus/2019-ncov/downloads/disinfecting-your-home.pdf

Created 4/28/2020 by NPL Clean Team: Scott Speidel (Team Lead), Amanda Hanson, Ellie Hansen, Lori McCarthy, Denisse Alvorado, Becky Powers, Tara Barnard, Karen Wickman, Jackie Schaefers, Rose Chan, Steve Lorenzen, Paul Hollingsworth.

Cleaning FYI

Know the Difference!

Cleaning -using soap and water to remove visible soil. May not kill germs.

Disinfecting-using chemicals to kill the germs you are trying to avoid. Some disinfectants must remain on surfaces for up to 10 minutes to kill germs.

How to Effectively Use Disinfectant Wipes / Spray Disinfectant and Paper Towels

Most disinfecting wipes claim to kill up to 99.9% of germs. If used appropriately, they may be effective against COVID-19.

Follow instructions on the label.

Clean visibly dirty surface to rid it of dirt and debris before disinfecting.

Do not reuse wipes/ paper towels to wipe down multiple surfaces. This can transfer germs. Use one wipe/ paper towel for each surface. Then throw out.
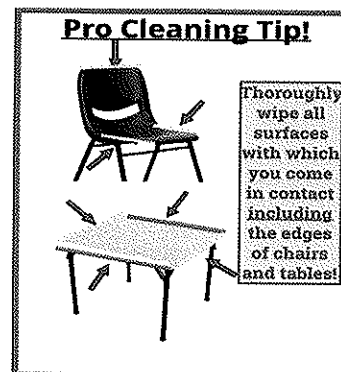
Do not dry surface after using disinfectant wipe/ disinfectant spray. Surface in question will need to remain wet for amount of time listed on label to kill germs.

Cleaning Tables and Chairs:

Note: If any surfaces are visibly dirty, clean with detergent or soap and water prior to disinfection.

Hard-backed chairs -disinfect frequently used chairs and make sure to wipe backs, seats, and edges that are touched by hands to pull out or push in chairs from tables.

Tables-disinfect a couple times a day if used throughout the day.

Pro Cleaning Tip!

Thoroughly wipe all surfaces with which you come in contact including the edges of chairs and tables!

Building Capacities During COVID Restrictions

These capacities are for the number of **customers** and do not include staff.

As of October 23, 2020, we are currently restricted to 25% capacity for all of our locations.

Nichols
Max capacity: 985
50% capacity: 492
25% capacity: 246

Naper Blvd.
Max capacity: 364
50% capacity: 182
25% capacity: 91

95th Street
Max capacity: 972
50% capacity: 486
25% capacity: 243

*Note: These capacities were defined while meeting rooms and study rooms were closed. Should additional areas of the library open up, these numbers will be updated.

January 6, 2021

A safe and effective COVID-19 vaccine is a critical component of the U.S. strategy to reduce COVID-19-related illnesses, hospitalizations, and deaths.

Easy access to COVID-19 vaccines is equally important. The Centers for Disease Control and Prevention (CDC) is working with public health departments, health care providers, and other partners to make sure people can easily get a COVID-19 vaccine and that cost is not a barrier. Within Illinois, the CDC recognizes the state and the city of Chicago as separate jurisdictions for the distribution of vaccine. Both Illinois and Chicago, however, are collaborating to ensure that vaccines are delivered and available in accordance with the CDC guidelines and recommendations of the Advisory Committee on Immunization Practices (ACIP).

Vaccine availability

Q. When can I get a COVID-19 vaccine?

A. *The first supply of COVID-19 vaccine receiving Emergency Use Authorization (EUA) by the U.S. Food and Drug Administration (FDA) began being distributed in the U.S. on December 14, 2020. During the initial period, referred to as Phase 1a, supplies of the vaccine will be limited, and therefore allocated to health care personnel and Long-term care (LTC) residents and staff. We expect vaccine supply to increase over time and Phase 1b is expected to begin when Phase 1a is substantially completed. (To view the categories of priority populations in Phase 1a and Phase 1b, please see the chart below.)*

Q. Where can I get the vaccine?

A. *Initially, hospitals will provide COVID-19 vaccine to health care personnel. As more vaccine is distributed by the federal government, several thousand vaccination providers will be available, including but not limited to doctors' offices, retail pharmacies, hospitals, and Federally Qualified Health Centers (FQHCs), across the state.*

CDC is working with pharmacies to establish a system to offer on-site COVID-19 vaccination services to residents and staff in LTC settings, including skilled nursing facilities, nursing homes, and assisted living facilities where most individuals are over 65 years of age.

Q. Will the state (or federal government) establish mass immunization programs, like they did in the 1960's?

A. *Illinois is working with local health departments and providers across the state to provide COVID-19 vaccinations that resemble larger versions of yearly flu clinics, rather than the mass vaccination activities of the past.*

Q. Will undocumented people be able to get the vaccine?

A. *All populations in Illinois, including individuals who are undocumented, can receive the vaccine. No one will be turned away when it is their time to be vaccinated.*

Q. My family member was offered a vaccine through their employer. Why can't the rest of my family get the vaccine?

A. *Because vaccine will be very limited when it first comes out, administration will be limited to those identified in prioritized (high-risk) groups by the Advisory Committee on Immunization Practices (ACIP) and the CDC. This is to ensure that all individuals in the high-risk groups are able to receive the vaccine. As more vaccine becomes available, those groups eligible to receive the vaccine will expand.*

Q. Is there a scheduled date for distribution per phases?

A. *There is not a scheduled calendar date, but once ACIP provides its recommendation on priority vaccination groups, IDPH will distribute vaccine to Regional Hospital Coordinating Centers (RHCC) partners throughout the state. From there, the distribution will continue ultimately through local health departments to local health care providers.*

Q. Will distribution of vaccine be divided per capita?

A. *Vaccine will be distributed according to the population of each county, adjusted to ensure health equity using the COVID-19 Community Vulnerability Index (CCVI).*

Q. What about one municipality that has very high numbers of COVID-19 cases within a county that otherwise had less cases? (in reference to prioritizing vaccine distribution)

A. *Distribution within counties will be overseen by local health departments (LHD). IDPH will work with LHDs to ensure providers have adequate amounts of vaccine to support the municipalities/communities they serve.*

Q. I understand the vaccination requires two shots. Why, and what if I am unable (or do not want) to get a second shot?

A. *The currently available COVID-19 vaccines require two shots to be fully effective. This helps make sure that enough antibodies are being produced to provide effective and long-lasting protection. We do not know if receiving only one dose of the COVID-19 vaccine is protective. If you choose not to get a second dose, you may reduce the effectiveness of the vaccine. The first dose of the vaccine will provide some protection, but the recommendation is to receive two doses to be protected as intended.*

Q. Different COVID-19 vaccines are expected to be available. Which vaccine should I take?

A. *Any COVID-19 vaccine authorized by the U.S. Food and Drug Administration (FDA) is expected to be effective. Data available at this point would suggest that the Pfizer and Moderna vaccines are very similar in their abilities to produce immunity to the virus. The recommendation would be to take whatever vaccine is made available to you and be sure to receive the booster shot of that same vaccine at the appropriate time. If you choose not to get a second dose, you may reduce the effectiveness of the vaccine.*

Q. What happens if they run out of the vaccine before I get my second shot?

A. *CDC is structuring shipments in such a way that 21 or 28 days after the first shipment, the same number of doses will be shipped, so providers will have enough vaccine for a second dose. The 21- or 28-day requirement between doses is a minimum requirement, not a maximum. If, for some reason, you are unable to receive the second dose at the recommended interval, you can receive the second dose at a later date.*

Q. Who besides healthcare workers will be able to administer the vaccine? For example, we recently passed a law allowing dentists to administer flu shots. Will dentists, pharmacists and other qualified professionals, besides doctors and nurses, be able to administer the vaccine?

A. *IDPH licenses EMTs and CNAs. All other healthcare professionals including but not limited to doctors, nurses, pharmacists, and dentists are licensed by the Illinois Department of Financial and Professional Regulation (IDFPR). Currently dentists, pharmacists and pharmacy technicians have had their scope of practice extended by IDFPR to allow them to administer the COVID-19 vaccine when it becomes available. IDPH has issued recommendations to allow EMT's at the advanced and intermediate levels to administer vaccine, as long as their Medical Director for their EMS system follows certain guidelines.*

Vaccine Requirements/Mandates

Q. Do I have to get a COVID-19 vaccine?

A. *There is no federal or state mandate to receive the COVID-19 vaccine. The CDC recommends the vaccine to all Americans 16 and over.*

Q. Can my employer require that I receive a COVID-19 vaccine before returning to work?

A. *Decisions regarding immunization at private workplaces are up to the employer.*

Q. Are schools requiring students to receive a COVID-19 vaccine, similar to mumps and measles? Will restrictions be placed on my child if we refuse to vaccinate?

A. *There is no requirement for students to receive the COVID-19 vaccine at this time. Currently, a pediatric vaccine is not available, and it may be some time before one is approved and becomes available.*

Q. What happens if I refuse to get vaccinated?

A. *There are no legal repercussions (such as fines, sanctions or punishments) for refusing the vaccine. If you do not get vaccinated, you will not be protected against the virus that causes COVID-19 and will be more likely to be infected with the virus. Additionally, you will be at risk of transmitting this deadly virus to loved ones and other community members.*

Q. Do I need a vaccine if I have already had COVID-19?

A. *Yes, people who have already had COVID-19 should plan to take the COVID-19 vaccine, because the science is currently inconclusive as to whether you will be naturally protected from a second COVID-19 infection in the future. The CDC currently suggests that if you were infected with COVID-19 during the previous 90 days, it is likely that you still have immune protection and that you will be asked to wait to receive your vaccine to allow others to be vaccinated first.*

Q. Do I have to get both the flu vaccine and the COVID-19 vaccine?

A. *A seasonal flu vaccine will not protect you from COVID-19. Being infected with both the flu and COVID-19 at the same time could lead to a more severe illness, which is why it is more important now than ever to get the flu vaccine.*

Vaccine Safety

Q. Is a COVID-19 vaccine safe?

A. *The U.S. vaccine safety system is a deliberate and multi-phase process to ensure all vaccines are as safe as possible. Safety is a top priority. Vaccine candidates conduct clinical trials with many thousands of study participants to generate scientific data and other information for the FDA to determine their safety and effectiveness.*

If the FDA determines a vaccine meets its safety and effectiveness standards, it can make these vaccines available for use in the U.S. by approval or Emergency Use Authorization (EUA). After the FDA makes its determination, ACIP will review the available data in order to make vaccine recommendations to the CDC. ACIP will then recommend vaccine use. After a vaccine is authorized or approved for use, vaccine safety monitoring systems will watch for adverse events (possible side effects). CDC is working to expand safety surveillance through new systems and additional information sources, as well as enhancing existing safety monitoring systems.

Q: How was the COVID-19 vaccine studied?

A: *Each authorized COVID-19 vaccine has been studied in large trials of over 30,000 volunteers and shown to be highly effective in preventing COVID-19 disease. The trials involved people of different ages, sex, race/ethnicity, weight, and medical conditions.*

Pregnant women and people with weakened immune systems were excluded from the COVID-19 vaccine trials, and so the currently available studies do not provide direct information about vaccine safety and effectiveness in these groups of people. The CDC recommends that those who are pregnant consult with their doctor before taking the vaccine.

Q. Can the COVID-19 vaccine cause me to become infected or infect others?

A. *No, you cannot become infected or infect others from receiving the COVID-19 vaccine, because the vaccine contains no live virus. Instead, the vaccine directs your body to produce a protein that teaches your body how to fight off the virus.*

Q. How long will it take for COVID-19 vaccines to take effect?

A. *The COVID-19 vaccine is expected to provide some protection a couple of weeks after your first shot and reaches its greatest effectiveness after your second shot. It is very important to take the second shot within the recommended time period for maximum vaccine effectiveness.*

Q. What have the trials revealed?

A. *Through their respective clinical trials, Pfizer and Moderna have indicated their vaccines are approximately 95% effective.*

Information gathered through clinical trials becomes public in the course of the EUA submission. Once the EUA is submitted, these documents become accessible by the public through the FDA.

Q. Can I get a COVID-19 vaccine if I am pregnant?

A. *Pregnant women and people with weakened immune systems were excluded from the COVID-19 vaccine trials, and so the currently available studies do not provide direct information about vaccine safety and effectiveness in these groups of people. The CDC recommends that those who are pregnant consult with their doctor before taking the vaccine.*

Q. Can children get a COVID-19 vaccine?

A. *Currently, a pediatric vaccine is not available, and it may be some time before one is approved and becomes available. Clinical trials need to be conducted with children before determining if the existing COVID-19 vaccines are safe and effective for them.*

Q. Will youth with high risk conditions be included in any of the phases?

A. *The availability of a vaccine for youth, under the age of 16 years, will depend on the availability of a pediatric vaccine. Clinical trials need to be conducted with children before determining if the existing COVID-19 vaccines are safe and effective for them.*

Q. When injected with the vaccine, are you injecting me with COVID-19?

A. *No, you are not being injected with the virus that causes COVID-19. None of the early COVID-19 vaccines tested in the U.S. use a live virus that causes COVID-19. The goal for each vaccine is to teach our immune systems how to recognize and to fight the virus that causes COVID-19. At this time, the vaccines closest to receiving approval are mRNA - messenger ribonucleic acid - vaccines. Like other vaccines, mRNA vaccines work by training the immune system to recognize a virus threat and begin producing antibodies to protect itself.*

Q. After getting a flu shot, I always get the flu. Will this cause me to get COVID-19?

A. *No, you cannot become infected, or infect others, from receiving the COVID-19 vaccine, because the vaccine contains no live virus. Instead, the vaccine directs your body to produce a protein that teaches your body how to fight off the virus. Some people develop flu-like symptoms, such as mild fever and muscle aches, after getting a flu vaccination. These symptoms are not the same as having influenza.*

Q. I have allergies. Is this vaccine safe for me?

A. *While serious allergic reactions were not seen in vaccine clinical trials of thousands of patients, rare allergic reactions to vaccines are possible. If you have a history of serious allergic reactions, you should discuss your situation with your healthcare provider. The COVID-19 vaccine does not contain any animal products such as eggs.*

Q. What are the side effects of this vaccine?

A. *Some people may experience side effects, which are a part of the normal immune response to a vaccine. The majority of the side effects, while not seen in every individual, are signs that your body is recognizing the vaccine and mounting an immune response. Based on prior studies, side effects may include pain, redness and swelling at the site of the injection., fatigue, headache, muscle pain, chills, joint pain, fever, nausea, malaise, and swollen lymph nodes. These symptoms may occur within 2 days after the shot and last 1 to 2 days. Side effects may be more frequent after the 2nd shot (booster) and less frequent among older adults*

Long-term side effects are unknown, although most vaccines do not have long-term side effects. Vaccine studies are ongoing and will continue to monitor and watch for adverse events.

Q. It took four years to develop the mumps vaccine, how can the COVID-19 vaccine be safe and thoroughly tested so quickly?

A. *Many things helped this vaccine get developed so rapidly. Significant resources were invested to fund the basic research and clinical trials, accelerating timelines greatly. Joining existing trial sites instead of developing new sites was a time saver. The virus has a good vaccination target and relatively low mutation rate. Additionally, the amount of infection in the communities allowed scientists to quickly compare vaccinated to unvaccinated populations and conclusively shows the vaccine worked. Last, but not least, are the huge number of brave volunteers willing to try the "novel" vaccines during the clinical trials.*

Q. How long will the vaccine protect me from COVID-19? Will this be an annual vaccination, like the flu?

A. *We are still learning about length of immunity. To determine how long protection lasts, follow-up studies are required to detect levels of both types of immune responses – antibody and T cell – as well as any repeated exposure risks. As more information becomes available, more information will be shared on the length of immunity.*

Q. Can I get COVID-19 after the first dose of the vaccine?

A. *Although the first dose of vaccine offers some immunity, you will still be considered susceptible to COVID-19. The first dose of the vaccine will provide some protection, but the recommendation is to receive two doses to be protected as intended. Pfizer and Moderna have indicated their vaccines are approximately 95% effective.*

Q. All the research indicates that I am at high risk for contracting COVID-19, yet I am not considered eligible for the vaccine. How is that fair?

A. *The vaccine manufacturers, CDC, and the state are all committed to getting the vaccine to everyone as soon as possible. ACIP is a group of medical and public health experts that develop recommendations on how to use vaccines to control diseases in the U.S. ACIP decides on vaccine prioritization recommendations by reviewing the FDA information, clinical trial data, and other information. Initially, the limited supply of vaccine will only be available to those determined to be most at risk of exposure to COVID-19. As the vaccine supply increases, more people will be added to those prioritized until it is available to the adult population at large.*

Q. Is this vaccine preservative free?

A. *Yes. The vaccine candidates that are likely to be the first offered are preservative free.*

Other

Q. How does the vaccine cause my body to be protected?

A. *Your immune system makes antibodies to fight infections. The COVID-19 vaccine causes your body to make antibodies that target the COVID-19 virus. In the event that your body is exposed to the actual COVID-19 virus, the new antibodies prevent infection.*

Q. I would like to know how we plan to roll out an educational campaign for vaccine.

A. *Along with educational and communications campaigns from the federal government, the state will use multiple traditional, social, and community media platforms to communicate across Illinois. Providers, statewide, will be educated in the particular vaccine products after EUA approval, but before administering vaccine.*

Q. Is a COVID-19 vaccine a guarantee that I will not get the virus?

A. *Like any vaccine, there is no guarantee that you won't get the virus, but early indications are the vaccines under consideration are 90%-95% effective in protecting against COVID-19.*

Q. How many people need to get vaccinated to have herd immunity to COVID-19?

A. *The percentage of people who need to have protection in order to achieve herd immunity varies by disease. Experts do not know what percentage of people would need to get vaccinated to achieve herd immunity to COVID-19.*

Q. What are the vaccine recommendations for children under age 16?

A. *Until more studies are completed, a vaccine for children under 16 is not expected to be available in the immediate future.*

Q. The vaccine is now available, when will we move to Phase 5 of the Restore Illinois plan? If not now, what is required to get to Phase 5?

A. *At this time, we are not able to immediately move to Phase 5. The vaccine and/or a highly effective treatment needs to be widely available, and new cases need to be eliminated for a sustained period of time, before we can move to Phase 5 or we risk the possibility of increased cases, hospitalizations, and deaths.*

Q. If I get the vaccine, can I quit wearing a mask?

A. *No. While the COVID-19 vaccine is highly effective, it not 100% effective. Until the COVID-19 pandemic is controlled, people who receive the vaccine need to continue following Illinois Department of Public Health guidance such as the use of facemasks, social distancing, and regular hand washing. This protects you as well as your family and community.*

Q: When will masking and social distancing be able to end, allowing us to get back to normal life?

A: Given the time it takes to get large quantities of the vaccine produced and distributed, we will need to continue our current mitigation practices for some time. It will remain important that vaccinated people continue to wear masks, practice social distancing and good hand hygiene to help prevent spread. Community infection rates will be continuously monitored and will be used to guide the decision process.

Q. What entity will be paying for the vaccines?

A. The US Department of Health & Human Services (HHS) will absorb the cost of the vaccines.

Q. Can the State purchase more?

A. There is no cost to the State for the vaccine. The federal government, through HHS and the CDC, oversees the allocation of vaccine to states.

Q. How much will this vaccine cost me? Is it covered by my insurance?

A. There is no cost for the vaccine. However, vaccination providers will be able to charge an administration fee for giving the shot. Vaccine providers can get this fee reimbursed by the patient's public or private insurance company or, for uninsured patients, by the Health Resources and Services Administration at the US Department of Health and Human Services.

Q. Will the administrative fees be passed on to the patient in the form of a co-pay or deductible?

A. No.

Q. Will the manufacturing workers who were deemed essential also be in the first round?

A. Individuals who have been disproportionately affected by COVID-19 and frontline workers with higher risk of exposure because of their inability to perform work duties remotely and proximity to other co-workers or members of the public will be included in Phase 1b.

COVID-19
Vaccine Frequently Asked Questions

What are the possible priority groups?

The current priority groups that have already been released by ACIP are as follows:

Phase	Population Group	Examples of individuals in priority population groups
1a	High risk workers in health care facilities	Physicians, nurses, respiratory technicians, dentists and hygienists, nursing assistants, assisted living facility staff, long-term care facility staff, group home staff, home caregivers, Emergency Medical Services (EMS), etc.
1a	Residents in Long Term Care (LTC) facilities	Adults who live in facilities that provide a variety of services including medical and personal care to persons who are unable to live independently.
1b	Frontline essential workers	First responders, education workers including teachers, support staff and childcare workers, manufacturing, distribution, and agriculture workers, United Sates Postal Service workers, correction workers and incarcerated people, public transit workers, grocery store workers, shelter and day care workers.
1b	All Illinois residents age 65 and over	

After adjusted COVID-19 mortality rates by age, the CDC found that Hispanic and Black Americans were dying at a rate of almost 3 times that of White Americans.

In Illinois, the average age of COVID-19 death is 81 for white residents, 72 for Black residents and 68 for Latino residents.

While the highest count of COVID-19 deaths is among those 75 years and older, minority populations are dying at younger ages. Given those facts, vaccine is being made available to those age 65 and older.

Additional information on confirmed and potential priority groups can be found here:

Health care personnel continue to be on the front line of the nation's fight against this deadly pandemic. By providing critical care to those infected with the virus that causes COVID-19, many health care personnel are at high risk of being exposed to and getting sick with COVID-19. Health care personnel who get COVID-19 can also spread the virus to patients seeking care for other medical conditions that, in turn, increase patients' risk for severe COVID-19 illness. Early vaccine access is critical to ensuring the health and safety of this essential workforce of approximately 21 million people across the USA, protecting not only them but also their patients, communities, and the broader health of our country.

People with certain <u>underlying medical conditions</u> are at increased risk for severe COVID-19 illness, regardless of their age. Severe illness means that the person with COVID-19 may require hospitalization; intensive care, or a ventilator to help them breathe, or that they are at increased risk of dying. Early vaccine access is essential to ensuring the health and safety of this population that is disproportionately affected by COVID-19.

Among adults, the risk for severe illness and death from COVID-19 increases with age, with older adults considered to be at the highest risk. Early vaccine access is vital to help protect this population that has been disproportionately affected by COVID-19.

Workers in essential and critical industries are considered part of America's critical infrastructure, as defined by the Cybersecurity & Infrastructure Security Agency. Current data show that many of these workers are at increased risk for getting COVID-19. Early vaccine access is to protect them in order to maintain the essential services they provide U.S. communities.

https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2020-12/COVID-02-Dooling.pdf

IDPH
ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Questions about COVID-19?
Call 1-800-889-3931 or email dph.sick@illinois.gov
Illinois Department of Public Health - www.dph.illinois.gov
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N P L

Naperville Public Library

MEMORANDUM

Date: January 12, 2021

To: Staff

From: Human Resources

Regarding: COVID-19 Inter Department Communication for Staff

Winter is here and that means an increase in cold and flu like symptoms. We all know that many of the symptoms exhibited with the common cold are the same symptoms with COVID-19. More than ever, we must remain vigilant with safety protocols and take proactive measures to ensure the health and wellness of our employees.

- Wear a mask and ensure proper fit.
- Use hand sanitizer. Wipe station down before and at the end of your shift.
- Exercise proper hand-washing procedures
- Maintain social distance guidelines of at least 6 feet.
- Refrain from large gatherings
- Reduce your inner circle to limit the spread.

Employees exhibiting cold like symptoms should stay home and seek guidance from a medical professional. Staff members who take time off to seek medical treatment for COVID related instances, may be eligible for paid time leave time off and may contact Human Resources with questions regarding eligibility. Furthermore, staff who are exhibiting mild symptoms, who need to self-quarantine, may be allowed to telecommute, as deemed appropriate by their supervisor.

NPL is committed to the safety of all employees and is following guidelines in line with the CDC and medical health professionals. Any employee who is concerned about exposure should reach out to their supervisor or Human resources for guidance immediately.

COVID training materials listed on the SharePoint may be used as a reference and will be updated to reflect the most current recommendations and guidelines with the CDC.

Plan for Buildings to Reopen for Curbside

The library buildings are not open to the public and due to the modified stay-at-home order, curbside holds pickup service will be available at all three libraries beginning Monday, May 11, 2020 with reduced service hours. The drive-through book returns will remain open. The library will provide gloves, masks, face shields, cleaning supplies, and social distancing workflow to keep the safety of our staff and customers the top priority. During this time, staff will continue to prepare for future opening of the buildings to the public. Below is a detailed outline to implement this process.

Curbside Service
Signage
- Update Sandwich Board Signage for Curbside Pickup Service
- Consider parking lot entrance signage indicating curbside pickup only
- Update door signage for curbside service
- Add signage indicating phone number for customers to call when they arrive for curbside.
- Have signage at drive-thru explaining quarantine of items for 3 days and no fines will be applied.

Hours
- Library buildings are not open to the public. Curbside service will be available for reduced hours, and will expand as demand increases and logistics are settled. Staff will be working in the buildings 8am-9pm.
- PICs will be needed during times when staff are in building as a point person.

Space
- Library buildings are not open to the public
- Staff schedules will be modified to allow for social distancing at all times. Staff are encouraged to work in alternate locations (like public areas) as necessary to maintain distance.
- Remove most seating from staff lounges to prevent people congregating.

Cleaning
- Deep clean of all three libraries
- Disinfect all surfaces and equipment of staff use, such as trash cans, computer stations and counters, door handles, buttons, hand railings, chair armrest, etc.
- Staff will have access to wipes, sanitizer, etc. to clean personal workstations.
- Facilities will present a plan for cleaning workrooms and other shared spaces that will be implemented by staff and facilities team.
- All departments will have a cache of cleaning supplies which will be regularly inventoried. Supervisors will work with facilities to maintain this supply and inventory, and ensure we have adequate supplies at each building.

Safety measures for staff
- Secure supplies of gloves and face masks for staff
- Secure supplies of hand sanitizers and disinfecting wipes

- Distribute face masks (reusable and disposable) and gloves for staff. Include information on proper use of these items.
- Require staff to wear a mask at all times in the building. Usage of gloves will also be strongly encouraged.
- Provide face shields for staff who wish to use them
- Customers who are picking up curbside will be asked to wear masks during their transactions to reduce the risk of exposure further.
- Reconfigure phone routing to allow flexibility for curbside service
- Ask any staff entering buildings to wait outside if someone else is in staff entrance to ensure distancing is followed.

Collection handling
- Designate areas for material quarantine for at least 72 hours
- Shelvers come in to shelf materials to prepare for re-opening
- Staff are encouraged to wear gloves at all times while handling collection items, especially when handling book drop items that have not been quarantined.
- Implement Curbside Pickup Service
    - Items currently on the hold shelves will be picked up first via curbside service during the testing phase.
    - Outstanding holds will be triggered for the next step of curbside service; the ability to place new holds will be turned on after we have triggered the currently waiting paging lists.
    - IT will restore paused operations such as notifications and due dates. All items currently checked out will be extended until June 1
    - Customers wishing to return items during curbside will be asked to return materials in drive through book drops to prevent cross contamination to already quarantined materials.

Preparation for Reopening to the Public (date TBD, after 5/30/2020)

Signage
- Prepare foam core signs at all entrances to outline available services and reminder of physical distancing, handwashing, face covering and other safety behavior
- Prepare floor markings for physical distancing around hold shelves, new and popular picks shelves, self-check stations, and service desks
- Prepare aisles for one-way usage
- Install signage in bathrooms per CDC recommendations

Hours
- Hours will need to be determined for vulnerable populations.

Space
- Remove all chairs in public seating areas
- Remove or reconfigure self-check stations to insure physical distancing
- Configure other spaces when possible to ensure physical distancing, such as entrance and exits
- Calculate an estimated total number of customers allowed in the library (50% capacity)
- Decide how many computers can be available, cover others with bags to prevent usage
- Cover all tech buffet equipment.
- Close and lock all meeting rooms, study rooms, and other areas of congregation.
- Remove all toys from Children's Departments.
- Counter shields will be installed at all public service desks.

Cleaning

- Deep clean of all three libraries
- Regular disinfecting of all surfaces and equipment, especially high touch areas such as trash cans, computer stations and counters, door handles, buttons, hand railings, chair armrest, etc.
- Continue following facilities provided protocol regarding cleaning of departments and workspaces.

Safety Measures

- Continue to order and supply gloves and masks for all staff
- Provide hand sanitizer at all entrances for the public
- Continue following guidelines regarding mask and glove regulations per the IDPH/CDC.
- Install wipeable covers for any computer screens, self-check machines, mice, etc.
- Install plexiglass shields at all service desks

Collection Handling

- Consider barriers near in-house return bins
- Continue to quarantine materials for 72 hours
- Continue wearing gloves to handle materials.

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Naperville Public Library
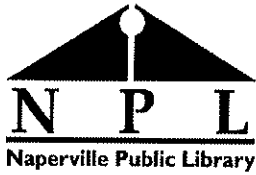
MEMORANDUM

Date: October 26, 2020

To: Leadership Team

From: Human Resources

Regarding: COVID-19 Inter Departmental Communication for Supervisors

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Winter is approaching and that means an increase in cold and flu like symptoms. We all know that many of the symptoms exhibited with the common cold are the same symptoms with COVID-19. More than ever, we must remain vigilant with safety protocols and take proactive measures to ensure the health and wellness of our employees.

Supervisors should maintain an open line of communication with their staff and establish regular check-ups with their employees. Take time to talk to staff over the next few days to ensure they are following safety protocols while at work and away. Establish an open dialogue with your teams. Encourage staff to wear their masks appropriately, use hand sanitizer regularly, exercise proper hand-washing procedures, maintain social distance guidelines, refrain from large gatherings, and reduce their inner circle to limit the spread.

Employees exhibiting cold like symptoms should stay home and seek guidance from a medical professional. Staff members who take time off to seek medical treatment for COVID related instances, may be eligible for paid time off under the Family First Coronavirus Response Act and may contact Human Resources with questions regarding eligibility. Furthermore, staff who are exhibiting mild symptoms, who need to self-quarantine, may be allowed to telecommute, as deemed appropriate by their supervisor.

NPL is committed to the safety of all employees and is following guidelines in line with the CDC and medical health professionals. Any employee who is concerned about exposure should reach out to their supervisor or Human resources for guidance immediately.

COVID training materials listed on the SharePoint may be used as a reference and will be updated to reflect the most current recommendations and guidelines with the CDC.

From:	Vanessa Alcorn
Sent:	Monday, October 26, 2020 11:06 AM
To:	Leadership Team
Subject:	Employee Communication for Supervisors (COVID-19)
Attachments:	COVID-19 Inter Departmental Communication for Supervisors.pdf; COVID-19 Employee Training.pdf

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Vanessa Alcorn
Naperville Public Library
Human Resources Manager
630-637-2229 | www.naperville-lib.org

Prevent the spread of COVID-19 if you are sick

Accessible version: https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

If you are sick with COVID-19 or think you might have COVID-19, follow the steps below to help protect other people in your home and community.

Stay home except to get medical care.

- **Stay home.** Most people with COVID-19 have mild illness and are able to recover at home without medical care. Do not leave your home, except to get medical care. Do not visit public areas.

- **Take care of yourself.** Get rest and stay hydrated.

- **Get medical care when needed.** Call your doctor before you go to their office for care. But, if you have trouble breathing or other concerning symptoms, call 911 for immediate help.

- **Avoid public transportation,** ride-sharing, or taxis.
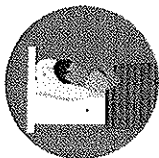
Separate yourself from other people and pets in your home.

- **As much as possible, stay in a specific room** and away from other people and pets in your home. Also, you should use a separate bathroom, if available. If you need to be around other people or animals in or outside of the home, wear a cloth face covering.

  - See COVID-19 and Animals if you have questions about pets: https://www.cdc.gov/coronavirus/2019-ncov/faq.html#COVID19animals

Monitor your symptoms.

- **Common symptoms of COVID-19 include fever and cough.** Trouble breathing is a more serious symptom that means you should get medical attention.

- **Follow care instructions from your healthcare provider and local health department.** Your local health authorities will give instructions on checking your symptoms and reporting information.

If you develop **emergency warning signs** for COVID-19 get **medical attention immediately.**

Emergency warning signs include*:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion or not able to be woken
- Bluish lips or face

*This list is not all inclusive. Please consult your medical provider for any other symptoms that are severe or concerning to you.

Call 911 if you have a medical emergency. If you have a medical emergency and need to call 911, notify the operator that you have or think you might have, COVID-19. If possible, put on a facemask before medical help arrives.

Call ahead before visiting your doctor.

- **Call ahead.** Many medical visits for routine care are being postponed or done by phone or telemedicine.

- **If you have a medical appointment that cannot be postponed, call your doctor's office.** This will help the office protect themselves and other patients.

If you are sick, wear a cloth covering over your nose and mouth.

- **You should wear a cloth face covering over your nose and mouth** if you must be around other people or animals, including pets (even at home).

- You don't need to wear the cloth face covering if you are alone. If you can't put on a cloth face covering (because of trouble breathing for example), cover your coughs and sneezes in some other way. Try to stay at least 6 feet away from other people. This will help protect the people around you.

Note: During the COVID-19 pandemic, medical grade facemasks are reserved for healthcare workers and some first responders. You may need to make a cloth face covering using a scarf or bandana.
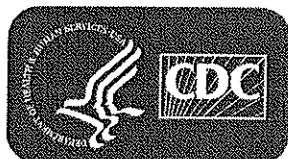
cdc.gov/coronavirus

CS 316120-A 05/03/2020

Cover your coughs and sneezes.

- **Cover your mouth and nose** with a tissue when you cough or sneeze.

- **Throw used tissues** in a lined trash can.

- **Immediately wash your hands** with soap and water for at least 20 seconds. If soap and water are not available, clean your hands with an alcohol-based hand sanitizer that contains at least 60% alcohol.

Clean your hands often.

- **Wash your hands often** with soap and water for at least 20 seconds. This is especially important after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food.

- **Use hand sanitizer** if soap and water are not available. Use an alcohol-based hand sanitizer with at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry.

- **Soap and water are the best option**, especially if your hands are visibly dirty.

- **Avoid touching** your eyes, nose, and mouth with unwashed hands.

Avoid sharing personal household items.

- **Do not share** dishes, drinking glasses, cups, eating utensils, towels, or bedding with other people in your home.

- **Wash these items thoroughly after using them** with soap and water or put them in the dishwasher.

Clean all "high-touch" surfaces everyday.

- **Clean and disinfect** high-touch surfaces in your "sick room" and bathroom. Let someone else clean and disinfect surfaces in common areas, but not your bedroom and bathroom.

- **If a caregiver or other person needs to clean and disinfect** a sick person's bedroom or bathroom, they should do so on an as-needed basis. The caregiver/other person should wear a mask and wait as long as possible after the sick person has used the bathroom.

High-touch surfaces include phones, remote controls, counters, tabletops, doorknobs, bathroom fixtures, toilets, keyboards, tablets, and bedside tables.

- **Clean and disinfect areas that may have blood, stool, or body fluids on them.**

- **Use household cleaners and disinfectants.** Clean the area or item with soap and water or another detergent if it is dirty. Then use a household disinfectant.

  - Be sure to follow the instructions on the label to ensure safe and effective use of the product. Many products recommend keeping the surface wet for several minutes to ensure germs are killed. Many also recommend precautions such as wearing gloves and making sure you have good ventilation during use of the product.

  - Most EPA-registered household disinfectants should be effective.

How to discontinue home isolation

- People **with COVID-19 who have stayed home (home isolated)** can stop home isolation under the following conditions:

  - *If you will not have a test* to determine if you are still contagious, you can leave home after these three things have happened:
    - You have had no fever for at least 72 hours (that is three full days of no fever without the use of medicine that reduces fevers)

      AND

    - other symptoms have improved (for example, when your cough or shortness of breath has improved)

      AND

    - at least 10 days have passed since your symptoms first appeared.

  - *If you will be tested* to determine if you are still contagious, you can leave home after these three things have happened:
    - You no longer have a fever (without the use of medicine that reduces fevers)

      AND

    - other symptoms have improved (for example, when your cough or shortness of breath has improved)

      AND

    - you received two negative tests in a row, 24 hours apart. Your doctor will follow CDC guidelines.

In all cases, follow the guidance of your healthcare provider and local health department. The decision to stop home isolation should be made in consultation with your healthcare provider and state and local health departments. Local decisions depend on local circumstances.
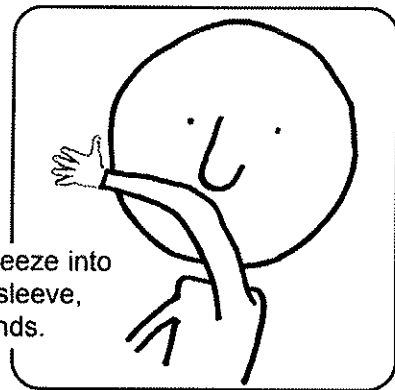
Stop the spread of germs that make you and others sick!

Cover your Cough
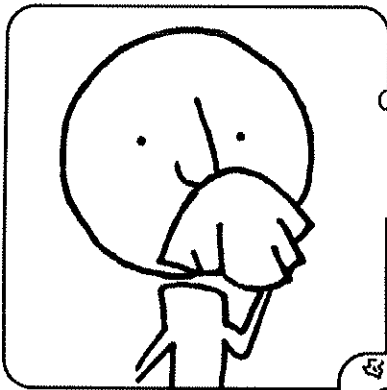
Cover your mouth and nose with a tissue when you cough or sneeze

or

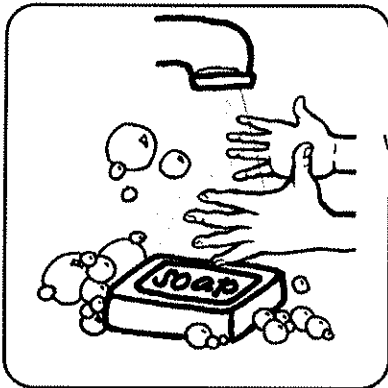cough or sneeze into your upper sleeve, not your hands.
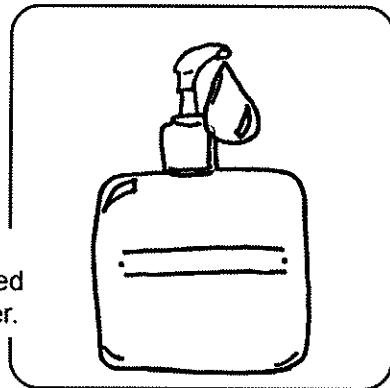
Put your used tissue in the waste basket.

Clean your Hands

after coughing or sneezing.

Wash hands with soap and warm water

or

clean with alcohol-based hand cleaner.