

# Morton Grove Park District

6834 Dempster Street • Morton Grove, Illinois • 60053 847/965-1200

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**MORTON GROVE  
PARK DISTRICT**

**Board Meeting Agenda  
September 20, 2023 at 6:30pm  
Held at the Prairie View Community Center**

- I. **Roll Call**
- II. **Pledge of Allegiance**
- III. **Additions/Changes to the Agenda**
- IV. **Citizens' Comments on Agenda Items/Correspondence**
- V. **Consent Agenda:**
  - a. **Approval of Minutes:** Minutes from the August 16, 2023 Board meeting
  - b. **Approval of Financial Reports**
    1. Cash Summary and Revenue and Expenditure Report dated August 31, 2023
    2. Invoice Distribution Report for the period ending August 31, 2023 in the amount of \$218,909.08.
- VI. **Director's Report**
- VII. **Attorney's Report**
- VIII. **Department Heads' Reports**
- IX. **Village Liaison's Report**
- X. **New Business:**
  - a. **Administration and Finance Committee – Commissioner Pietron, Chair**

|                  |   |
|------------------|---|
| Non-action Item: | Sponsorship presentation                    |
| Non-action Item: | Crisis Management and Safety Manual Updates |
| Action Item:     | BINA Hearing Date                           |
| Action Item:     | Travel, Meals, and Lodging Approval         |
| Non-action Item: | Lobbyist Discussion                         |
- XI. **Citizens' Comments on Non-agenda Items**
- XII. **Commissioner Comments:** Commissioner Pietron, Commissioner Liston, Commissioner Khan, Commissioner Schmidt, and Commissioner Minx
- XIII. **Adjournment**

Persons with disabilities requiring reasonable accommodations to participate in Park District meetings should contact Jeffrey Wait, the ADA Compliance Officer at the Prairie View Community Center at 6834 Dempster St. Morton Grove, IL 60053, by phone at 847-965-1200, Monday through Friday 9:00am to 5:00pm or by email to [jwait@mgparks.com](mailto:jwait@mgparks.com), at least 48 hours prior to the meeting. Requests for a qualified ASL interpreter generally require at least 5 business days advance notice. For the deaf or hearing-impaired, please use the Illinois Relay Center voice only operator at (800) 526-0857.

## **Consent Agenda: September 20, 2023 – Commissioner John Pietron**

### **Minutes:**

I move to accept the recommendation of the Administration and Finance Committee to approve the minutes of the:

- The Board Meeting held on August 16, 2023

### **And the Financial Reports which include:**

- Cash Summary and Revenue and Expenditure Report dated August 31, 2023
- The Invoice Distribution Report ending August 31, 2023 in the amount of \$205,465.28.
- Card Services Report dated August 31, 2023.

# Approval of Minutes

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# Morton Grove Park District

6834 Dempster Street ▪ Morton Grove, Illinois ▪ 60053 847/965-1200

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**MORTON GROVE  
PARK DISTRICT**

Minutes of the 861<sup>st</sup> Board Meeting  
August 16, 2023  
Held at Prairie View Community Center

- I. **Roll Call:** Commissioner Minx called the meeting to order at 6:39pm.

**Commissioners Present:** Steve Schmidt, Mazhar Khan, John Liston, and Paul Minx  
**Commissioners Absent:** John Pietron

**Staff Present:** Jeffrey Wait, Executive Director; Marty O'Brien, Superintendent of Finance; and Sue Braubach, Superintendent of Recreation.

**Attorney Present:** None

- II. **Pledge of Allegiance:** The Pledge of Allegiance was recited.

- III. **Additions/Changes to the Agenda:** None

- IV. **Citizens Comments on Agenda Items/Correspondence:** None

- V. **Consent Agenda:**

Commissioner Minx made a motion, seconded by Commissioner Khan to approve:

- a. The minutes of the Decennial Meeting July 19, 2023, and the Board Meeting held on July 19, 2023.
- b. The Financial Reports:
  1. The Cash Summary and Revenue and Expenditure Report dated July 31, 2023
  2. The Invoice Distribution Report for the period ending July 31, 2023 in the amount of \$205,465.28.

**Ayes: Commissioner Schmidt, Minx, Khan, and Liston. Nays: 0. Motion carried.**

- VI. **Director's Report:** Director Wait reminded residents that Oriole Pool has closed for the season. Harrer Pool is now open on Fridays from 4:30pm- 8:30pm and Saturday-Sunday from 11am to 7pm through Labor Day. Wait continued by stating the Park District is finalizing the OSLAD grant for Palma Lane Park renovations. Lastly, Wait announced that the Assyrian Food Festival is Saturday and Sunday August 19<sup>th</sup> and 20<sup>th</sup> at Prairie View Park.

- VII. **Attorney's Report:** Submitted electronically.

- VIII. **Village Liaison Report:** National Night out was a success. Minx stated the Sustainability Expo will be held September 9<sup>th</sup>.

- IX. **Department Heads' Report:** Superintendent O'Brien stated that the second collection of property taxes will be November 1<sup>st</sup>. O'Brien mentioned that the finance department is getting ready for budget season. Capital Planning will be done in September.



Superintendent Braubach stated the Back to School Bash was a success. Braubach mentioned spring and summer softball leagues are coming to an end for the season and preschool programs will begin after Labor Day. Lastly, Braubach mentioned that the fitness center renovations are almost complete.

**X. New Business:**

**a. Administration and Finance Committee – Commissioner Pietron, Chair**

**Replace Ballfield Lighting at Harrer Park:** Commissioner Minx made a motion, seconded by Commissioner Khan, to approve the contract to replace the field lighting at Harrer Park under the Com Ed rebate program.

**Ayes: Commissioners Minx, Khan, Liston, and Schmidt. Nays:0. Motion carried.**

**Authority to Purchase a Lawn Mower:** Commissioner Minx made a motion, seconded by Commissioner Khan, to approve the purchase of a tri-deck lawn mower through a coop in an amount not to exceed \$105,000.

**Ayes: Commissioners Liston, Minx, Khan, and Schmidt. Nays:0. Motion carried.**

**XI. Public Comment on Non-Agenda Items: None**

**XII. Commissioner Comments:**

**Commissioner Khan:** Thanked entire staff and Director Jeff Wait.

**Commissioner Liston:** Mentioned that he took tours of a lot of our parks with his children, and they were all wonderful. He thanked the entire staff.

**Commissioner Schmidt:** Thanked the staff for a great summer season.

**Commissioner Minx:** Stated the Back-to-School Bash was fantastic and thanked the entire staff for doing a great job.

**XIII. Adjournment:** Commissioner Liston made a motion, seconded by Commissioner Khan to adjourn the meeting. **Motion carried by voice vote.**

The meeting ended at approximately 7:03pm.

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Board President, Paul Minx

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Board Secretary, Jeffrey Wait

# Financials

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- Cash Summary
- Revenue and Expenditures Report
- The Invoice Distribution Report
- Card Services Report

CASH SUMMARY BY FUND FOR MORTON GROVE PARK DISTRICT  
 FROM 08/01/2023 TO 08/31/2023  
 FUND: ALL FUNDS

CASH AND INVESTMENT ACCOUNTS

| Fund              | Description           | Beginning Balance<br>08/01/2023 | Total Debits | Total Credits | Ending Balance<br>08/31/2023 |
|-------------------|-----------------------|---------------------------------|--------------|---------------|------------------------------|
| 01                | CORPORATE             | 1,776,792.37                    | 110,035.87   | 151,730.17    | 1,735,098.07                 |
| 02                | RECREATION            | 1,207,960.81                    | 250,414.97   | 434,614.77    | 1,023,761.01                 |
| 05                | POLICE                | 1,288.63                        | 0.00         | 1,974.17      | (685.54)                     |
| 15                | MUSEUM                | (8,535.12)                      | 0.00         | 2,045.97      | (10,581.09)                  |
| 20                | I.M.R.F.              | 51,433.38                       | 2,254.72     | 12,792.67     | 40,895.43                    |
| 22                | F.I.C.A.              | 11,413.88                       | 2,254.72     | 29,353.88     | (15,685.28)                  |
| 25                | BOND & INTEREST       | 625,305.90                      | 23,671.29    | 0.00          | 648,977.19                   |
| 30                | LIABILITY INSURANCE   | 84,706.86                       | 0.00         | 9,193.52      | 75,513.34                    |
| 35                | SPECIAL RECREATION    | 295,318.86                      | 7,936.62     | 3,015.13      | 300,240.35                   |
| 70                | CAPITAL IMPROVEMENTS  | 6,277,457.72                    | 32,970.00    | 87,602.89     | 6,222,824.83                 |
| 99                | PAYROLL CLEARING FUND | 36,803.20                       | 170,417.59   | 168,825.04    | 38,395.75                    |
| TOTAL - ALL FUNDS |                       | 10,359,946.49                   | 599,955.78   | 901,148.21    | 10,058,754.06                |

| GL NUMBER                                  | DESCRIPTION | 2023           |                   | YTD BALANCE  |                | ACTIVITY FOR | AVAILABLE        |                   |         |
|--|-------------|----------------|-------------------|--------------|----------------|--------------|------------------|-------------------|---------|
|  |             | AMENDED BUDGET | NORMAL (ABNORMAL) | 08/31/2023   | 08/31/2023     |              | MONTH 08/31/2023 | NORMAL (ABNORMAL) | BALANCE |
| Fund 01 - CORPORATE                        |             |                |                   |              |                |              |                  |                   |         |
| Fund 01 - CORPORATE:                       |             |                |                   |              |                |              |                  |                   |         |
| TOTAL REVENUES                             |             | 2,609,530.00   | 2,450,209.77      | 110,035.87   | 159,320.23     | 93.89        |                  |                   |         |
| TOTAL EXPENDITURES                         |             | 2,609,530.00   | 1,034,345.57      | 142,619.02   | 1,575,184.43   | 39.64        |                  |                   |         |
| NET OF REVENUES & EXPENDITURES             |             | 0.00           | 1,415,864.20      | (32,583.15)  | (1,415,864.20) | 100.00       |                  |                   |         |
| Fund 02 - RECREATION                       |             |                |                   |              |                |              |                  |                   |         |
| Fund 02 - RECREATION:                      |             |                |                   |              |                |              |                  |                   |         |
| TOTAL REVENUES                             |             | 2,961,597.00   | 2,261,365.99      | 249,677.30   | 700,231.01     | 76.36        |                  |                   |         |
| TOTAL EXPENDITURES                         |             | 2,961,597.00   | 2,073,758.09      | 425,796.99   | 887,838.91     | 70.02        |                  |                   |         |
| NET OF REVENUES & EXPENDITURES             |             | 0.00           | 187,607.90        | (176,119.69) | (187,607.90)   | 100.00       |                  |                   |         |
| Fund 05 - POLICE                           |             |                |                   |              |                |              |                  |                   |         |
| Fund 05 - POLICE:                          |             |                |                   |              |                |              |                  |                   |         |
| TOTAL REVENUES                             |             | 8,000.00       | 0.00              | 0.00         | 8,000.00       | 0.00         |                  |                   |         |
| TOTAL EXPENDITURES                         |             | 8,000.00       | 5,285.13          | 1,974.17     | 2,714.87       | 66.06        |                  |                   |         |
| NET OF REVENUES & EXPENDITURES             |             | 0.00           | (5,285.13)        | (1,974.17)   | 5,285.13       | 100.00       |                  |                   |         |
| Fund 15 - MUSEUM                           |             |                |                   |              |                |              |                  |                   |         |
| Fund 15 - MUSEUM:                          |             |                |                   |              |                |              |                  |                   |         |
| TOTAL REVENUES                             |             | 32,000.00      | 0.00              | 0.00         | 32,000.00      | 0.00         |                  |                   |         |
| TOTAL EXPENDITURES                         |             | 32,000.00      | 21,230.08         | 2,044.38     | 10,769.92      | 66.34        |                  |                   |         |
| NET OF REVENUES & EXPENDITURES             |             | 0.00           | (21,230.08)       | (2,044.38)   | 21,230.08      | 100.00       |                  |                   |         |
| Fund 20 - I.M.R.F.                         |             |                |                   |              |                |              |                  |                   |         |
| Fund 20 - I.M.R.F.:                        |             |                |                   |              |                |              |                  |                   |         |
| TOTAL REVENUES                             |             | 161,000.00     | 72,244.23         | 2,254.72     | 88,755.77      | 44.87        |                  |                   |         |
| TOTAL EXPENDITURES                         |             | 161,000.00     | 104,499.84        | 12,792.67    | 56,500.16      | 64.91        |                  |                   |         |
| NET OF REVENUES & EXPENDITURES             |             | 0.00           | (32,255.61)       | (10,537.95)  | 32,255.61      | 100.00       |                  |                   |         |
| Fund 22 - F.I.C.A.                         |             |                |                   |              |                |              |                  |                   |         |
| Fund 22 - F.I.C.A.:                        |             |                |                   |              |                |              |                  |                   |         |
| TOTAL REVENUES                             |             | 245,000.00     | 72,244.23         | 2,254.72     | 172,755.77     | 29.49        |                  |                   |         |
| TOTAL EXPENDITURES                         |             | 245,000.00     | 147,532.83        | 29,353.88    | 97,467.17      | 60.22        |                  |                   |         |
| NET OF REVENUES & EXPENDITURES             |             | 0.00           | (75,288.60)       | (27,099.16)  | 75,288.60      | 100.00       |                  |                   |         |
| Fund 25 - BOND & INTEREST                  |             |                |                   |              |                |              |                  |                   |         |
| Fund 25 - BOND & INTEREST:                 |             |                |                   |              |                |              |                  |                   |         |
| TOTAL REVENUES                             |             | 1,050,000.00   | 756,359.21        | 23,671.29    | 293,640.79     | 72.03        |                  |                   |         |
| TOTAL EXPENDITURES                         |             | 1,050,000.00   | 0.00              | 0.00         | 1,050,000.00   | 0.00         |                  |                   |         |
| NET OF REVENUES & EXPENDITURES             |             | 0.00           | 756,359.21        | 23,671.29    | (756,359.21)   | 100.00       |                  |                   |         |
| Fund 26 - BOND AND INTEREST - HARRER POOL  |             |                |                   |              |                |              |                  |                   |         |
| Fund 26 - BOND AND INTEREST - HARRER POOL: |             |                |                   |              |                |              |                  |                   |         |
| TOTAL REVENUES                             |             | 780,000.00     | 0.00              | 0.00         | 780,000.00     | 0.00         |                  |                   |         |
| TOTAL EXPENDITURES                         |             | 780,000.00     | 256,425.00        | 0.00         | 523,575.00     | 32.88        |                  |                   |         |
| NET OF REVENUES & EXPENDITURES             |             | 0.00           | (256,425.00)      | 0.00         | 256,425.00     | 100.00       |                  |                   |         |
| Fund 30 - LIABILITY INSURANCE              |             |                |                   |              |                |              |                  |                   |         |
| Fund 30 - LIABILITY INSURANCE:             |             |                |                   |              |                |              |                  |                   |         |
| TOTAL REVENUES                             |             | 142,000.00     | 70,223.13         | 0.00         | 71,776.87      | 49.45        |                  |                   |         |
| TOTAL EXPENDITURES                         |             | 142,000.00     | 53,022.24         | 9,193.52     | 88,977.76      | 37.34        |                  |                   |         |
| NET OF REVENUES & EXPENDITURES             |             | 0.00           | 17,200.89         | (9,193.52)   | (17,200.89)    | 100.00       |                  |                   |         |



PERIOD ENDING 08/31/2023

| GL NUMBER                        | DESCRIPTION                    | 2023           |                   | YTD BALANCE                     |                                   | ACTIVITY FOR                            |                   | AVAILABLE                    |  | % BDGT<br>USED |
|----------------------------------|--------------------------------|----------------|-------------------|---------------------------------|-----------------------------------|---|-------------------|------------------------------|--|----------------|
|                                  |                                | AMENDED BUDGET | NORMAL (ABNORMAL) | 08/31/2023<br>NORMAL (ABNORMAL) | 08/31/2023<br>INCREASE (DECREASE) | MONTH 08/31/2023<br>INCREASE (DECREASE) | NORMAL (ABNORMAL) | BALANCE<br>NORMAL (ABNORMAL) |  |                |
| Fund 35 - SPECIAL RECREATION     |                                |                |                   |                                 |                                   |   |                   |                              |  |                |
| Fund 35 - SPECIAL RECREATION:    |                                |                |                   |                                 |                                   |   |                   |                              |  |                |
|                                  | TOTAL REVENUES                 | 358,000.00     | 253,595.68        | 7,936.62                        |                                   | 104,404.32                              |                   | 70.84                        |  |                |
|                                  | TOTAL EXPENDITURES             | 358,000.00     | 115,084.81        | 1,855.68                        |                                   | 242,915.19                              |                   | 32.15                        |  |                |
|                                  | NET OF REVENUES & EXPENDITURES | 0.00           | 138,510.87        | 6,080.94                        |                                   | (138,510.87)                            |                   | 100.00                       |  |                |
| Fund 40 - AUDIT                  |                                |                |                   |                                 |                                   |   |                   |                              |  |                |
| Fund 40 - AUDIT:                 |                                |                |                   |                                 |                                   |   |                   |                              |  |                |
|                                  | TOTAL REVENUES                 | 21,500.00      | 0.00              | 0.00                            |                                   | 21,500.00                               |                   | 0.00                         |  |                |
|                                  | TOTAL EXPENDITURES             | 21,500.00      | 21,300.00         | 0.00                            |                                   | 200.00                                  |                   | 99.07                        |  |                |
|                                  | NET OF REVENUES & EXPENDITURES | 0.00           | (21,300.00)       | 0.00                            |                                   | 21,300.00                               |                   | 100.00                       |  |                |
| Fund 70 - CAPITAL IMPROVEMENTS   |                                |                |                   |                                 |                                   |   |                   |                              |  |                |
| Fund 70 - CAPITAL IMPROVEMENTS:  |                                |                |                   |                                 |                                   |   |                   |                              |  |                |
|                                  | TOTAL REVENUES                 | 1,591,000.00   | 111,850.00        | 0.00                            |                                   | 1,479,150.00                            |                   | 7.03                         |  |                |
|                                  | TOTAL EXPENDITURES             | 1,591,000.00   | 264,798.04        | 28,837.89                       |                                   | 1,326,201.96                            |                   | 16.64                        |  |                |
|                                  | NET OF REVENUES & EXPENDITURES | 0.00           | (152,948.04)      | (28,837.89)                     |                                   | 152,948.04                              |                   | 100.00                       |  |                |
| Fund 99 - PAYROLL CLEARING FUND  |                                |                |                   |                                 |                                   |   |                   |                              |  |                |
| Fund 99 - PAYROLL CLEARING FUND: |                                |                |                   |                                 |                                   |   |                   |                              |  |                |
|                                  | TOTAL REVENUES                 | 0.00           | 904.44            | 86.26                           |                                   | (904.44)                                |                   | 100.00                       |  |                |
|                                  | TOTAL EXPENDITURES             | 0.00           | 0.00              | 0.00                            |                                   | 0.00                                    |                   | 0.00                         |  |                |
|                                  | NET OF REVENUES & EXPENDITURES | 0.00           | 904.44            | 86.26                           |                                   | (904.44)                                |                   | 100.00                       |  |                |
| TOTAL REVENUES - ALL FUNDS       |                                |                |                   |                                 |                                   |   |                   |                              |  |                |
| TOTAL EXPENDITURES - ALL FUNDS   |                                |                |                   |                                 |                                   |   |                   |                              |  |                |
|                                  | NET OF REVENUES & EXPENDITURES | 0.00           | 1,951,715.05      | (258,551.42)                    |                                   | (1,951,715.05)                          |                   | 100.00                       |  |                |

| GL Number              | Invoice Line Desc   | Vendor | Invoice Description        | Amount   | Check # |
|------------------------|---|--------|----------------------------|----------|---------|
| Check 316859           |   |        |                            |          |         |
| 01-20-520312           | MATERIALS AND SUPPLIES-JAN CASE LOTS, INC   |        | PVCC SUPPLIES              | 279.55   | 316859  |
| 02-21-520312           | MATERIALS AND SUPPLIES-JAN CASE LOTS, INC   |        | PVCC SUPPLIES              | 64.90    | 316859  |
| 02-22-520312           | MATERIALS AND SUPPLIES-JAN CASE LOTS, INC   |        | PVCC SUPPLIES              | 64.90    | 316859  |
| Total For Check 316859 |   |        |                            | 409.35   |         |
| Check 316861           |   |        |                            |          |         |
| 02-33-520227           | MATRL AND SUPP-EQUIP MAINT CUMMINS NPOWER   |        | PREVENTIVE MAINTENANCE PVC | 929.97   | 316861  |
| Total For Check 316861 |   |        |                            | 929.97   |         |
| Check 316863           |   |        |                            |          |         |
| 02-33-520312           | MATERIALS AND SUPPLIES-JAN GRAINGER   |        | JANITORIAL SUPPLY PVCC     | 55.62    | 316863  |
| Total For Check 316863 |   |        |                            | 55.62    |         |
| Check 316864           |   |        |                            |          |         |
| 02-21-553100           | CONTRACTUAL SERVICES-POOL HALOGEN SUPPLY COMPANY, IN HARRER POOL SUPPLIES         |        |                            | 90.48    | 316864  |
| 02-21-570600           | BLDG-LANDSCAPE-POOL - BLDG HALOGEN SUPPLY COMPANY, IN HARRER POOL SUPPLIES        |        |                            | 567.56   | 316864  |
| 02-22-553100           | CONTRACTUAL SERVICES-POOL HALOGEN SUPPLY COMPANY, IN POOL SUPPLIES                |        |                            | 100.72   | 316864  |
| 02-22-570600           | BLDG-LANDSCAPE-POOL - BLDG HALOGEN SUPPLY COMPANY, IN ORIOLE POOL SUPPLIES        |        |                            | 114.08   | 316864  |
| Total For Check 316864 |   |        |                            | 872.84   |         |
| Check 316866           |   |        |                            |          |         |
| 01-20-554100           | CONTRACTUAL SERVICES-AGREE LRS HOLDINGS, LLC                                      |        | DUMPSTER SERVICES 9500 SHE | 1,872.00 | 316866  |
| Total For Check 316866 |   |        |                            | 1,872.00 |         |
| Check 316873           |   |        |                            |          |         |
| 70-10-586136           | SHADE STRUCTURES FOR PARKS OZINGA READY MIX CONCRETE                              |        | CONCRETE                   | 1,241.38 | 316873  |
| Total For Check 316873 |   |        |                            | 1,241.38 |         |
| Check 316876           |   |        |                            |          |         |
| 02-06-592715           | CONTRACTING SERVICES-TODDL ROCK 'N' KIDS, INC.                                    |        | ROCK N KIDS CLASSES        | 272.00   | 316876  |
| Total For Check 316876 |   |        |                            | 272.00   |         |
| Check 316877           |   |        |                            |          |         |
| 02-01-592170           | CONTRACTING-YOUTH ATHLETIC SKYHAWKS SPORTS ACADEMY, I CHEERLEADING CAMP TRACK AN  |        |                            | 3,233.30 | 316877  |
| Total For Check 316877 |   |        |                            | 3,233.30 |         |
| Check 316878           |   |        |                            |          |         |
| 01-20-520312           | MATERIALS AND SUPPLIES-JAN STATE INDUSTRIAL PRODUCTS                              |        | PVCC CLEANING SUPPLIES     | 660.51   | 316878  |
| Total For Check 316878 |   |        |                            | 660.51   |         |
| Check 316879           |   |        |                            |          |         |
| 02-21-553100           | CONTRACTUAL SERVICES-POOL UNIVAR SOLUTIONS  |        | POOL CHEMICALS             | 1,864.35 | 316879  |
| Total For Check 316879 |   |        |                            | 1,864.35 |         |
| Check 316882           |   |        |                            |          |         |
| 01-20-520312           | MATERIALS AND SUPPLIES-JAN MENARDS  |        | GARAGE SUPPLIES            | 20.46    | 316882  |
| 01-20-520321           | MATRL AND SUPP-MAINT. - MA MENARDS  |        | PLUMBING SUPPLIES          | 127.27   | 316882  |
| 01-20-520400           | MATRL-SUPP-SUPPLIES - TOOL MENARDS  |        | FOLDING SAWHORSE AND SPEED | 93.14    | 316882  |
| Total For Check 316882 |   |        |                            | 240.87   |         |
| Check 316883           |   |        |                            |          |         |
| 01-20-554100           | CONTRACTUAL SERVICES-AGREE ALARM DETECTION SYSTEMS, I ALAR DETECTION SEP TO NOV   |        |                            | 61.35    | 316883  |
| 02-22-552200           | CONTRACT SVCS-FRAMEWORK IT ALARM DETECTION SYSTEMS, I ALARM DETECTION SEPT TO NOV |        |                            | 192.36   | 316883  |
| 15-10-554600           | CONTRACTUAL SERVICES-PROF ALARM DETECTION SYSTEMS, I ALARM DETECTION SEP TO NOV   |        |                            | 115.47   | 316883  |
| Total For Check 316883 |   |        |                            | 369.18   |         |
| Check 316884           |   |        |                            |          |         |
| 70-10-586000           | EXP MIS-BOND REGISTRAR & L AMALGAMATED BANK OF CHICAG BOND FEES FOR ORIOLE POOL   |        |                            | 475.00   | 316884  |
| Total For Check 316884 |   |        |                            | 475.00   |         |
| Check 316885           |   |        |                            |          |         |
| 02-32-513700           | SALARIES & WAGES-GROUPX IN BODYMINDSPIRITFITNESS CORP FITNESS CLASSES             |        |                            | 1,170.00 | 316885  |
| Total For Check 316885 |   |        |                            | 1,170.00 |         |
| Check 316886           |   |        |                            |          |         |
| 01-10-581400           | EXP MISCELLANEOUS-DUES & S CITYTECH USA, INC.                                     |        | CITY TECH SUBSCRIPTION 202 | 225.00   | 316886  |
| Total For Check 316886 |   |        |                            | 225.00   |         |



| GL Number              | Invoice Line Desc                                    | Vendor           | Invoice Description        | Amount    | Check # |
|------------------------|--|------------------|----------------------------|-----------|---------|
| Check 316887           |  |                  |                            |           |         |
| 02-32-554200           | CONTRACT SVCS-AGREEMENTS - COMCAST CABLE             |                  | PVCC TELEVISION SERVICE FO | 52.60     | 316887  |
| Total For Check 316887 |  |                  |                            | 52.60     |         |
| Check 316888           |  |                  |                            |           |         |
| 02-33-540110           | UTILITIES-ELECTRICTY                                 | COMED            | COM ED BILL FOR 8830 OAK P | 48.73     | 316888  |
| Total For Check 316888 |  |                  |                            | 48.73     |         |
| Check 316889           |  |                  |                            |           |         |
| 02-32-520210           | MATERIALS AND SUPPLIES-EQU DIRECT FITNESS SOLUTIONS, |                  | FITNESS EQUIPMENT REPAIRS  | 3,004.94  | 316889  |
| Total For Check 316889 |  |                  |                            | 3,004.94  |         |
| Check 316890           |  |                  |                            |           |         |
| 01-10-520110           | MATRL AND SUPP-OFFICE EXP                            | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 840.00    | 316890  |
| 01-10-552200           | CONTRACT SVCS-FRAMEWORK IT                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 5,279.34  | 316890  |
| 01-10-560800           | EQUIPMENT-NEW EQUIP - COMP                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 1,908.42  | 316890  |
| 01-10-580200           | EXP MISC.-EXECUTIVE DIRECT                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 601.81    | 316890  |
| 01-10-581120           | EXP MISC-COMM EXPENSE - ED                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 601.80    | 316890  |
| 01-10-581400           | EXP MISCELLANEOUS-DUES & S                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 15.99     | 316890  |
| 01-10-581600           | EXP MISC.-MORTON GROVE SPE                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 105.10    | 316890  |
| 01-20-520323           | MATRL AND SUPP-MAINT. - MA                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 457.74    | 316890  |
| 01-20-520400           | MATRL-SUPP-SUPPLIES - TOOL                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 895.27    | 316890  |
| 01-20-581200           | EXP MISC.-EDUCATIONAL SEMI                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 97.47     | 316890  |
| 02-03-592412           | CONTRACTING SERVICES- CAMP                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 2,575.00  | 316890  |
| 02-03-593412           | PROGRAM SUPPLIES-CAMP                                | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 428.40    | 316890  |
| 02-04-593520           | PROGRAM SUPPLIES-DANCE - R                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 25.00     | 316890  |
| 02-06-593715           | PROGRAM SUPPLIES-TODDLER V                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 2.76      | 316890  |
| 02-07-593813           | PROGRAM SUPPLIES-BIRTHDAY                            | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 147.92    | 316890  |
| 02-08-593926           | PROGRAM SUPPLIES-SUMMER CO                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 20.27     | 316890  |
| 02-08-593935           | PROGRAM SUPPLIES-MOVIES IN                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 510.00    | 316890  |
| 02-08-593945           | PROGRAM SUPPLIES-BACK TO S                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 44.98     | 316890  |
| 02-08-593950           | PROGRAM SUPPLIES-FREE EVEN                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 86.61     | 316890  |
| 02-10-589105           | EXP MISCELLANEOUS-EMPLOYEE                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 29.99     | 316890  |
| 02-21-513310           | SALARIES & WAGES-INCENTIVE                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 227.95    | 316890  |
| 02-21-520110           | MATRL AND SUPP-OFFICE EXP                            | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 43.95     | 316890  |
| 02-21-520312           | MATERIALS AND SUPPLIES-JAN                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 117.98    | 316890  |
| 02-21-560700           | EQUIPMENT-NEW EQUIP - POOL                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 206.48    | 316890  |
| 02-21-570600           | BLDG-LANDSCAPE-POOL - BLDG                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 31.73     | 316890  |
| 02-21-584300           | EXP MISCELLANEOUS-POOL - S                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 146.13    | 316890  |
| 02-21-584400           | EXP MISCELLANEOUS-POOL - M                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 244.15    | 316890  |
| 02-22-513310           | SALARIES & WAGES-INCENTIVE                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 291.11    | 316890  |
| 02-22-520110           | MATRL AND SUPP-OFFICE EXP                            | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 54.30     | 316890  |
| 02-22-560700           | EQUIPMENT-NEW EQUIP - POOL                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 1,119.62  | 316890  |
| 02-22-584300           | EXP MISCELLANEOUS-POOL - S                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 555.38    | 316890  |
| 02-22-584400           | EXP MISCELLANEOUS-POOL - M                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 200.00    | 316890  |
| 02-32-560600           | EQUIPMENT-NEW EQUIP - FITN                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 57.79     | 316890  |
| 02-33-520319           | MATRL AND SUPP-SUPPLIES -                            | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 15.99     | 316890  |
| 02-33-520321           | MATRL AND SUPP-MAINT. - MA                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 44.98     | 316890  |
| 02-33-570200           | BUILDING & LANDSCAPE-BUILD                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 126.07    | 316890  |
| 02-35-554100           | CONTRACTUAL SERVICES-AGREE                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 2,081.34  | 316890  |
| 02-35-554405           | CONTRACTUAL SERVICES-PUBLI                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 48.00     | 316890  |
| 30-10-582650           | EXP MISC.-SAFTY TRAIN & SU                           | FIFTH THIRD BANK | JULY CREDIT CARD PAYMENT   | 45.01     | 316890  |
| Total For Check 316890 |  |                  |                            | 20,331.83 |         |
| Check 316891           |  |                  |                            |           |         |
| 30-10-582650           | EXP MISC.-SAFTY TRAIN & SU                           | GREG RAUHUT      | DAMAGED SAFETY BOOT REPLAC | 150.00    | 316891  |
| Total For Check 316891 |  |                  |                            | 150.00    |         |
| Check 316892           |  |                  |                            |           |         |
| 02-33-554100           | CONTRACTUAL SERVICES-AGREE                           | GROOT, INC.      | PVCC WASTE COLLECTION      | 285.96    | 316892  |

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| Check 316892 |                            | Total For Check 316892     |                            | 285.96   |         |
| Check 316893 |                            |                            |                            |          |         |
| 02-22-420210 | FEES AND ADMISSIONS-POOL P | LESLIE ANDREN              | REFUND POOL MEMBERSHIP     | 84.00    | 316893  |
|              |                            | Total For Check 316893     |                            | 84.00    |         |
| Check 316894 |                            |                            |                            |          |         |
| 01-20-554100 | CONTRACTUAL SERVICES-AGREE | LRS HOLDINGS, LLC          | HARRER POOL                | 310.75   | 316894  |
|              |                            | Total For Check 316894     |                            | 310.75   |         |
| Check 316895 |                            |                            |                            |          |         |
| 35-10-552705 | CNTRCT SVCS-ADA INCLUSION  | MAINE-NILES ASSN OF SP REC | INCLUSION FOR APRIL A 2023 | 184.77   | 316895  |
|              |                            | Total For Check 316895     |                            | 184.77   |         |
| Check 316896 |                            |                            |                            |          |         |
| 70-10-586136 | SHADE STRUCTURES FOR PARKS | OZINGA READY MIX CONCRETE  | CONCRETE FOR SHDE STRUCTUR | 1,286.50 | 316896  |
|              |                            | Total For Check 316896     |                            | 1,286.50 |         |
| Check 316897 |                            |                            |                            |          |         |
| 70-10-586136 | SHADE STRUCTURES FOR PARKS | OZINGA READY MIX CONCRETE  | CONCRETE FOR SHADE STRUCTU | 1,214.38 | 316897  |
|              |                            | Total For Check 316897     |                            | 1,214.38 |         |
| Check 316898 |                            |                            |                            |          |         |
| 30-10-532610 | INSURANCE-PROPERTY         | PARK DISTRICT RISK MANAGEM | GENERAL LIBALITY AUGUST 20 | 3,382.55 | 316898  |
| 30-10-532615 | INSURANCE-EMPLOYMENT PRACT | PARK DISTRICT RISK MANAGEM | GENERAL LIBALITY AUGUST 20 | 379.29   | 316898  |
| 30-10-532630 | INSURANCE-WORKERS COMP     | PARK DISTRICT RISK MANAGEM | GENERAL LIBALITY AUGUST 20 | 2,629.95 | 316898  |
|              |                            | Total For Check 316898     |                            | 6,391.79 |         |
| Check 316899 |                            |                            |                            |          |         |
| 02-03-592412 | CONTRACTING SERVICES- CAMP | PETTY CASH-MARTIN O'BRIEN  | PETTY CASH REIMBURSEMENTS  | 463.00   | 316899  |
|              |                            | Total For Check 316899     |                            | 463.00   |         |
| Check 316900 |                            |                            |                            |          |         |
| 15-10-554600 | CONTRACTUAL SERVICES-PROF  | SHERI COZZI                | MUSEUM CLEANING AUGUST 202 | 105.00   | 316900  |
|              |                            | Total For Check 316900     |                            | 105.00   |         |
| Check 316901 |                            |                            |                            |          |         |
| 02-32-552300 | CONTRACT SVCS-CONTRACTUAL  | WELLBEATS                  | WELLBEATS MEMBERSHIP       | 249.00   | 316901  |
|              |                            | Total For Check 316901     |                            | 249.00   |         |
| Check 316943 |                            |                            |                            |          |         |
| 01-20-520312 | MATERIALS AND SUPPLIES-JAN | CASE LOTS, INC             | TRASH CAN LINERS           | 179.40   | 316943  |
|              |                            | Total For Check 316943     |                            | 179.40   |         |
| Check 316944 |                            |                            |                            |          |         |
| 01-20-520325 | MATRL-SUPP-MAINT. - MAT'LS | CASSIDY TIRE & SERVICE     | RIDING MOWER TIRES         | 228.58   | 316944  |
|              |                            | Total For Check 316944     |                            | 228.58   |         |
| Check 316945 |                            |                            |                            |          |         |
| 02-35-554405 | CONTRACTUAL SERVICES-PUBLI | CHICAGO TRIBUNE MEDIA GROU | CAR SHOW AD                | 1,320.00 | 316945  |
|              |                            | Total For Check 316945     |                            | 1,320.00 |         |
| Check 316946 |                            |                            |                            |          |         |
| 02-08-593945 | PROGRAM SUPPLIES-BACK TO S | CLOWNING AROUND ENTERTAINM | ENTERTAINMENT FOR BACK TO  | 175.00   | 316946  |
|              |                            | Total For Check 316946     |                            | 175.00   |         |
| Check 316947 |                            |                            |                            |          |         |
| 02-01-592179 | CONTRACTING SERVICES-TKDO  | CONNELLY'S ACADEMY         | 2023 SUMMER TAE KWON DO    | 1,388.10 | 316947  |
|              |                            | Total For Check 316947     |                            | 1,388.10 |         |
| Check 316948 |                            |                            |                            |          |         |
| 70-10-586116 | EXP MISC.- BALL FIELDS REN | D&R TRUCKING COMPANY       | BALL MIX - PVCC            | 3,660.00 | 316948  |
|              |                            | Total For Check 316948     |                            | 3,660.00 |         |
| Check 316949 |                            |                            |                            |          |         |
| 01-20-520323 | MATRL AND SUPP-MAINT. - MA | FAST MRO SUPPLIES, INC.    | CLEANING SUPPLIES          | 154.74   | 316949  |
|              |                            | Total For Check 316949     |                            | 154.74   |         |
| Check 316950 |                            |                            |                            |          |         |
| 01-20-520335 | MATERIALS AND SUPPLIES-SUP | GALETON                    | SAFETY GLASSES AND EAR PRO | 175.62   | 316950  |



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| Check 316950           |                            |                            |                              |           |         |
| Total For Check 316950 |                            |                            |                              | 175.62    |         |
| Check 316951           |                            |                            |                              |           |         |
| 01-20-554100           | CONTRACTUAL SERVICES-AGREE | GREEN TURF INC.            | JULY LAWN MAINTENANCE        | 1,714.00  | 316951  |
| Total For Check 316951 |                            |                            |                              | 1,714.00  |         |
| Check 316952           |                            |                            |                              |           |         |
| 02-21-553100           | CONTRACTUAL SERVICES-POOL  | HALOGEN SUPPLY COMPANY,    | IN RETURN PRODUCT            | (86.19)   | 316952  |
| 02-22-520260           | MATRL AND SUPP-REPAIR EQUI | HALOGEN SUPPLY COMPANY,    | IN RETURN PRODUCT            | 99.64     | 316952  |
| Total For Check 316952 |                            |                            |                              | 13.45     |         |
| Check 316953           |                            |                            |                              |           |         |
| 01-10-520140           | MATRL AND SUPP-OFFICE EXP  | HINCKLEY SPRINGS           | BOTTLED WATER                | 81.41     | 316953  |
| Total For Check 316953 |                            |                            |                              | 81.41     |         |
| Check 316954           |                            |                            |                              |           |         |
| 02-21-554100           | CONTRACTUAL SERVICES-AGREE | JEFF ELLIS & ASSOCIATES,   | I AUGUST ELLIS AUDITS FOR PO | 675.00    | 316954  |
| 02-22-554100           | CONTRACTUAL SERVICES-AGREE | JEFF ELLIS & ASSOCIATES,   | I AUGUST ELLIS AUDITS FOR PO | 675.00    | 316954  |
| Total For Check 316954 |                            |                            |                              | 1,350.00  |         |
| Check 316955           |                            |                            |                              |           |         |
| 01-10-554100           | CONTRACTUAL SERVICES-AGREE | LEAF                       | JULY PRINTER LEASE           | 192.76    | 316955  |
| 02-10-554100           | CONTRACTUAL SERVICES-AGREE | LEAF                       | JULY PRINTER LEASE           | 192.76    | 316955  |
| Total For Check 316955 |                            |                            |                              | 385.52    |         |
| Check 316956           |                            |                            |                              |           |         |
| 01-20-520321           | MATRL AND SUPP-MAINT. - MA | MENARDS                    | SAFETY CAPS FOR BOLTS        | 152.58    | 316956  |
| 01-20-520400           | MATRL-SUPP-SUPPLIES - TOOL | MENARDS                    | CLAMPS AND WASHERS           | 430.74    | 316956  |
| 02-22-553100           | CONTRACTUAL SERVICES-POOL  | MENARDS                    | POOL SHOCK & HOSE HANGER     | 119.76    | 316956  |
| 02-22-570600           | BLDG-LANDSCAPE-POOL - BLDG | MENARDS                    | POOL SHOCK & HOSE HANGER     | 21.94     | 316956  |
| Total For Check 316956 |                            |                            |                              | 725.02    |         |
| Check 316957           |                            |                            |                              |           |         |
| 70-10-586136           | SHADE STRUCTURES FOR PARKS | MULTIPLE CONCRETE ACCESSOR | SHADE STRUCTURE              | 181.60    | 316957  |
| Total For Check 316957 |                            |                            |                              | 181.60    |         |
| Check 316958           |                            |                            |                              |           |         |
| 01-10-540120           | UTILITIES-HEATING FUEL     | NICOR GAS                  | JULY 2023 NATURAL GAS        | 194.50    | 316958  |
| 02-10-540120           | UTILITIES-HEATING FUEL     | NICOR GAS                  | JULY 2023 NATURAL GAS        | 266.03    | 316958  |
| 02-22-540120           | UTILITIES-HEATING FUEL     | NICOR GAS                  | JULY 2023 NATURAL GAS        | 371.06    | 316958  |
| 02-33-540120           | UTILITIES-HEATING FUEL     | NICOR GAS                  | JULY 2023 NATURAL GAS        | 259.90    | 316958  |
| 15-10-540120           | UTILITIES-HEATING FUEL     | NICOR GAS                  | JULY 2023 NATURAL GAS        | 64.77     | 316958  |
| Total For Check 316958 |                            |                            |                              | 1,156.26  |         |
| Check 316959           |                            |                            |                              |           |         |
| 01-20-520321           | MATRL AND SUPP-MAINT. - MA | NORTH SHORE FAUCETS        | OKETO PARK FAUCET            | 106.51    | 316959  |
| Total For Check 316959 |                            |                            |                              | 106.51    |         |
| Check 316960           |                            |                            |                              |           |         |
| 01-20-520323           | MATRL AND SUPP-MAINT. - MA | NUTOYS LEISURE PRODUCTS    | REPLACE BENCH                | 385.00    | 316960  |
| Total For Check 316960 |                            |                            |                              | 385.00    |         |
| Check 316961           |                            |                            |                              |           |         |
| 02-35-554400           | CONTRACT SVCS-AGREEMENTS - | PLERUS PRINTING            | PRINTINGFALL PROGRAM BOOK    | 15,747.19 | 316961  |
| Total For Check 316961 |                            |                            |                              | 15,747.19 |         |
| Check 316962           |                            |                            |                              |           |         |
| 02-22-570600           | BLDG-LANDSCAPE-POOL - BLDG | PREMISTAR-NORTH            | REPAIR ORIOLE POOL HEATER    | 434.00    | 316962  |
| Total For Check 316962 |                            |                            |                              | 434.00    |         |
| Check 316963           |                            |                            |                              |           |         |
| 01-10-540120           | UTILITIES-HEATING FUEL     | SYMMETRY ENERGY SOLUTIONS  | JULY NATURAL GAS DISTRIBUT   | 40.23     | 316963  |
| 02-10-540120           | UTILITIES-HEATING FUEL     | SYMMETRY ENERGY SOLUTIONS  | JULY NATURAL GAS DISTRIBUT   | 13.40     | 316963  |
| 02-21-540120           | UTILITIES-HEATING FUEL     | SYMMETRY ENERGY SOLUTIONS  | JULY NATURAL GAS DISTRIBUT   | 2.00      | 316963  |
| 02-22-540120           | UTILITIES-HEATING FUEL     | SYMMETRY ENERGY SOLUTIONS  | JULY NATURAL GAS DISTRIBUT   | 583.36    | 316963  |
| 02-33-540120           | UTILITIES-HEATING FUEL     | SYMMETRY ENERGY SOLUTIONS  | JULY NATURAL GAS DISTRIBUT   | 109.74    | 316963  |

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| Check 316963 |                            |   |                            |           |         |
| 15-10-540120 | UTILITIES-HEATING FUEL     | SYMMETRY ENERGY SOLUTIONS                             | JULY NATURAL GAS DISTRIBUT | 2.00      | 316963  |
|              |                            |   | Total For Check 316963     | 750.73    |         |
| Check 316964 |                            |   |                            |           |         |
| 01-20-570410 | BLDG-LNDSCP-BLK DIRT-SAND- | TRI-STATE CUT STONE & BRIC STONE FOR HARRER PARK TENN |                            | 77.33     | 316964  |
|              |                            |   | Total For Check 316964     | 77.33     |         |
| Check 316965 |                            |   |                            |           |         |
| 02-21-553100 | CONTRACTUAL SERVICES-POOL  | UNIVAR SOLUTIONS                                      | HYDROCHLORIC ACID          | 640.55    | 316965  |
|              |                            |   | Total For Check 316965     | 640.55    |         |
| Check 316966 |                            |   |                            |           |         |
| 70-10-586151 | PALMA LANE RENOVATIONS     | UPLAND DESIGN   | OSLAD PLAN FOR PALMA LANE  | 9,682.53  | 316966  |
|              |                            |   | Total For Check 316966     | 9,682.53  |         |
| Check 316967 |                            |   |                            |           |         |
| 01-20-554100 | CONTRACTUAL SERVICES-AGREE | GREEN TURF INC.                                       | MONTHLY LAWN CARE          | 1,714.00  | 316967  |
|              |                            |   | Total For Check 316967     | 1,714.00  |         |
| Check 316968 |                            |   |                            |           |         |
| 70-10-586170 | EXP MISCELLANEOUS-HARRER P | C.A.D. CONTRACT GLAZING, I                            | HARRER RENOVATION PROJECT  | 7,877.00  | 316968  |
|              |                            |   | Total For Check 316968     | 7,877.00  |         |
| Check 316969 |                            |   |                            |           |         |
| 02-03-592412 | CONTRACTING SERVICES- CAMP | FIRST STUDENT   | BUSSES FOR CAMP            | 5,576.00  | 316969  |
|              |                            |   | Total For Check 316969     | 5,576.00  |         |
| Check 316970 |                            |   |                            |           |         |
| 70-10-586170 | EXP MISCELLANEOUS-HARRER P | SCHAEFGES BROTHERS INC                                | HARRER RENOVATION PROJECT  | 20,000.00 | 316970  |
|              |                            |   | Total For Check 316970     | 20,000.00 |         |
| Check 316971 |                            |   |                            |           |         |
| 70-10-586170 | EXP MISCELLANEOUS-HARRER P | SCHAEFGES BROTHERS INC                                | HARRER PARK RENOVATION     | 2,919.00  | 316971  |
|              |                            |   | Total For Check 316971     | 2,919.00  |         |
| Check 316972 |                            |   |                            |           |         |
| 02-22-420250 | FEES AND ADMISSIONS-POOL - | AISHA KHAN  | REFUND FOR CANCELLED 2023  | 44.00     | 316972  |
|              |                            |   | Total For Check 316972     | 44.00     |         |
| Check 316973 |                            |   |                            |           |         |
| 02-22-420250 | FEES AND ADMISSIONS-POOL - | ANTONIA DREBOS  | REFUND FOR CANCELLED 2023  | 20.00     | 316973  |
|              |                            |   | Total For Check 316973     | 20.00     |         |
| Check 316974 |                            |   |                            |           |         |
| 02-21-420250 | FEES AND ADMISSIONS-POOL - | ARVEEN IQBAL  | REFUND FOR CANCELLED 2023  | 66.00     | 316974  |
|              |                            |   | Total For Check 316974     | 66.00     |         |
| Check 316975 |                            |   |                            |           |         |
| 02-21-420250 | FEES AND ADMISSIONS-POOL - | DIANE FERGUSON  | REFUND FOR CANCELLED 2023  | 66.00     | 316975  |
|              |                            |   | Total For Check 316975     | 66.00     |         |
| Check 316976 |                            |   |                            |           |         |
| 02-21-420250 | FEES AND ADMISSIONS-POOL - | FATIIMA BEHZAD  | REFUND FOR CANCELLED 2023  | 66.00     | 316976  |
|              |                            |   | Total For Check 316976     | 66.00     |         |
| Check 316977 |                            |   |                            |           |         |
| 02-21-420250 | FEES AND ADMISSIONS-POOL - | GORICA LAKIC  | REFUND FOR CANCELLED 2023  | 105.00    | 316977  |
|              |                            |   | Total For Check 316977     | 105.00    |         |
| Check 316978 |                            |   |                            |           |         |
| 02-22-420250 | FEES AND ADMISSIONS-POOL - | GREG BOCHENKO   | REFUND FOR CANCELLED 2023  | 32.00     | 316978  |
|              |                            |   | Total For Check 316978     | 32.00     |         |
| Check 316979 |                            |   |                            |           |         |
| 02-01-592193 | CONTRACTINGSERVICES-HOT SH | HOT SHOTS SPORTS                                      | HOT SHOTS SPORTS SUMMER 20 | 19,476.10 | 316979  |
|              |                            |   | Total For Check 316979     | 19,476.10 |         |
| Check 316980 |                            |   |                            |           |         |
| 02-22-420250 | FEES AND ADMISSIONS-POOL - | IMRAN PATEL   | REFUND FOR CANCELLED 2023  | 154.00    | 316980  |



| GL Number    | Invoice Line Desc                                | Vendor                 | PAID | Invoice Description       | Amount | Check # |
|--------------|--|------------------------|------|---------------------------|--------|---------|
| Check 316980 |  |                        |      |                           |        |         |
|              |  | Total For Check 316980 |      |                           | 154.00 |         |
| Check 316981 |  |                        |      |                           |        |         |
| 02-21-420250 | FEES AND ADMISSIONS-POOL - JOSEPH DIMARIA        |                        |      | REFUND FOR CANCELLED 2023 | 33.00  | 316981  |
|              |  | Total For Check 316981 |      |                           | 33.00  |         |
| Check 316982 |  |                        |      |                           |        |         |
| 02-21-420250 | FEES AND ADMISSIONS-POOL - JULIE M. LUNDIN       |                        |      | REFUND FOR CANCELLED 2023 | 22.00  | 316982  |
|              |  | Total For Check 316982 |      |                           | 22.00  |         |
| Check 316983 |  |                        |      |                           |        |         |
| 02-21-420250 | FEES AND ADMISSIONS-POOL - LEE BEE TIU           |                        |      | REFUND FOR CANCELLED 2023 | 33.00  | 316983  |
|              |  | Total For Check 316983 |      |                           | 33.00  |         |
| Check 316984 |  |                        |      |                           |        |         |
| 02-22-420250 | FEES AND ADMISSIONS-POOL - LINDA MIRZA           |                        |      | REFUND FOR CANCELLED 2023 | 63.00  | 316984  |
|              |  | Total For Check 316984 |      |                           | 63.00  |         |
| Check 316985 |  |                        |      |                           |        |         |
| 02-22-420250 | FEES AND ADMISSIONS-POOL - LINNEA SZCZEPANSKI    |                        |      | REFUND FOR CANCELLED 2023 | 63.00  | 316985  |
|              |  | Total For Check 316985 |      |                           | 63.00  |         |
| Check 316986 |  |                        |      |                           |        |         |
| 02-22-420250 | FEES AND ADMISSIONS-POOL - MASOOMA HUSSAIN       |                        |      | REFUND FOR CANCELLED 2023 | 33.00  | 316986  |
|              |  | Total For Check 316986 |      |                           | 33.00  |         |
| Check 316987 |  |                        |      |                           |        |         |
| 02-21-420250 | FEES AND ADMISSIONS-POOL - MEGGEN DAVIS          |                        |      | REFUND FOR CANCELLED 2023 | 102.00 | 316987  |
|              |  | Total For Check 316987 |      |                           | 102.00 |         |
| Check 316988 |  |                        |      |                           |        |         |
| 02-22-420250 | FEES AND ADMISSIONS-POOL - MOUSHEEN ZAHID        |                        |      | REFUND FOR CANCELLED 2023 | 66.00  | 316988  |
|              |  | Total For Check 316988 |      |                           | 66.00  |         |
| Check 316989 |  |                        |      |                           |        |         |
| 02-22-420250 | FEES AND ADMISSIONS-POOL - PAUL CABAL            |                        |      | REFUND FOR CANCELLED 2023 | 63.00  | 316989  |
|              |  | Total For Check 316989 |      |                           | 63.00  |         |
| Check 316990 |  |                        |      |                           |        |         |
| 02-22-420250 | FEES AND ADMISSIONS-POOL - RABIYA DAWOOD         |                        |      | REFUND FOR CANCELLED 2023 | 99.00  | 316990  |
|              |  | Total For Check 316990 |      |                           | 99.00  |         |
| Check 316991 |  |                        |      |                           |        |         |
| 02-22-420250 | FEES AND ADMISSIONS-POOL - REEM AJEENA           |                        |      | REFUND FOR CANCELLED 2023 | 150.00 | 316991  |
|              |  | Total For Check 316991 |      |                           | 150.00 |         |
| Check 316992 |  |                        |      |                           |        |         |
| 02-22-420250 | FEES AND ADMISSIONS-POOL - ROGELIO CALDERON      |                        |      | REFUND FOR CANCELLED 2023 | 33.00  | 316992  |
|              |  | Total For Check 316992 |      |                           | 33.00  |         |
| Check 316993 |  |                        |      |                           |        |         |
| 02-22-420250 | FEES AND ADMISSIONS-POOL - SAM BOYE              |                        |      | REFUND FOR CANCELLED 2023 | 44.00  | 316993  |
| 02-22-490479 | PROGRAM FEES REV-TIGER SHA SAM BOYE              |                        |      | REFUND FOR CANCELLED 2023 | 16.00  | 316993  |
|              |  | Total For Check 316993 |      |                           | 60.00  |         |
| Check 316994 |  |                        |      |                           |        |         |
| 02-21-420250 | FEES AND ADMISSIONS-POOL - SAMI KHALID           |                        |      | REFUND FOR CANCELLED 2023 | 33.00  | 316994  |
|              |  | Total For Check 316994 |      |                           | 33.00  |         |
| Check 316995 |  |                        |      |                           |        |         |
| 02-21-420250 | FEES AND ADMISSIONS-POOL - SHAHEEN AAMIR         |                        |      | REFUND FOR CANCELLED 2023 | 33.00  | 316995  |
|              |  | Total For Check 316995 |      |                           | 33.00  |         |
| Check 316996 |  |                        |      |                           |        |         |
| 02-22-420250 | FEES AND ADMISSIONS-POOL - SILVIA JOSEPH         |                        |      | REFUND FOR CANCELLED 2023 | 23.00  | 316996  |
|              |  | Total For Check 316996 |      |                           | 23.00  |         |
| Check 316997 |  |                        |      |                           |        |         |
| 02-21-420250 | FEES AND ADMISSIONS-POOL - TATYANA DUBASHINSKAYA |                        |      | REFUND FOR CANCELLED 2023 | 66.00  | 316997  |
|              |  | Total For Check 316997 |      |                           | 66.00  |         |

| GL Number    | Invoice Line Desc           | Vendor                     | PAID | Invoice Description          | Amount    | Check # |
|--------------|-----------------------------|----------------------------|------|------------------------------|-----------|---------|
| Check 316998 |                             |                            |      |                              |           |         |
| 02-21-420250 | FEES AND ADMISSIONS-POOL -  | TRISHA WASHINGTON          |      | REFUND FOR CANCELLED 2023    | 29.00     | 316998  |
|              |                             | Total For Check 316998     |      |                              | 29.00     |         |
| Check 316999 |                             |                            |      |                              |           |         |
| 02-22-420250 | FEES AND ADMISSIONS-POOL -  | VIDAS MOOSH                |      | REFUND FOR CANCELLED 2023    | 44.00     | 316999  |
|              |                             | Total For Check 316999     |      |                              | 44.00     |         |
| Check 317000 |                             |                            |      |                              |           |         |
| 02-21-420250 | FEES AND ADMISSIONS-POOL -  | WHITNEY NUAM               |      | REFUND FOR CANCELLED 2023    | 66.00     | 317000  |
|              |                             | Total For Check 317000     |      |                              | 66.00     |         |
| Check 317001 |                             |                            |      |                              |           |         |
| 02-22-420250 | FEES AND ADMISSIONS-POOL -  | ZAKARIA RASHEED            |      | REFUND FOR CANCELLED 2023    | 66.00     | 317001  |
|              |                             | Total For Check 317001     |      |                              | 66.00     |         |
| Check 317002 |                             |                            |      |                              |           |         |
| 01-10-554100 | CONTRACTUAL SERVICES-AGREE  | CANON FINANCIAL SERVICES,  |      | PRINTER USAGE BILL           | 199.79    | 317002  |
| 02-10-554100 | CONTRACTUAL SERVICES-AGREE  | CANON FINANCIAL SERVICES,  |      | PRINTER USAGE BILL           | 199.79    | 317002  |
|              |                             | Total For Check 317002     |      |                              | 399.58    |         |
| Check 317003 |                             |                            |      |                              |           |         |
| 01-10-554100 | CONTRACTUAL SERVICES-AGREE  | CANON SOLUTIONS AMERICA    |      | COPIER LEASE                 | 71.02     | 317003  |
| 02-10-554100 | CONTRACTUAL SERVICES-AGREE  | CANON SOLUTIONS AMERICA    |      | COPIER LEASE                 | 71.02     | 317003  |
|              |                             | Total For Check 317003     |      |                              | 142.04    |         |
| Check 317004 |                             |                            |      |                              |           |         |
| 02-05-592624 | CONTRACTING SERVICES-YOUTH  | CHESS WIZARDS, INC.        |      | CHESS WIZARDS CONTRACTOR     | 4,500.00  | 317004  |
|              |                             | Total For Check 317004     |      |                              | 4,500.00  |         |
| Check 317005 |                             |                            |      |                              |           |         |
| 02-10-540110 | UTILITIES-ELECTRICTY        | COMED                      |      | ELECTRIC BILL FOR PARKING    | 26.67     | 317005  |
|              |                             | Total For Check 317005     |      |                              | 26.67     |         |
| Check 317006 |                             |                            |      |                              |           |         |
| 02-01-490105 | PROGRAM FEES REV-PICKLEBALL | GARRY PAVLOTSKY            |      | REFUND FOR PICKLEBALL        | 31.67     | 317006  |
|              |                             | Total For Check 317006     |      |                              | 31.67     |         |
| Check 317007 |                             |                            |      |                              |           |         |
| 01-20-554100 | CONTRACTUAL SERVICES-AGREE  | LOW VOLTAGE WORKS, INC.    |      | 3 MONTHS OF ALARM MONITORI   | 105.00    | 317007  |
|              |                             | Total For Check 317007     |      |                              | 105.00    |         |
| Check 317008 |                             |                            |      |                              |           |         |
| 02-03-592412 | CONTRACTING SERVICES- CAMP  | MAGIC OF GARY KANTOR       |      | CAMP ENTERTAINMENT 08/23     | 500.00    | 317008  |
|              |                             | Total For Check 317008     |      |                              | 500.00    |         |
| Check 317009 |                             |                            |      |                              |           |         |
| 35-10-552705 | CNTRCT SVCS-ADA INCLUSION   | MAINE-NILES ASSN OF SP REC |      | INCLUSION SERVICES FOR AUG   | 1,670.91  | 317009  |
|              |                             | Total For Check 317009     |      |                              | 1,670.91  |         |
| Check 317010 |                             |                            |      |                              |           |         |
| 01-10-540110 | UTILITIES-ELECTRICTY        | MIDAMERICAN ENERGY SERVICE |      | ELECTRIC BILL FOR ALL PARK   | 1,530.08  | 317010  |
| 02-10-540110 | UTILITIES-ELECTRICTY        | MIDAMERICAN ENERGY SERVICE |      | ELECTRIC BILL FOR ALL PARK   | 456.83    | 317010  |
| 02-21-540110 | UTILITIES-ELECTRICTY        | MIDAMERICAN ENERGY SERVICE |      | ELECTRIC BILL FOR ALL PARK   | 1,014.08  | 317010  |
| 02-22-540110 | UTILITIES-ELECTRICTY        | MIDAMERICAN ENERGY SERVICE |      | ELECTRIC BILL FOR ALL PARK   | 3,947.81  | 317010  |
| 02-33-540110 | UTILITIES-ELECTRICTY        | MIDAMERICAN ENERGY SERVICE |      | ELECTRIC BILL FOR ALL PARK   | 6,120.32  | 317010  |
| 15-10-540110 | UTILITIES-ELECTRICTY        | MIDAMERICAN ENERGY SERVICE |      | ELECTRIC BILL FOR ALL PARK   | 309.12    | 317010  |
|              |                             | Total For Check 317010     |      |                              | 13,378.24 |         |
| Check 317011 |                             |                            |      |                              |           |         |
| 02-21-540120 | UTILITIES-HEATING FUEL      | NICOR GAS                  |      | GAS BILL FOR HARRER FILTER   | 1,550.05  | 317011  |
|              |                             | Total For Check 317011     |      |                              | 1,550.05  |         |
| Check 317024 |                             |                            |      |                              |           |         |
| 30-10-582615 | EXP MISC.-COLLISION SELF I  | BILL'S AUTO & TRUCK REPAIR |      | MNASR VAN REPAIR             | 1,024.50  | 317024  |
|              |                             | Total For Check 317024     |      |                              | 1,024.50  |         |
| Check 317025 |                             |                            |      |                              |           |         |
| 30-10-520329 | MATRL-SUPP-MAINT. - MAT1LS  | C.A.D. CONTRACT GLAZING,   |      | I GLASS REPAIR AT HARRER POO | 1,126.00  | 317025  |



| GL Number    | Invoice Line Desc          | Vendor                     | Invoice Description        | Amount    | Check # |
|--------------|----------------------------|----------------------------|----------------------------|-----------|---------|
| Check 317025 |                            |                            |                            |           |         |
|              |                            | Total For Check 317025     |                            | 1,126.00  |         |
| Check 317026 |                            |                            |                            |           |         |
| 02-10-540110 | UTILITIES-ELECTRICTY       | COMED                      | ELECTRIC BILL FOR OUTSIDE  | 565.41    | 317026  |
|              |                            | Total For Check 317026     |                            | 565.41    |         |
| Check 317027 |                            |                            |                            |           |         |
| 70-10-586116 | EXP MISC.- BALL FIELDS REN | CONSERV FS                 | TURFACE                    | 10,525.50 | 317027  |
|              |                            | Total For Check 317027     |                            | 10,525.50 |         |
| Check 317028 |                            |                            |                            |           |         |
| 70-10-586116 | EXP MISC.- BALL FIELDS REN | D&R TRUCKING COMPANY       | 3 SEMI LOADS OF BASEBALL M | 2,745.00  | 317028  |
|              |                            | Total For Check 317028     |                            | 2,745.00  |         |
| Check 317029 |                            |                            |                            |           |         |
| 02-32-520210 | MATERIALS AND SUPPLIES-EQU | DIRECT FITNESS SOLUTIONS,  | UPHOLSTERY AND EQUIPMENT R | 799.46    | 317029  |
|              |                            | Total For Check 317029     |                            | 799.46    |         |
| Check 317030 |                            |                            |                            |           |         |
| 01-10-580201 | EXP MISC.-RENEWAL OF STRAT | GOVHR USA                  | PARK DISTRICT STRATGIC PLA | 7,712.87  | 317030  |
|              |                            | Total For Check 317030     |                            | 7,712.87  |         |
| Check 317031 |                            |                            |                            |           |         |
| 02-22-520260 | MATRL AND SUPP-REPAIR EQUI | HALOGEN SUPPLY COMPANY,    | IN MANUAL AIR VENT VALVE   | 282.70    | 317031  |
|              |                            | Total For Check 317031     |                            | 282.70    |         |
| Check 317032 |                            |                            |                            |           |         |
| 02-01-592176 | CONTRACTING SERVICES-ISKC  | ILLINOIS SHOTOKAN KARATE C | SUMMER 2023 KARATE STATEME | 12,226.50 | 317032  |
|              |                            | Total For Check 317032     |                            | 12,226.50 |         |
| Check 317033 |                            |                            |                            |           |         |
| 01-20-554100 | CONTRACTUAL SERVICES-AGREE | LRS HOLDINGS, LLC          | DUMPSTER SERVICES FOR 9500 | 936.00    | 317033  |
|              |                            | Total For Check 317033     |                            | 936.00    |         |
| Check 317034 |                            |                            |                            |           |         |
| 01-20-520312 | MATERIALS AND SUPPLIES-JAN | MENARDS                    | SUPPLIES FOR FIELDHOUSE    | 25.35     | 317034  |
| 01-20-520400 | MATRL-SUPP-SUPPLIES - TOOL | MENARDS                    | SUPPLIES FOR FIELDHOUSE    | 54.74     | 317034  |
|              |                            | Total For Check 317034     |                            | 80.09     |         |
| Check 317035 |                            |                            |                            |           |         |
| 02-22-570600 | BLDG-LANDSCAPE-POOL - BLDG | MORTON GROVE SUPPLY COMPAN | SLOAN URINAL FLUSH VALVE F | 518.78    | 317035  |
|              |                            | Total For Check 317035     |                            | 518.78    |         |
| Check 317036 |                            |                            |                            |           |         |
| 01-20-520325 | MATRL-SUPP-MAINT. - MAT'LS | NAPA                       | BATTERY REPLACEMENT        | 71.75     | 317036  |
|              |                            | Total For Check 317036     |                            | 71.75     |         |
| Check 317037 |                            |                            |                            |           |         |
| 02-01-592131 | CONTRACTING-SOFTBALL - ADU | NORTH AND SOUTH SIDE INC.  | SOFTBALL REFUND OVER PAY   | 60.00     | 317037  |
|              |                            | Total For Check 317037     |                            | 60.00     |         |
| Check 317038 |                            |                            |                            |           |         |
| 02-22-570600 | BLDG-LANDSCAPE-POOL - BLDG | PREMISTAR-NORTH            | BOILER POOL HEATER REPAIR  | 746.00    | 317038  |
|              |                            | Total For Check 317038     |                            | 746.00    |         |
| Check 317039 |                            |                            |                            |           |         |
| 01-20-520225 | MATRL-SUPP-R & R - VEHICLE | REINDERS, INC.             | MAINTENANCE VEHICLE SUPPLI | 3,002.82  | 317039  |
|              |                            | Total For Check 317039     |                            | 3,002.82  |         |
| Check 317040 |                            |                            |                            |           |         |
| 01-10-551120 | CONTRACT SVCS-LEGAL - EXTR | ROBBINS SCHWARTZ           | PROFESSIONAL SERVICES REND | 362.00    | 317040  |
|              |                            | Total For Check 317040     |                            | 362.00    |         |
| Check 317041 |                            |                            |                            |           |         |
| 02-01-592170 | CONTRACTING-YOUTH ATHLETIC | SPORTSKIDS, INC            | YOUTH ARCHERY, ADULT PICKL | 1,588.86  | 317041  |
|              |                            | Total For Check 317041     |                            | 1,588.86  |         |
| Check 317042 |                            |                            |                            |           |         |
| 02-21-553100 | CONTRACTUAL SERVICES-POOL  | UNIVAR SOLUTIONS           | CHEMICALS FOR HARRER POOL  | 2,932.90  | 317042  |

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User: lgonzalez  
DB: Morton Grove Pa

INVOICE GL DISTRIBUTION REPORT FOR MORTON GROVE PARK DISTRICT  
INVOICE ENTRY DATES 08/01/2023 - 08/31/2023  
JOURNALIZED  
PAID

| GL Number    | Invoice Line Desc   | Vendor           | Invoice Description    | Amount   | Check # |
|--------------|---|------------------|------------------------|----------|---------|
| Check 317042 |   |                  |                        |          |         |
|              |   |                  | Total For Check 317042 | 2,932.90 |         |
| Check 317043 |   |                  |                        |          |         |
| 01-20-520325 | MATRL-SUPP-MAINT. - MAT'LS V AND J LANDSCAPING AND SE MOWER PARTS |                  |                        | 106.86   | 317043  |
|              |   |                  | Total For Check 317043 | 106.86   |         |
| Check 317044 |   |                  |                        |          |         |
| 01-10-540150 | UTILITIES-TELEPHONE   | VERIZON WIRELESS | PHONE BILL             | 372.46   | 317044  |
| 02-10-540150 | UTILITIES-TELEPHONE   | VERIZON WIRELESS | PHONE BILL             | 372.46   | 317044  |
| 02-33-540150 | UTILITIES-TELEPHONE   | VERIZON WIRELESS | PHONE BILL             | 383.74   | 317044  |
|              |   |                  | Total For Check 317044 | 1,128.66 |         |

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DB: Morton Grove Pa

INVOICE GL DISTRIBUTION REPORT FOR MORTON GROVE PARK DISTRICT  
INVOICE ENTRY DATES 08/01/2023 - 08/31/2023  
JOURNALIZED  
PAID

| GL Number | Invoice Line Desc | Vendor | Invoice Description | Amount | Check # |
|-----------|-------------------|--------|---------------------|--------|---------|
|-----------|-------------------|--------|---------------------|--------|---------|

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Fund Totals:

|                            |            |
|----------------------------|------------|
| Fund 01 CORPORATE          | 34,831.11  |
| Fund 02 RECREATION         | 111,080.74 |
| Fund 15 MUSEUM             | 596.36     |
| Fund 30 LIABILITY INSURANC | 8,737.30   |
| Fund 35 SPECIAL RECREATION | 1,855.68   |
| Fund 70 CAPITAL IMPROVEMEN | 61,807.89  |

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218,909.08



CARD SERVICE REPORT

MONTH: 8/1/2023

| Ref. No. | DATE   | Merchant        | REASON  | AMOUNT      | BUDGET CODE        |
|----------|--------|-----------------|---|-------------|--------------------|
|          |        | 1800            |   |             |                    |
| O'Brien  | 22-Jul | Zoom            | Zoom  | \$ 15.99    | 01-10-581400       |
| O'Brien  | 27-Jul | Frameworks      | Monthly Billing for Computer Monitoring services - 5% discount if paid by Credit Card | \$ 3,299.26 | 01-10-552200       |
| O'Brien  | 29-Jul | Bamboo HR       | New HR system to do Employee Timekeeping and Hiring                                   | \$ 1,484.86 | 01-10-551400       |
| O'Brien  | 31-Jul | Frameworks      | Monthly Billing for Computer Monitoring services - 5% discount if paid by Credit Card | \$ 495.22   | 01-10-552200       |
| O'Brien  | 1-Aug  | Amazon          | New Computers for Board Members   | \$ 1,908.42 | 01-10-560800       |
| O'Brien  | 1-Aug  | Frameworks      | Monthly Billing for Computer Monitoring services - 5% discount if paid by Credit Card | \$ 840.00   | 01-10-520110       |
|          |        |                 |   | \$8,043.75  |                    |
|          |        | 0631            |   |             |                    |
| Braubach | 6-Jul  | Amazon          | Assorted candy for giveaways  | \$36.89     | 221513310          |
| Braubach | 6-Jul  | Amazon          | Refund  | -\$70.16    | 221513310          |
| Braubach | 9-Jul  | Amazon          | fidget toys for Be Kind to Your Mind  | \$51.63     | 0210589105-\$18.99 |
| Braubach | 9-Jul  | Amazon          | Magnetic screen door for concessions  | \$12.74     | 221570600          |
| Braubach | 9-Jul  | Amazon          | Holiday Motion projector for Light up the Park  | \$34.98     | 208593950          |
| Braubach | 9-Jul  | Getsling        | Aquatics Staff Scheduling Software  | \$244.15    | 221584400          |
| Braubach | 11-Jul | Spotify         | Monthly Subscription  | \$9.99      | 210584100          |
| Braubach | 16-Jul | Amazon          | Magnetic screen door for concessions  | \$18.99     | 221570600          |
| Braubach | 19-Jul | Amazon          | Colored powder for camp   | \$48.95     | 203593412          |
| Braubach | 20-Jul | Lifeguard Store | Lifeguard Umbrellas   | \$1,119.62  | 222560700          |
| Braubach | 21-Jul | Amazon          | Office supplies for Pools   | \$38.52     | 222520110          |
| Braubach | 21-Jul | Dairy Queen     | Cakes for Pool Birthday Parties   | \$72.97     | 207593813          |
| Braubach | 21-Jul | GFS Store       | Water and Gatorade for Summer Staff   | \$99.39     | 222584300          |
| Braubach | 23-Jul | Amazon          | Janitorial Supplies for Harrer Pool   | \$70.16     | 221520312          |
| Braubach | 25-Jul | Amazon          | AA batteries for office   | \$23.98     | 221520110          |
| Braubach | 25-Jul | Amazon          | Janitorial Supplies for Harrer Pool   | \$47.82     | 221520312          |
| Braubach | 26-Jul | Amazon          | Assorted candy for giveaways  | \$29.89     | 222513310          |
| Braubach | 26-Jul | Amazon          | Certificates of appreciation for Aquatic Staff  | \$20.00     | 221520110          |
| Braubach | 27-Jul | GFS Store       | Water and Gatorade for Summer Staff   | \$87.93     | 0221584300-\$50    |
| Braubach | 2-Aug  | Amazon          | Pencil giveaway for Back to School Bash   | \$44.98     | 0203593412-\$27.93 |
|          |        |                 |   | \$2,043.42  |                    |
|          |        | 3274            |   |             |                    |
|          |        |                 |   |             |                    |
| Gorzycza | 24-Jul | Home Depot      | Returned Tool   | -\$129.00   | 01-20-520400       |
| Gorzycza | 4-Jul  | Moretti's       | Staff Appreciation  | \$97.47     | 01-20-581200       |
| Gorzycza | 11-Jul | Home Depot      | Materials for Shade Structures  | \$250.97    | 01-20-520323       |
| Gorzycza | 20-Jul | Home Depot      | Milwaukee Hammer Drill  | \$915.27    | 01-20-520400       |
| Gorzycza | 20-Jul | Home Depot      | Purchased Tool and returned   | \$109.00    | 01-20-520400       |
| Gorzycza | 20-Jul | Home Depot      | Milwaukee Impact Driver   | \$92.75     | 01-20-520323       |
| Gorzycza | 31-Jul | Home Depot      | Supplies for Shade Structures   | 114.02      | 01-20-520323       |



|             |             |                             |   |  |            |              |
|-------------|-------------|-----------------------------|---|--|------------|--------------|
|             | Card Number | 9610                        |   |  | \$1,450.48 |              |
| Herrmann    | 12-Jul      | PicMonkey                   | Online Monthly SM Subscription                                    |  | \$12.99    | 02-35-554100 |
| Herrmann    | 12-Jul      | Uline                       | Refund  |  | (\$105.00) | 02-35-554100 |
| Herrmann    | 13-Jul      | Dri Signs                   | Flag for Harrer Pool  |  | \$206.48   | 02-21-560700 |
| Herrmann    | 15-Jul      | Chicago Tribune             | Online Monthly Subscription                                       |  | \$23.96    | 02-35-554100 |
| Herrmann    | 17-Jul      | FACEBOOK                    | Ads > Summer Photo Contest and Car Show and Summer Concert Series |  | \$24.00    | 02-35-554405 |
| Herrmann    | 23-Jul      | Daily Herald                | Online Monthly Subscription                                       |  | \$12.00    | 02-35-554100 |
| Herrmann    | 25-Jul      | Vmags Media Solutions       | Liscense for digital guide for Fall                               |  | \$275.00   | 02-35-554100 |
| Herrmann    | 30-Jul      | FACEBOOK                    | Ads > Summer Photo Contest and Family Campout                     |  | \$24.00    | 02-35-554405 |
| Herrmann    | 31-Jul      | Promo                       | Video Monthly Subscription  |  | \$131.00   | 02-35-554100 |
| Herrmann    | 31-Jul      | Constant Contact            | Yearly Subscription Eblasts                                       |  | \$1,218.00 | 02-35-554100 |
| Herrmann    | 31-Jul      | Trigon                      | Banner Material   |  | \$417.00   | 02-35-554100 |
| Herrmann    | 2-Aug       | WP Engine                   | Monthly Web Hosting Fee   |  | \$96.39    | 02-35-554100 |
|             | Card Number | 5137                        |   |  | \$2,335.82 |              |
| Baumgartner | 11-Jul      | Ball Factory Mount Prospect | Camp Field Trip   |  | \$1,650.00 | 02-03-592412 |
| Baumgartner | 12-Jul      | Amazon                      | Camp supplies   |  | \$8.28     | 02-03-593412 |
| Baumgartner | 11-Jul      | GFS                         | Camp supplies   |  | \$70.42    | 02-03-593412 |
| Baumgartner | 14-Jul      | Iceland Arena               | Camp Field Trip   |  | \$115.00   | 02-03-592412 |
| Baumgartner | 18-Jul      | GFS                         | Camp supplies   |  | \$56.94    | 02-03-593412 |
| Baumgartner | 21-Jul      | Ultimate Ninjas             | Camp Field Trip   |  | \$900.00   | 02-03-592412 |
| Baumgartner | 26-Jul      | GFS                         | Camp supplies   |  | \$72.38    | 02-03-593412 |
| Baumgartner | 28-Jul      | Amazon                      | Camp supplies   |  | \$15.85    | 02-03-593412 |
| Baumgartner | 31-Jul      | GFS                         | Camp supplies   |  | \$131.41   | 02-03-593412 |
| Baumgartner | 31-Jul      | Amazon                      | Camp supplies   |  | \$16.99    | 02-03-593412 |
| Baumgartner | 31-Jul      | Dollar Tree                 | Messy Mondays supplies  |  | \$2.76     | 02-06-593715 |
| Baumgartner | 2-Aug       | Ahmed Meat and Grocery      | Camp supplies   |  | \$7.18     | 02-03-593412 |
| Baumgartner | 14-Jul      | Ball Factory Mount Prospect | Camp Field Trip refund  |  | -\$90.00   | 02-03-592412 |
|             | Card Number | 5072                        |   |  | \$2,957.21 |              |
| Manno       | 3-Jul       | Home Depot                  | Door frame paint for PVCC   |  | \$44.98    | 02-33-520321 |
| Manno       | 5-Jul       | Amazon                      | PVCC Burglar alarm batteries                                      |  | \$44.98    | 30-10-682650 |
| Manno       | 6-Jul       | Amazon                      | Erick Uniform name patches  |  | \$35.94    | 02-33-581500 |
| Manno       | 28-Jul      | Amazon                      | Chair feet for Dance Studio                                       |  | \$15.99    | 02-33-520319 |
| Manno       | 4-Aug       | Amazon                      | White Board for PVCC Registration area                            |  | 90.13      | 02-33-570200 |
|             | Card Number | 1867                        |   |  | \$232.02   |              |
| Bregman     | 24-Jul      | Moretti's                   | Employee Appreciation   |  | \$20.00    | 02-10-589105 |
| Bregman     | 24-Jul      | Moretti's                   | Employee Appreciation   |  | \$200.00   | 02-22-584400 |
| Bregman     |             |                             |   |  | \$220.00   |              |
| Moore       | Card Number | 5972                        |   |  | \$57.79    | 02-32-560600 |
|             | 22-Jul      | Amazon                      | new speedbag for HIIT room  |  | \$57.79    |              |
|             | Card Number | 3727                        |   |  | \$57.79    |              |

|         |             |                       |  |             |              |
|---------|-------------|-----------------------|--|-------------|--------------|
| Wait    | 3-Jul       | Family Pantry         | Ice for MG Days - to be reimbursed                         | 105.10      | 01-10-581600 |
| Wait    | 3-Aug       | American Airlines     | P. Minx travel from Dallas, TX to Chicago                  | 300.90      | 01-10-581120 |
| Wait    | 3-Aug       | American Airlines     | R. Minx travel from Dallas, TX to Chicago to be reimbursed | 300.90      | 01-10-581120 |
| Wait    | 3-Aug       | American Airlines     | Wait travel to NRPA Conference in Dallas, TX               | 601.81      | 01-10-580200 |
|         | Card number |                       |  | \$1,308.71  |              |
|         | 0011        |                       |  |             |              |
| Torres  | 7-Jul       | Amazon                | Chalk for Chalk the deck day                               | \$58.20     | 02-21-584300 |
| Torres  | 11-Jul      | Jimmy Johns           | Lunch for Pool Staff                                       | \$261.22    | 02-21-513310 |
| Torres  | 11-Jul      | Jimmy Johns           | Lunch for Pool Staff                                       | \$261.22    | 02-22-513310 |
| Torres  | 18-Jul      | Amazon                | Tablecloth for B-Day Parties                               | \$44.97     | 02-07-593813 |
| Torres  | 18-Jul      | Amazon                | Tablecloth for B-Day Parties                               | \$29.98     | 02-07-593813 |
| Torres  | 19-Jul      | Amazon                | 3 hole punch for Oriole Pool                               | \$8.79      | 02-22-520110 |
| Torres  | 1-Aug       | Amazon                | Surf's Up DVD Movie  | \$5.99      | 02-22-584300 |
| Torres  | 1-Aug       | Amazon                | Aux Core for pool speakers                                 | \$6.99      | 02-22-520110 |
| Torres  | 2-Aug       | Swank Motion Picture  | Movie License  | \$450.00    | 02-22-584300 |
|         | Card number |                       |  | \$1,127.36  |              |
|         | 1833        |                       |  |             |              |
| Smentek | 10-Jul      | GFS Food Store        | Concerts in the Park supplies                              | 15.98       | 02-08-593926 |
| Smentek | 25-Jul      | Mariano's             | Concerts in the Park supplies                              | 4.29        | 02-08-593926 |
| Smentek | 27-Jul      | Swank Motion Pictures | Movie in the Park 8/4/22                                   | 510.00      | 02-08-593935 |
| Smentek | 3-Aug       | Starbucks             | Dance Staff Appreciation                                   | 25.00       | 02-04-593520 |
|         | Card number |                       |  | \$555.27    |              |
|         | 7973        |                       |  |             |              |
| Khzakia | N/A         |                       |  |             |              |
|         |             |                       |  | \$0.00      |              |
|         |             |                       | Total:   | \$20,331.83 |              |

**September 20, 2023**

To the Finance Officer:

The payment of the above listed accounts has been approved by the Board of Park Commissioners at their regular scheduled board meeting and you are hereby authorized to pay the attached vendors from the appropriate funds.

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(President)

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(Treasurer)



## Motions/New Business

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**MORTON GROVE PARK DISTRICT  
BOARD MOTIONS  
September 20, 2023**

**Administration and Finance Committee – Commissioner Pietron, Chair**

**BINA Hearing:** I move that the Board of Park Commissioners set the date for the BINA hearing for October 18, 2023 at 6:30pm.

**Travel, Meals, and Lodging Approval:** I move that the Board of Park Commissioners approve the travel, meals, and lodging expense for the Executive Director to attend NRPA's annual conference in the amount of \$2,033.89.



**MORTON GROVE  
PARK DISTRICT**

## MEMORANDUM

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**To:** Board of Park Commissioners  
**From:** Michelle Trevino, Human Resources and Risk Manager  
**Date:** September 20, 2023  
**Regarding:** Changes to Crisis Management Manual and Safety Manual

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**Issue:**

The District's Crisis Management and Safety Manual need to be updated.

**Discussion:**

The District has experienced changes in personnel, including staff additions and departures. It is crucial that the Crisis Management and Safety Manual accurately reflects the current roles and responsibilities of all key personnel involved in crisis response. These updates ensure that the right individuals know their responsibilities and can act swiftly during an emergency.

Additionally, Staff has identified opportunities to improve the crisis management and safety policies and procedures. These updates incorporate best practices, lessons learned from past incidents, and feedback from staff members and external experts.

The updated manuals incorporates valuable feedback from staff members, PDRMA, and lessons learned from recent events and emergencies.

The Crisis Management Manual identifies what constitutes a crisis, as well as the specific actions to be taken in response to different types of crises, such as floods, tornadoes, lock downs, and many other potential emergencies.

The Safety Manual outlines policies, procedures, and guidelines for ensuring the safety of employees and others in the workplace. The Safety Manual should clearly define the roles and responsibilities of various individuals within the organization regarding safety.

See the attached drafts with changes. The Board of Park Commissioners will have a month to review the Crisis Management and Safety Manual and then return in October to approve it.

**Recommendation:**

For the Board of Park Commissioners to review the manuals and provide comments or suggestions to staff before approving each at next month's board meeting.





# **MORTON GROVE PARK DISTRICT**

**Safety and Risk Management Procedure Manual**

**September 2023**

## **Mission**

**Morton Grove Park District is committed to complementing our community's quality of life, economic capacity, health, and wellness through recreational opportunities while protecting natural resources.**

## **Core Values**

**Transparency- Excellence - Service  
Respect – Accountability**

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## **1. Purpose and Scope**

- The purpose of the Staff Safety and Risk Management Manual (“Manual”) is to create an awareness of safe work rules and guidelines for risk management as it relates to the work, purpose, and mission of the district. Staff members are expected to become familiar with the information contained in this Manual, and follow all the rules, standards and guidelines outlined herein.
- This Manual applies to all District operations, facilities, and programs; it is intended to be a resource for safety rules and risk management information. Detailed information for any of the topics presented in the Manual can be obtained from the Human Resources & Risk Manager. Additional information for many of the programs and procedures in the manual is posted electronically on the district’s computer system at C:\Risk Management\Safety and Risk Manual.

## **2. Accountability for Safety**

- All staff members are expected to perform work in a safe manner and follow the rules and guidelines contained in the Manual. Furthermore, it is the responsibility of Supervisors to ensure that the standard of safety in this manual is followed.
- Enforcement of safety rules should be carried out as necessary by Supervisors according to the disciplinary action policy found in the Personnel Policy Manual.

### **Elected Officials**

- Provide the Executive Director and the various Department Heads with the resources necessary to create a safe operation and supportive environment for its employees and citizens.

### **Executive Director**

- Designate a Risk Manager and ensure that safety responsibility is accepted, and policies implemented.
- Require Department Head accountability for the safety performance of employees in their respective departments.
- Review all safety committee minutes and safety committee recommendations.
- Review recommendations from the Risk Manager for new safety policies or modifications to existing policies.
- Manage the claims and litigation of same, as well as other risk management functions.

### **Risk Manager**

The Risk Manager is responsible for guiding management in the formulation and implementation of sound safety policies. Overall, the Risk Manager shall have the responsibility to:

- Organize and direct “The Safety Committee” and attend all Safety Committee meetings.
- Review the District’s safety policies annually and recommend to the Executive Director new safety policies or modifications of existing policies as necessary.
- Provide the Executive Director with all safety committee minutes, safety committee recommendations and summaries of significant accidents.
- Develop an attitude of “Safety Mindedness”.
- Provide technical know-how in the establishment of safety procedures, instructions, rules and standards.
- Analyze data on accidents and personal injuries for the purpose of corrective action to determine direct causes and contributing factors in order to better understand the various safety problems.



- Discuss with Department Heads the application of safety procedures and practices within their respective divisions.
- Develop, organize and implement special safety programs and safety communication.
- Periodically evaluate compliance of the District's safety program requirements within each division by inspecting facilities, equipment, and work practices.
- Make follow-up safety inspections when required to ensure that unsafe conditions or practices identified by the Risk Manager, Safety Committee or the Department Heads have been properly corrected.
- Inform the Executive Director and Department Heads about the status of matters affecting the loss prevention program.
- Coordinate compliance with federal, state, and local safety laws.
- Maintain files and records on all accidents including injuries, vehicular accidents, property damage and general liability.
- Maintain the O.S.H.A. 300A Log.

### **Department Head**

Each Department Head is responsible for the safe fulfillment of the District's safety goals and objectives, as well as for the health and welfare of each employee in his division.

While the authority to carry out the safety policy may be delegated to supervisors within the District, overall responsibility for the safety record of the District cannot be transferred from the Department Head. Specifically, each Department Head will:

- Provide the leadership and positive direction necessary to maintain continuous emphasis on loss prevention in all operations.
- Interpret the District's safety policies and apply them to the internal operations of the division.
- Develop safety procedures for division operations.
- Ensure that the safety policies and procedures set forth herein are in compliance by all personnel under his/her direction.
- All reports and required forms received from supervisors must be turned into the Risk Manager within 24 hours of receipt.
- Ensure all accidents are reported and thoroughly investigated as required and, where appropriate, prompt corrective action is taken whenever hazards are recognized or unsafe acts are observed.
- Review all accidents occurring in their respective division and discuss plans to bring about a more positive loss reduction.
- Document all training.
- Correct all unsafe acts and conditions observed or reported.
- Provide the personal protection equipment as required by certain operations, provide training as necessary in the use of the personal protection equipment and ensure it is used, and used properly.
- Encourage safety suggestions from employees.
- Ensure all employees are trained and, when necessary, retrained in safe procedures for hazardous jobs and the proper use of safety equipment.
- Actively participate on the District's Safety Committee.
- Ensure safety is part of each employee's Performance Evaluation.



## **Supervisor**

The success of the loss control program depends on the sincere, constant and cooperative effort of all supervisors and on their active participation and support. Supervisors shall strive to:

- Ensure that the safety policies and procedures set forth herein are in compliance by all personnel under his/her direction.
- Provide complete safety instructions to new employees prior to assignment of duties and to existing employees prior to reassignment of duties.
- Document all training.
- Enforce all safety regulations and rules and ensure that employees understand that violations will not be tolerated. Inspect operations for unsafe practices and conditions and, where appropriate, implement prompt corrective action to eliminate causes of accidents.
- Investigate and report, in writing, all accident/injuries in a prompt and thorough manner. This includes completing all required forms. All reports and required forms shall be submitted to the respective Department Head within 24 hours of the accident.
- Incorporate safety objectives in employee training sessions. To pass on safety information/training, receive information on safety related problems and to stimulate interest in safety.
- Ensure employees practice good housekeeping and general maintenance.
- Ensure proper maintenance of equipment for the reduction and elimination of hazards.
- Provide the personal protection equipment as required by certain operations, provide training as necessary in the use of the personal protection equipment and ensure it is used, and used properly.
- Take the initiative in recommending correction of deficiencies noted in facilities, work procedures, employee job knowledge, or attitudes that adversely may affect Park District loss control efforts.
- Ensure safety is part of each employee's Performance Evaluation.

## **Employees**

The employee has a responsibility for his/her own safety and likewise has a responsibility to his/her coworkers, the community and employer. As such, the employee must:

- Comply with established safe work rules and the special instructions of the supervisor.
- Report all accidents and injuries immediately and cooperate in all accident and injury investigations, supplying supervisors with full and complete information.
- Report all unsafe conditions or defective equipment immediately to his/her supervisor.
- Submit recommendations for safety and efficiency, as needed, to his/her supervisor.
- Only operate equipment that he/she has been trained and authorized to operate.
- Use personal protective equipment as required and/or needed in performing daily work assignments.
- Never abuse tools and equipment through improper use.
- If any doubt exists about the safety of doing a job, he/she shall STOP and get instructions from his/her supervisor before continuing work.

### 3. Safety Committee

#### **Purpose of the Safety Committee**

The mission of the Safety Committee is to support the Safety and Risk Management functions of the Park District and facilitate implementation of objectives stated in the Morton Grove Park District safety policy by communicating clear roles in safety and risk management to all staff; assisting in the creation and evaluation of safety and risk management initiatives; recognizing and investigating opportunities for improving safety and risk management performance and to exhibit a high level of performance as a staff advocate and leader in safety and risk management practices.

#### **Safety Committee Goals**

The goal of the Safety Committee is to embed safety and risk management into the district's culture and operations. To achieve this goal, the Committee must successfully perform five roles:

- Educator: Provide information to departments through training, verbal, and written communication
- Advisor: Shape training, safety and risk management plans and initiatives through active feedback in departmental and team meetings.
- Investigate incidents and accidents as well as current and potential safety and risk management problems to come to a recommended solution.
- Advocate: Discuss departmental or division safety and risk management concerns during Committee meetings.
- Leader: Learn, teach, exhibit and influence safety and risk management best practices within the Committee, departments, and divisions.

The Safety Committee has six strategies to meet its purpose and goals.

- Perform in-depth reviews of all significant accidents, incidents, and facility inspections at every Committee meeting.
- Review viability, function and performance of safety and risk management programs and plans on a schedule set by the Human Resources & Risk Manager.
- Communicate safety issues and activities to staff through meetings with full-time and key part-time staff as requested by the Human Resources & Risk Manager.
- Discuss department/division concerns as an agenda item at each Team meeting with follow up or resolution action on all items.
- Consciously observe work behaviors and coach or correct staff exhibiting unsafe or risky behaviors and follow up with supervisors.
- Discuss the outcomes of quarterly facility safety inspections.

#### **Committee Selection and Structure**

Each of the following areas will have a full-time staff representative.

- Parks and Facility Maintenance
- Recreation
- Administration



### **Committee Meetings**

Committee meetings are held monthly on an annual schedule determined by the Human Resources & Risk Manager. In the event of scheduling conflicts, meeting times will be rescheduled to a time agreed upon by most Committee members.

- A review of the minutes from the previous meeting
- Continuing, open or unresolved agenda items from the previous meeting
- Mini-training session
- New Agenda Items
- Review of significant accidents/incidents/injuries
- Discussion of significant facility safety/risk management issues from facility inspections
- Representative reports

### **4. General Safety/ Risk Management Procedures**

General Safety and Risk Management Responsibilities

#### **Director and Superintendents**

- Work with Human Resources & Risk Manager to implement safety and risk management measures affecting his/her department.
- Enforce safety and risk management standards through coaching staff and correcting unsafe or incorrect behavior and conditions. Implements disciplinary action if appropriate.
- Communicate the need for safety equipment to the Human Resources & Risk Manager.
- Reinforce department standards for safety and risk management to supervisors.

#### **Supervisors**

- Inspect work areas for compliance with safe work practices and rules.
- Enforce safety and risk management standards through coaching staff and correcting unsafe or incorrect behavior and conditions. Recommends disciplinary action if appropriate.
- Completes accident reports and provides medical authorization for initial medical care of injured staff.
- Communicates need for safety supplies to the Human Resources Department.
- Ensures that safety equipment and supplies provided are available to staff, are used and properly maintained.

#### **All Staff**

- Maintain familiarity with Safety and Risk Manual contents.
- Maintain a working knowledge of all general and departmental safety and risk management rules and procedures.
- **Report all accidents and unsafe conditions to a supervisor immediately.**
- Promptly forward all medical information pertaining to a work-related injury to the Human Resources & Risk Manager.
- Cooperate and assist in the investigation of accidents.
- Submit suggestions related to safety methods, conditions, or activities.
- Attend all required safety trainings and actively participate when necessary.
- Comply with all safety rules and follow safe work practices. If any doubts arise, get instruction from the appropriate staff before continuing work.



- Use all equipment in a safe manner and for its intended purpose.
- Wear the required personal protective equipment for all jobs or assigned tasks. Dress appropriately for the job or tasks assigned.

## Legal Considerations for Serious Incidents

After any serious incidents involving patrons or employees, your agency needs to address a variety of issues, including investigations by the police and other governmental agencies, questions and demands from the public, your staff, the media and gathering of information. **One of the most important actions your agency must take is to call PDRMA immediately at 630-769-0332 regardless of the time of day.** Often, time is of the essence, and it is critical to consult with PDRMA Claims and Legal Services quickly after the incident. Calls to PDRMA during nonwork hours go to an emergency service that will immediately contact the appropriate PDRMA staff.

During a crisis, PDRMA's Claims and Legal Services departments can:

- Assist with police and other governmental agency investigations.
- Provide instructions regarding Illinois Department of Labor and/or the Illinois Department of Public Health reporting.
- Coordinate the investigation.
- Protect the confidentiality of the investigation.
- Aid with media statements.
- Assist with communications with the victim's family, members of the public and other parties seeking information.
- Provide customized legal services including hiring outside defense counsel, if necessary.
- Provide risk management services based on the scope and nature of the incident.

### Protect the Investigation – Attorney Client Privilege

"Attorney-client privilege" is a legal concept that protects certain communications between a client (i.e., a PDRMA agency/employee) and attorney and keeps those communications privileged and confidential from third-parties, including (for example) potential claimants, media outlets, etc. By assuring confidentiality, it encourages clients to make full and frank disclosures to their attorney, who can better provide tailored advice and effective representation. Communications that do not fall within the scope of attorney/client privilege are often subject to public disclosure via the Freedom of Information Act (FOIA), subpoena and discovery in litigation, or through third parties such as law enforcement and other official investigative agencies. Those unprotected communications can contain inaccurate, incomplete and misleading information and/or admissions against the interest of the PDRMA agency/employee that others can then use against the member in a court of law and/or the court of public opinion. You can only give a statement with absolute confidentiality to PDRMA's legal counsel or your corporate counsel. This includes written statements prepared by staff witnesses, third-party accounts documented by member staff and draft media statements created by staff or outside consultants. Members should speak with PDRMA's legal counsel before requesting or preparing written statements, preparing media statements and before taking any disciplinary action against staff.

### Follow these steps immediately after a crisis

1. Contact PDRMA at 630-769-0332.
2. Consult with PDRMA's legal counsel before giving, requesting or preparing any written statements or reports. It is acceptable to compile a list of witnesses that includes names and personal and professional contact information.

**Serious Incident: Legal Considerations for PDRMA Members**  
**Page | 2**

3. When possible, consult with PDRMA's legal counsel before cooperating with the investigating law enforcement or other governmental agencies. Investigative reports and statements taken by investigating police or other official investigators are often subject to public disclosure under FOIA. PDRMA recommends informing the investigator that the agency wants to provide its full cooperation but also wants to protect its legal rights.
4. Consult with PDRMA's legal counsel before drafting or releasing any media statements regarding the incident.
5. Avoid internal emails, instant messaging, text messages, tweets, blog entries, Facebook postings and any other social media comments about the incident. These communications are not protected by attorney-client privilege and likely must be disclosed if requested by FOIA or in discovery.
6. Prepare an Accident/Incident Report using PDRMA's **Incident/Accident Report Form 01** and submit it to PDRMA by emailing it to [newclaims@pdrma.org](mailto:newclaims@pdrma.org). Do not create a separate internal loss report. It is important to submit Form 01 to PDRMA for review by PDRMA Claims and Legal Services to maintain the attorney/client privilege. PDRMA's standard claims reporting forms contain specific language to establish and protect the confidentiality of the report through attorney/client privilege. Any written account or description of the incident or supplemental written (including electronic) communication or report pertaining to the incident should have the following language at the top of the document:

THIS DOCUMENT IS AN ATTORNEY-CLIENT PRIVILEGED COMMUNICATION  
PREPARED FOR AND AT THE REQUEST OF PDRMA'S LEGAL COUNSEL.

When directed by PDRMA legal counsel or PDRMA-assigned outside legal counsel, communications (email, fax, other) should also contain the above phrase in the subject heading of the communication and should be directed to PDRMA's Legal Services department – Sara Yager, General Counsel, and/or Dustin Fisher, Deputy General Counsel. Do not send the documents to any other recipients (e.g., facility managers, superintendents, etc.), since that could negate the attorney-client privilege.

Never release the Form 01 report to any third party (including investigating police or via FOIA) without first consulting with PDRMA's legal counsel.

7. It is critical you do not accept liability and/or offer to pay medical bills or repair costs. PDRMA's Claims and/or Legal Services will respond to the claim on your behalf.

By working together, PDRMA and its members can handle serious incidents in a manner that maximizes safe response and minimizes legal risks.



## General Safety Rules

The safety rules listed below are basic and general in nature. These rules are the minimum standard of safety expected of all staff members. All staff are responsible for abiding by the rules contained in this Manual.

- Horseplay and fighting will not be tolerated.
- Possession of unauthorized firearms such as knives, airsoft pistols, etc., as well as alcoholic beverages, or drugs in the workplace is against policy.
- Inform a supervisor if required to take medication during work hours that will affect the ability to operate vehicles, equipment or perform job duties in a safe manner.
- The Supervisor must be notified of any permanent or temporary impairment that may reduce the ability to safely perform a job.
- Personal Protective Equipment must be used as required by the Personal Protective Equipment program and according to the specific job or task hazard assessment.
- District vehicles, mobile or powered equipment may only be operated by trained and authorized personnel.
- Any potentially unsafe conditions or actions must be reported immediately to a supervisor. This includes “near miss” accidents — those accidents that almost happened.
- If there is any doubt about the safety of a work condition, assignment, or procedure, consult the appropriate Supervisor before beginning work. Hazards must be eliminated or adequately protected against by protective equipment before beginning work.
- All incidents, injuries, and property damage must be reported to a supervisor, regardless of the severity.
- All hazards and unsafe conditions must be reported to Supervisory staff or the Human Resources & Risk Manager immediately.
- Staff is responsible for maintaining proper housekeeping standards for their work areas. All tools and equipment must be stored in a designated place. Scrap and waste material are to be discarded in designated refuse containers.
- Smoke, fire, or unusual odors must be reported to a supervisor immediately.
- Tasks requiring lifting and/or carrying of tools, equipment or material must be done using proper lifting and carrying techniques. A two-person lifting technique or machine aided lift is needed for objects weighing over 50 lbs.
- Staff must never attempt to catch a falling object.
- If a work task creates a potential hazard, correct the hazard immediately or mark the area clearly before leaving it unattended.
- Seat belts must be fastened and worn by all drivers and passengers when operating a vehicle or mobile equipment.
- Staff that operates vehicles must comply with all aspects of the Vehicle Operator Safety Program.
- Staff authorized to drive District vehicles are responsible for having a valid driver’s license for the class of vehicle operated. Staff must report revocation of driver’s license and must notify their supervisor of any driving citations received.
- Staff must be familiar with facility emergency procedures and be prepared to perform required actions in emergency situations. More information can be found on the incident accident form.

- Staff must cooperate with all safety investigations and inspections and assist in implementing requested safety procedures.

### **Accident/Incident Reporting**

The District's Accident/Incident form must be completed and signed by the appropriate chain of command for accidents/incidents. The form must be filled out completely; not applicable (N/A) shall be placed in areas that do not apply. Only facts that can be verified should be included on the form. Additional information such as witness statements, opinions and unverified facts should be documented on a separate piece of paper and attached to the form.

### **Statement of Admissions Agreement**

When an accident occurs, no matter how insignificant it may seem to be, it is of the utmost importance never to admit guilt or negligence of any kind until there is a formal investigation of the matter by your supervisors and the causes of the incident have been determined. You are required to contact your immediate supervisor and not to render speculation on the causes of the incident. All questions relating to an accident involving District property and/or personnel must be directed to a department head or designated manager.

- Do not promise payment of medical bills to any injured person.
- Do not indicate that the Park District is responsible for the accident, injury or incident.

### **Accident/Incident Reporting**

- Any injury sustained at work should be immediately reported, no matter how minor or insignificant it may seem. It is the staff member's responsibility to report all injuries as soon as they are discovered.
- Injuries should be reported to the immediate Supervisor if available, or to the level above immediate Supervisor. Should these individuals not be available, injuries may be reported to any Supervisor, Manager, Superintendent or Director.
- Supervisors must complete the accident/incident form. All Accident/Incident reports must be submitted to the Superintendent of Human Resources & Risk Management within 24 hours after the incident occurs. If medical treatment beyond basic first aid is required contact the Human Resources & Risk Manager immediately.
- After the injury is reported, seek treatment. First aid used in treating a work-related injury must be reported in detail on the Accident/Incident form, including the name of the person providing first aid.
- If medical attention is needed because of an accident, to either a guest, or coworker; or if there is any damage to District property or third-party property, the staff member sustaining the injury and/or otherwise causing the accident will be transported to either Concentra Medical Center or Lutheran General hospital for treatment and post-accident drug/alcohol testing.
- If a work-related accident requires paramedic transport of the injured staff member, drug and alcohol testing will take place at the facility where the individual was transported for treatment.

### **Work-Related Vehicle Accidents**

- Any accident involving District vehicles or personal vehicles on District business must be reported to police immediately.
- The driver will use 911 to report an accident and request emergency medical assistance if necessary. The driver will call the immediate Supervisor and the Human Resources & Risk



Manager or the Director to report the vehicle accident. The driver will follow any instructions given.

- The driver and passengers may not leave the scene of the accident until police have arrived and a report has been completed.
- The driver and passengers must not make any statements that may indicate fault. Use a digital camera or tablet to photograph the accident scene and damage. Complete both sides of the Illinois Vehicle Accident Report. Complete the entire Accident/Incident form.
- If there are injuries, the accident results in property damage, or the driver is ticketed because of the vehicle accident, the staff member who was driving must submit to a drug and alcohol test at Concentra Medical Center. If the accident requires paramedic transport of an injured staff member, drug and alcohol testing will also take place at the facility the staff member was transported to.
- The Illinois Accident Worksheet and the Accident/Incident report form along with any photos must be submitted to Human Resources & Risk Management the next business day.

#### **Guest Accident/Injury**

- Complete the District's Accident/Incident form as described at the start of Accident/Incident Reporting. If medical treatment beyond basic first aid is required, call 911 then contact Human Resources & Risk Management immediately.
- Provide first aid if necessary. First aid used in treating a guest injury must be reported in detail on the Accident/Incident form, including the name of the person providing first aid.
- If the injured guest is under the age of 18, contact the guest's parents or guardian and inform them of the injury sustained by the guest. Complete the appropriate portion of the Accident/Incident form verifying that a parent or guardian was contacted.
- In the case of a guest accident that requires medical treatment beyond first aid, take pictures of the area where the accident occurred. Pictures should include any equipment involved with or causing the accident. Use a digital camera if available. Label and attach all pictures to the Accident/Incident form. Digital photos can be emailed to the Human Resources & Risk Manager.
- All Accident/Incident reports must be submitted to the Human Resources & Risk Manager the next business day.

#### **Vandalism/Theft and Other incidents**

- Staff will complete the Accident/Incident form as described at the start of Accident/Incident Reporting. Staff will specify the type of incident by completing the front of the form. A police report number, if one has been provided, must be printed legibly in the appropriate space at the top of the form. If medical treatment beyond basic first aid is required, call 911 then contact the Human Resources & Risk Manager immediately.
- Take pictures of the area where any vandalism, damage, or theft occurred. Label and attach all pictures to the Accident/Incident form. Digital photos can be emailed to the Superintendent of Human Resources & Risk Management
- Call the police to handle extreme behavior incidents such as fights, violent threatening or disruptive behavior. Call police for all reported incidents of vandalism and theft. Staff will wait at the site of the incident (if safe to do so) for police to arrive and will obtain a police report number, if appropriate, from the responding officer.
- All Accident/Incident/Injury reports must be submitted to the Superintendent of Human Resources & Risk Management the next business day.



### **Modified Duty Policy**

The district is committed to providing employees with every reasonable opportunity to maintain career and employment status and benefits. The district has developed a Modified Duty Program for employees who have sustained work-related injuries or illness.

The purpose of the Modified Duty Program is to provide a temporary modified work assignment, where feasible, available, and applicable. The feasibility of Modified Duty shall be determined on a case-by-case basis, taking several factors into consideration including but not limited to the specific physical or mental impairment, the essential functions of the job, the work environment and ability of the district to provide modified duty.

An employee who declines a Modified Duty position, which is within the limitations set by the treating physician, may be subject to disciplinary action, up to and including termination of employment. The employee may also lose eligibility for workers' compensation benefits when applicable.

### **5. Crisis Management**

A Crisis is a situation or event that causes, or has the potential to cause, keen public or media concern. It could be, among other things, accidental drowning, allegations of abuse, a severe vehicle accident, or a criminal act that occurred on Agency property. The potential crisis list is endless. If staff knows of a situation or event that could be of concern to the public or media, please contact your Supervisor and the Executive Director immediately. The district has appointed the Executive Director as the head of its Crisis Team. The Executive Director will decide whether the crisis plan needs to be implemented. If the Executive Director is not available, a potential or immediate crisis should be reported to the Superintendent of Finance.

#### **General Staff duties:**

- **Protect life** – Staff on the scene of an emergency that requires police, paramedic or fire department assistance will call 911. Trained staff on the scene will provide first aid, CPR and/or AED care as necessary within established District protocols.
- **Communicate** – Staff on the scene will contact a Supervisor and Executive Director via the phone or radio. Priority is to contact a supervisor who is on duty and close to the scene.
- **Don't talk to the media, don't gossip, and don't speculate** – The Crisis Team will appoint an Official Agency Spokesperson to keep staff, residents and the media updated. Always refer questions to the "Official Agency Spokesperson." The best response to questions will be, "I'm not the best person to answer questions – you'll need to speak to the Official Agency Spokesperson."
- **Wait for direction and be prepared to help** – Staff may assist in administering first aid (if trained), assist in clean-up efforts, or be part of the Crisis Clerical Team.
- **Be familiar** – with the "Bomb Threat" form and procedure, Inquiry Log and Post Incident Evaluation form.
- **Never leave** the scene of a crisis without contacting a supervisor.
- **Complete a Post Crisis Evaluation form** if involved at all in the crisis or the crisis management.

### **6. Alcohol/Drug-Free Workplace**

There is overwhelming evidence that alcohol and drug abuse have a detrimental impact on employees' health, safety, and efficiency. Since District employees operate, supervise, and maintain parks, facilities,

programs, and equipment for use by members of the public and fellow employees, the district wishes to assure the health and safety of its patrons and employees. Therefore, in accordance with federal and state Drug-Free Workplace Acts (41 U.S.C. \_701 et seq. and 30 ILCS 580/1 et seq.); it is the policy of the district to provide a safe, productive, and drug-free work environment.

All personnel are expected to report to work and remain in a condition suitable to perform their duties at the highest level of efficiency. The impairing influence of drugs and alcohol during working hours is inconsistent with this objective.

### **Definitions**

- a) "Work time" includes all time during which an individual is performing work for the benefit of the Agency.
- b) "Legal drug" means any controlled substance the possession or sale of which is **not** prohibited by law.
- c) "Illegal drug" means any controlled substance the possession or sale of which is prohibited by law.
- d) "Traceable in the individual's system" means that the results of the laboratory's analysis of the employee's urine, blood or other specimen are positive for the tested substance.

### **Drugs**

Engaging in any of the following conduct will cause disciplinary action, up to and including termination.

1. Reporting to work or working under the influence of illegal drugs.
2. The use, sale, possession, manufacture, or distribution of illegal drugs while on Park District premises or on Park District time.

Individuals undergoing prescribed medical treatment with a controlled substance that may affect the individual's job performance must report this treatment to Human Resources. The use of controlled substances as part of a prescribed medical treatment program is not grounds for disciplinary action; it is important however, for the district to know such use is occurring as it may affect job performance.

### **Alcohol**

Engaging in any of the following conduct will be cause for disciplinary action, up to and including termination.

1. The use of alcohol while in working areas during working hours or reporting for work or working under the influence of alcohol while on District business, where such use or influence affects the individual's work performance, safety or the performance of fellow District employees or volunteers.
2. Volunteering to participate in treatment programs to help with alcohol or drug dependencies is strongly encouraged but will not of itself prevent disciplinary action for any violations of this policy. Such matters will be handled with complete confidentiality.

## **PROCEDURES**

### **Testing**

The district will require any employee to provide urine, blood and/or other specimen for laboratory testing or to take a Breathalyzer test at a medical clinic of the district's choice if:



1. The district has reasonable suspicion to believe that the individual is under the influence of alcohol, or a legal or illegal drug. For the purposes of this policy, "reasonable suspicion" shall mean suspicion based on specific personal observations that the Park District Supervisor can describe concerning the individual's appearance, behavior, speech, breath and/or body odor.
2. The individual is involved in any work-related accident. For purpose of this policy, an individual shall be deemed to have been involved in a work-related accident if he or she is ticketed or causes the injury of another person or self on the district's premises or during working time or causes damage to any of the District's leased or owned property or any third party property.

### **Consent**

If requested, an individual must sign a consent form authorizing the clinic to draw urine, blood and/or other specimen, or to conduct a Breathalyzer test, and release the results of the laboratory testing to the district or employment shall be terminated.

### **Refusal to Provide Specimen or Consent**

An employee who refuses to provide urine, blood, or other specimen, or to take a Breathalyzer test under this policy, or who refuses to sign a consent form employment shall be terminated.

### **Chain of Possession**

At the time specimens are taken, the individual being tested shall be given a copy of the specimen collection procedures; the specimens must be immediately sealed and labeled. The individual shall initial the specimens to ensure that the specimens tested by the laboratory are those of the employee. The required procedure is as follows:

1. The blood specimen, if to be drawn, shall be drawn with as little delay as reasonably possible. Immediately after the specimens are drawn, the individual test tubes shall be labeled and then initialed by the individual. The individual has an obligation to identify each specimen and initial same. The specimens shall be placed in the transportation container after being drawn.
2. The urine specimen, if to be taken, should be collected, and tested for Ph and temperature. If the initial test raises some doubt regarding the specimen, the individual being tested may be required to retake the test in the presence of an observer. The specimen shall then be sealed in the individual's presence and then be initialed by the employee. The individual being tested has an obligation to identify each specimen and initial same. The specimens will be placed in the transportation container. The container will be sealed in the individual's presence and he or she shall be given an opportunity to initial or sign the container. If the samples are to be sent to an outside designated testing laboratory, the containers shall be sent on that day or the soonest business day.
3. The clinic shall conduct all Breathalyzer tests, if any, in accordance with generally accepted procedures for the administration of such tests.

### **Confidentiality**

The results of any blood or urine analysis or Breathalyzer test shall be kept strictly confidential among the tested individual, the clinic, any outside laboratory used by the clinic for analysis and the district. However, the District may use the results to decide upon an action to be taken toward the tested individual or to the extent necessary, to defend its action in any subsequent legal or other proceeding.



**Treatment**

The district, in its sole discretion, may require any employee or volunteer who violates this policy, as a condition to remaining in the employ of the district, to submit to and pass periodic urinalysis or blood tests. In addition, the district may require the employee or volunteer to undergo, at the employee or volunteer's expense, alcohol, or drug rehabilitative treatment at the facility of the district's choice. The district may terminate any employee who fails or refuses to submit to urinalysis or a blood test, or who cannot pass the urinalysis or blood test within six weeks following such treatment.

- Any individual convicted of violating any federal, state, or local criminal drug law must notify the Supervisor of such conviction no later than five (5) days after the conviction.
- An individual convicted of violating any such criminal drug law may receive discipline up to and including termination from work or may have continued employment conditioned on satisfactory participation in a drug abuse assistance or rehabilitation program.

## **OSHA/Illinois Department of Labor Recordkeeping and Reporting Requirements**

The Illinois Department of Labor (IDOL) enforces the Illinois Occupational Safety and Health Act (ILOSHA) under the Safety Inspection and Education Act. ILOSHA protects the health and safety of public employees by inspecting, investigating and evaluating public facilities and working conditions to ensure compliance with OSHA standards and offers training and consulting to assure safe and healthy working conditions.

### **Recordkeeping Requirements**

Each employer must maintain in each workplace an OSHA 300 log of all recordable occupational injuries and illnesses for that workplace. In addition, employers must complete and maintain OSHA 301 forms, or equivalent, in each workplace as a supplementary record of each recordable occupational injury and illness for that workplace.

Employers also must post an annual injury summary using Form 300A or an equivalent form that shows total injuries for the year. At year end, employers must post the summary in a conspicuous/visible place where they usually post notices to employees, so employees are aware of the injuries and illnesses occurring in their workplace. You must post the summary no later than Feb. 1 of the year following the year covered by the records and keep it in place until April 30.

You can find all reporting requirements in **Section 350** of the [OSHA Administrative Code](#) and obtain forms 300, 301 and 300A at <https://www.osha.gov/recordkeeping/RKforms.html>.

**Illinois OSHA annually requires certain state and local government employers to report data from their OSHA Form 300A Annual Summary of Work-related Injuries and Illness.** Affected employers must report that data from the prior calendar year via the federal online OSHA Injury Tracking Application (ITA) portal no later than March 2 of the following year. The portal, with step-by-step instructions, is <https://www.osha.gov/injuryreporting/ita/>. For additional information regarding annual reporting, visit <https://www2.illinois.gov/idol/Public-Safety/Documents/OSHA-ITA.pdf>.

### **Reporting Requirements**

All employers also must report 24/7 directly to IDOL at 800-782-7860 or 217-782-7860 the following occurrences: (Section 350.410)

- All work-related fatalities within eight hours.
- All work-related inpatient hospitalizations of one or more workers, all amputations and all losses of an eye within 24 hours.

**Note: You can type input into this form and save it.**  
 Because the forms in this recordkeeping package are "fillable/writable" PDF documents, you can type into the input form fields and then save your inputs using the free Adobe PDF Reader.

**Summary of Work-Related Injuries and Illnesses**

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

| Number of Cases        |  |  |  |
|------------------------|--|--|--|
| Total number of deaths | Total number of cases with days away from work | Total number of cases with job transfer or restriction | Total number of other recordable cases |
| (G)                    | (H)  | (I)  | (J)                                    |

| Number of Days                      |   |
|-------------------------------------|---|
| Total number of days away from work | Total number of days of job transfer or restriction |
| (K)                                 | (L)   |

| Injury and Illness Types   |       |                         |       |
|----------------------------|-------|-------------------------|-------|
| Total number of ... (M)    |       |                         |       |
| (1) Injuries               | _____ | (4) Poisonings          | _____ |
| (2) Skin disorders         | _____ | (5) Hearing loss        | _____ |
| (3) Respiratory conditions | _____ | (6) All other illnesses | _____ |

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.  
 Public reporting burden for this collection of information is estimated to average 18 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact U.S. Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

**Establishment information**

Your establishment name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Industry description (e.g., *Manufacture of motor truck trailers*) \_\_\_\_\_

North American Industrial Classification (NAICS), if known (e.g., 336212)

**Employment information** (If you don't have these figures, see the Worksheet on the next page to estimate.)

Annual average number of employees \_\_\_\_\_

Total hours worked by all employees last year \_\_\_\_\_

**Sign here**

**Knowingly falsifying this document may result in a fine.**

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Company executive \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Date \_\_\_\_\_





## ILLINOIS DEPARTMENT OF LABOR

**JB PRITZKER**  
GOVERNOR

**MICHAEL D. KLEINIK**  
DIRECTOR

January 20, 2022

To: All State and Local Government Employers

Illinois OSHA requires certain state and local government employers, who meet the criteria in Step 3 of this notice, to **annually electronically report** data from their OSHA Form 300A *Annual Summary of Work-Related Injuries and Illnesses*. Use the steps outlined below to determine if this reporting requirement applies to your entity.

**Step 1: Maintain injury and illness recordkeeping at the “establishment” level.**

All state and local government employers must maintain OSHA injury and illness records at the “establishment” level. For public entities, departments within an entity can usually function as establishments. For example, a city would not maintain a single set of injury and illness records. Instead, they would maintain separate records for the fire department, the police department, the street department, etc. Recordkeeping forms can be found [here](#).

**Step 2: Determine the number of employees per establishment.**

For example, a city may have 25 employees in the fire department, 30 employees in the police department, etc. Part-time, temporary, and seasonal employees must also be included.

**Step 3: Determine if any establishments are required to electronically report Form 300A data.**

- State and local government employers operating establishments with **250 or more employees must electronically report**. For example, if a city has a department with 275 employees, the city must electronically report Form 300A data for that department regardless of the type of department.
- State and local government employers operating establishments involved in designated high-hazard activities (identified below) with **20 or more employees must electronically report**.
  - 237310 – Road Maintenance/Construction (e.g. street or highway depts., road and bridge districts)
  - 922160 – Local Fire Protection (e.g. fire depts., fire districts)
  - 221310 – Water Supply/Distribution (e.g. water depts., water districts)
  - 221320 – Sewage Treatment (e.g. sewer depts., wastewater treatment plants, sanitary districts)

**Step 4: Electronically report.**

State and local government employers meeting the criteria in Step 3 must annually electronically report Form 300A data through federal OSHA’s [Injury Tracking Application \(ITA\) online portal](#) **no later than March 2nd for the prior calendar year**.

**Resources**

Federal OSHA has provided a specific [resource page](#) and [FAQ](#) regarding this reporting requirement. For technical issues related to the online portal, please complete a [Help Request Form](#).

Please do not hesitate to contact Illinois OSHA at [DOL.safety@illinois.gov](mailto:DOL.safety@illinois.gov) or at (217) 782-9386 for questions or clarification on recordkeeping and reporting. Thank you for your cooperation and compliance with this reporting requirement.

Lincoln Tower Plaza  
524 South 2nd Street, Suite 400  
Springfield, Illinois 62701  
(217) 782-6206  
Fax: (217) 782-0596

Michael A Bilandic Building  
160 North LaSalle, Suite C-1300  
Chicago, Illinois 60601-3150  
(312) 793-2800  
Fax: (312) 793-5257

Regional Office Building  
2309 West Main Street, Suite 115  
Marion, Illinois 62959  
(618) 993-7090  
Fax: (618) 993-7258

## Occupational Safety and Health Administration (OSHA) Inspections

OSHA is committed to strong, fair, and effective enforcement of safety and health requirements in the workplace. OSHA inspectors, called compliance safety and health officers, are experienced, well-trained industrial hygienists and safety professionals whose goal is to assure compliance with OSHA requirements and help employers and workers reduce on-the-job hazards and prevent injuries, illnesses, and deaths in the workplace. Normally, OSHA conducts inspections without advance notice. Employers have the right to require compliance officers to obtain an inspection warrant before entering the worksite.

### Inspection Priorities

OSHA has jurisdiction over approximately 7 million worksites. The agency seeks to focus its inspection resources on the most hazardous workplaces in the following order of priority:

- 1. Imminent danger situations**—hazards that could cause death or serious physical harm receive top priority. Compliance officers will ask employers to correct these hazards immediately or remove endangered employees.
- 2. Severe injuries and illnesses**—employers must report:
  - All work-related fatalities within 8 hours.
  - All work-related inpatient hospitalizations, amputations, or losses of an eye within 24 hours.
- 3. Worker Complaints**—allegations of hazards or violations also receive a high priority. Employees may request anonymity when they file complaints.
- 4. Referrals** of hazards from other federal, state or local agencies, individuals, organizations or the media receive consideration for inspection.
- 5. Targeted inspections**—inspections aimed at specific high-hazard industries or individual workplaces that have experienced high rates of injuries and illnesses also receive priority.
- 6. Follow-up inspections**—checks for abatement of violations cited during previous inspections are also conducted by the agency in certain circumstances.

### Phone/Fax Investigations

OSHA carefully prioritizes all complaints it receives based on their severity. For lower-priority hazards, with permission of a complainant, OSHA may telephone the employer to describe safety and health concerns, following up with a fax providing

details on alleged safety and health hazards. The employer must respond in writing within five working days, identifying any problems found and noting corrective actions taken or planned. If the response is adequate and the complainant is satisfied with the response, OSHA generally will not conduct an on-site inspection.

### On-Site Inspections

**Preparation**—Before conducting an inspection, OSHA compliance officers research the inspection history of a worksite using various data sources, review the operations and processes in use and the standards most likely to apply. They gather appropriate personal protective equipment and testing instruments to measure potential hazards.

**Presentation of credentials**—The on-site inspection begins with the presentation of the compliance officer's credentials, which include both a photograph and a serial number.

**Opening Conference**—The compliance officer will explain why OSHA selected the workplace for inspection and describe the scope of the inspection, walkaround procedures, employee representation and employee interviews. The employer then selects a representative to accompany the compliance officer during the inspection. An authorized representative of the employees, if any, also has the right to accompany an inspector. The compliance officer will consult privately with a reasonable number of employees during the inspection.

**Walkaround**—Following the opening conference, the compliance officer and the representatives will walk through the portions of the workplace covered by the inspection, inspecting for hazards that could lead to employee injury or illness. The compliance officer will also review worksite injury and illness records and the posting of the official OSHA poster.



During the walkaround, compliance officers may point out some apparent violations that can be corrected immediately. While the law requires that these hazards must still be cited, prompt correction is a sign of good faith on the part of the employer. Compliance officers try to minimize work interruptions during the inspection and will keep confidential any trade secrets observed.

**Closing Conference**—After the walkaround, the compliance officer holds a closing conference with the employer and the employee representatives to discuss the findings. The compliance officer discusses possible courses of action an employer may take following an inspection, which could include an informal conference with OSHA or contesting citations and proposed penalties. The compliance officer also discusses consultation services and employee rights.

### Results

When an inspector finds violations of OSHA standards or serious hazards, OSHA may issue citations and fines. OSHA must issue a citation and proposed penalty within six months of the violation's occurrence. Citations describe OSHA requirements allegedly violated, list any proposed penalties, and give a deadline for correcting the alleged hazards. Violations are categorized as willful, serious, other-than-serious, *de minimis*, failure to abate, and repeated. In settling a penalty, OSHA has a policy of reducing penalties for small employers and those acting in good faith. For serious violations, OSHA may also reduce the proposed penalty based on the gravity of the alleged violation. No good faith adjustment will be made for alleged willful violations. For information on penalty ranges, see [www.osha.gov/penalties](http://www.osha.gov/penalties).

### Appeals

When OSHA issues a citation to an employer, it also offers the employer an opportunity for an informal conference with the OSHA Area Director to discuss citations, penalties, abatement dates, or any other information pertinent to the inspection. The agency and the employer may work out a settlement agreement to resolve the matter and to eliminate the hazard. OSHA's primary goal is correcting hazards and maintaining compliance rather than issuing citations or collecting penalties.

Alternatively, employers have 15 working days after receipt of citations and proposed penalties to formally contest the alleged violations and/or penalties by sending a written notice to the Area Director. OSHA forwards the contest to the Occupational Safety and Health Review Commission for independent review. Alternatively, citations, penalties, and abatement dates that are not challenged by the employer or settled become a final order of the Occupational Safety and Health Review Commission.

### Workers' Rights

Workers have the right to:

- Working conditions that do not pose a risk of serious harm.
- Receive information and training (in a language and vocabulary the worker understands) about workplace hazards, methods to prevent them, and the OSHA standards that apply to their workplace.
- Review records of work-related injuries and illnesses.
- File a complaint asking OSHA to inspect their workplace if they believe there is a serious hazard or that their employer is not following OSHA's rules. OSHA will keep all identities confidential.
- Exercise their rights under the law without retaliation, including reporting an injury or raising health and safety concerns with their employer or OSHA. If a worker has been retaliated against for using their rights, they must file a complaint with OSHA as soon as possible, but no later than 30 days.

For additional information, see [OSHA's Workers' page \(www.osha.gov/workers\)](http://www.osha.gov/workers).

### How to Contact OSHA

Under the Occupational Safety and Health Act of 1970, employers are responsible for providing safe and healthful workplaces for their employees. OSHA's role is to help ensure these conditions for America's working men and women by setting and enforcing standards, and providing training, education and assistance. For more information, visit [www.osha.gov](http://www.osha.gov) or call OSHA at 1-800-321-OSHA (6742), TTY 1-877-889-5627.

**This is one in a series of informational fact sheets highlighting OSHA programs, policies or standards. It does not impose any new compliance requirements. For a comprehensive list of compliance requirements of OSHA standards or regulations, refer to Title 29 of the Code of Federal Regulations. This information will be made available to sensory-impaired individuals upon request. The voice phone is (202) 693-1999; teletypewriter (TTY) number: (877) 889-5627.**



U.S. Department of Labor



DEP FS-3783 09/2016





# WHEN TO REQUEST A CERTIFICATE OF INSURANCE

Following are general guidelines for PDRMA members to determine when to require Certificates of Insurance naming your agency as an additional insured. Please note these are general guidelines, and you should consider the types of events or uses requested to develop your own agency policy. If an event or activity involves one or more of the following circumstances in the **REQUIRE** column, you should request a Certificate of Insurance.

| ACTIVITY OR CIRCUMSTANCE  | REQUIRE | NOT NEEDED |
|---|---------|------------|
| <b>Sport and Athletic Events</b><br><i>Examples: Games, tournaments, walk/jog/skate-a-thons, bi-triathlons, water activities</i>  | X       |            |
| <b>Hazardous Recreational Activities</b><br><i>Examples: Bungee jumping, hot air ballooning, sky diving, rock climbing, repelling</i>   | X       |            |
| <b>Large Special Events, Festivals, Celebrations</b><br><i>Examples: "Taste of" events, July 4th/holiday parties, Chamber of Commerce events</i>  | X       |            |
| <b>Public Demonstration/Rally</b><br><i>Examples: "Save the" demonstrations, protest groups</i>   | X       |            |
| <b>Music Concerts</b><br><i>Examples: Rock concerts, teen concerts/dances</i><br><i>Examples: Family concerts, children's concerts</i>  | X       | X          |
| <b>Carnivals, Rides, Hazardous Games</b><br><i>Examples: Carnival rides, dunk tanks, pony/horse rides, moon walks, Velcro wall</i>  | X       |            |
| <b>Fireworks</b>  | X       |            |
| <b>Liquor Being Served</b>  | X       |            |
| <b>Food Prepared/Served by Vendors/Caterers</b><br><i>Examples: Group dinners, food booths, vending trucks, grills/equipment use</i>  | X       |            |
| <b>Small Refreshment Stands</b><br><i>Examples: Canned pop/bottled water/juice sales, popcorn, bag/box candy</i>  |         | X          |
| <b>Picnics: People bring and consume their own food</b>   |         | X          |
| <b>Service Group General Meetings (No liquor served)</b>  |         | X          |
| <b>Low Risk Activities</b><br><i>Examples: Card clubs, reading groups</i>   |         | X          |
| <b>Parties (No liquor served)</b><br><i>Examples: Birthdays/anniversaries, baby/wedding showers</i>   |         | X          |
| <b>Private Groups/Individuals Using Parks/Facilities for Personal Profit</b><br><i>Facilities unavailable to general public so group/individual makes personal gain</i>   | X       |            |
| <b>Government Organizations/Businesses or Corporations</b><br><i>Examples: Use of property, vehicles, facilities, employees, etc.</i>   | X       |            |
| <b>Group with Insurance</b><br><i>If the group has insurance, it is to protect the group against claims related to its activities. By requesting a certificate naming your agency as additional insured, your agency has additional financial protection.</i> | X       |            |



**MORTON GROVE  
PARK DISTRICT**

**Job Task Reinforcement and Coaching Observation Process Checklist**

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Employee Job Title: \_\_\_\_\_

Job Task During Observation: \_\_\_\_\_

**Observations:**

- Equipment
- 30 Second Site Safety Walk Through (Other Hazards Identified)
- Wearing Necessary Personal Protective Equipment
- Perform 3 Points of Contact
- Conduct Reversal of Posture/Stretching
- Best Practice Ergonomics/Lifting/Material Handling
- Slip/Trip and Fall
  - Walking     Running/ Fast Walking     Walk with a purpose

**Observation, Feedback, Communication and Follow-up:**

- Reinforcement       Coaching

Comments:

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## 7. SAFETY TRAINING REQUIREMENTS

Safety training is a continual, year-round program for full-time, part-time, and seasonal staff. As such, safety training has been integrated with the district's value of Continuous Learning. Training sessions completed by staff are logged and are the basis of safety training requirements for staff. Yearly training requirements for staff will be ongoing.

In general, safety training must be completed as described in the following page.

| Topic  | Required Staff  | Morton Grove Park District Standard |
|--|---|-------------------------------------|
| Statements of Admission                        | All Staff   | Annually                            |
| Facility Emergency Procedures                  | All Staff   | Annually                            |
| Blood borne Pathogens                          | All First Aid and CPR trained staff, all maintenance staff and other staff who may come in contact with blood or bodily fluids. | Annually                            |
| Chemical Safety/Right to Know                  | All staff working with, exposed to or having a potential exposure to chemical substances.                                       | Annually                            |
| Lifting/Back Safety                            | All appropriate staff.  | Annually                            |
| Respiratory Protection                         | Staff that requires respiratory protection while performing job duties.   | Annually                            |
| Noise and Hearing Protection                   | Staff with job or task related exposure to noise above 85 decibels *  | Annually                            |
| Lock-out/Tag-out (Energy Isolation Procedures) | Lock-out/Tag-out Authorized and Affected Staff only **  | Every two years                     |
| Confined Space Entry                           | Confined Space Entrants and Attendants only ***   | Every two years                     |
| Personal Protective Equipment                  | Staff required using PPE as determined by a job hazard assessment.  | Every two Years                     |
| Fall Protection                                | Staff required using a personal fall protection device by IDOL standard.<br>****  | Every two years                     |



|                                |  |  |
|--------------------------------|--|--|
| Powered Industrial Truck       | Staff operating powered vehicles other than cars, pick-up trucks, dump trucks or vans. | Every two years  |
| CPR/AED/First Aid              | Staff identified as first responders must maintain a valid training certificate.       | Full training every three years.<br>First Aid every three years.<br>CPR/AED every two years. |
| High Risk Equipment            | Staff operating potentially dangerous equipment that requires special training.        | Every two years  |
| Alcohol Server Training        | Staff serving alcohol must maintain a valid TIPS or equivalent certificate.            | Every two years  |
| Food Service Safety/Sanitation |  | Every two years.   |

\* In order to determine staff exposed to decibel levels of 85 decibels or higher, please consult the section in this manual dealing with Hearing Conservation.

\*\* Lock-out/Tag-out – Authorized staff that has received proper training and demonstrated proper skill in specific lock-out/tag-out procedures and is authorized by the District to perform such procedures in order to isolate hazardous energy while performing maintenance or service on equipment. Lock-out/Tag-out affected staff is staff that work with machinery or equipment that may be affected by lock-out/tag-out procedures during maintenance or service.

\*\*\* An Entrant is a staff member who is authorized and trained by the district to enter confined spaces and perform work. An Attendant is a staff member authorized and trained to be positioned outside the confined space and monitor conditions of the entrant, the conditions outside the confined space, and the conditions inside the confined space.

\*\*\*\*In order to determine staff that must use and receive training on the use of personal fall arrest systems; please consult the section in this manual dealing with fall protection.



# Accident/Incident Report

Attorney/Client Privileged Document

Form  
**01**  
(pg. 2)

15 Was first aid administered?  Yes  No  Unknown

Name and position of person who administered first aid \_\_\_\_\_

What first aid was given? \_\_\_\_\_

Did first aid involve AED and/or CPR?  Yes  No  Unknown

If yes, please submit a PDRMA post-AED form.

Were paramedic services offered?

|   |                              |   |                              |
|---|------------------------------|---|------------------------------|
| Called and refused (at scene by patron) | <input type="checkbox"/> Yes | Offered and called                        | <input type="checkbox"/> Yes |
| Offered and refused                     | <input type="checkbox"/> Yes | Offered, refused, called by agency anyway | <input type="checkbox"/> Yes |
| Unable to respond and called            | <input type="checkbox"/> Yes |   |                              |

Were police called?  Yes

If yes, please provide the following information.

Name of police department \_\_\_\_\_

Name of officer \_\_\_\_\_

Do you expect this person to submit a claim?  Yes  No  Unknown

### PROPERTY DAMAGE

16 Was property damaged as a result of this accident/incident?  Yes  No  Unknown

17 If yes, how was the person involved in the accident/incident?

|   |                          |        |                          |
|---|--------------------------|--------|--------------------------|
| Owner of property adjacent to park district | <input type="checkbox"/> | Patron | <input type="checkbox"/> |
| Vehicle owner                               | <input type="checkbox"/> | Other  | <input type="checkbox"/> |

18 Last name (or business name) \_\_\_\_\_ First name (not necessary if business name) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_ Phone number \_\_\_\_\_

Describe the property damage \_\_\_\_\_

### WITNESS INFORMATION

19 If there was a witness(es) to the accident/incident, please provide the following information:

Last name \_\_\_\_\_ First name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_ Phone number \_\_\_\_\_

20 Did witness make any statements?  Yes  No  Unknown

If yes, what did witness say? \_\_\_\_\_

21 Where was witness when the accident/incident occurred? \_\_\_\_\_



# Vehicle Accident Report

(Accident involving agency vehicle. May involve bodily injury/property damage.)

Attorney/Client Privileged Document

Form  
**02**

|    |  |                                     |                      |                          |
|----|--|-------------------------------------|----------------------|--------------------------|
| 1  | Agency name  | Today's date                        |                      |                          |
| 2  | Date of incident (mm/dd/yyyy)  | Time of incident (hh/mm, a.m./p.m.) |                      |                          |
| 3  | Name of person completing the report   | Title of person completing report   |                      |                          |
| 4  | Business phone   | Business email                      |                      |                          |
| 5  | How did the incident occur? (Provide a brief factual summary.)   |                                     |                      |                          |
|    |  |                                     |                      |                          |
|    |  |                                     |                      |                          |
| 6  | Name of the location (street/road/highway) or nearest intersection where the incident occurred.                            |                                     |                      |                          |
| 7  | Is there an address for incident location? If yes, please provide the following:   |                                     |                      |                          |
|    | Street address   |                                     |                      |                          |
|    | City   | State                               | Zip code             |                          |
| 8  | Location   |                                     |                      |                          |
|    | Offsite (non-agency owned)   | <input type="checkbox"/>            | On agency property   | <input type="checkbox"/> |
| 9  | Primary location   |                                     |                      |                          |
|    | Highway/roadway  | <input type="checkbox"/>            | Parking lot          | <input type="checkbox"/> |
|    |  |                                     | Other                | <input type="checkbox"/> |
| 10 | Was the agency vehicle occupied? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |                                     |                      |                          |
| 11 | Agency driver last name  |                                     |                      | First name               |
|    | Address  |                                     |                      |                          |
|    | City   | State                               | Zip code             |                          |
|    | Home phone #   | Work phone #                        | Cell phone #         |                          |
|    | Email  |                                     |                      |                          |
|    | Is this driver an employee? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown      |                                     |                      |                          |
|    | If Yes, enter job title of employee  |                                     |                      |                          |
|    | Identify the type of driver  |                                     |                      |                          |
|    | Full-time employee   | <input type="checkbox"/>            | Intern               | <input type="checkbox"/> |
|    | Part-time employee   | <input type="checkbox"/>            | Volunteer            | <input type="checkbox"/> |
|    | Seasonal employee  | <input type="checkbox"/>            | Non-agency employee  | <input type="checkbox"/> |
|    |  |                                     | Spouse/family member | <input type="checkbox"/> |
| 12 | Agency vehicle VIN   | Make                                | Model                | License number           |





# Vehicle Accident Report

(Accident involving agency vehicle. May involve bodily injury/property damage.)  
Attorney/Client Privileged Document

**Form 02**  
(pg. 2)

|           |  |  |   |  |
|-----------|--|--|---|--|
| <b>13</b> | Is vehicle drivable?   | <input type="checkbox"/> Yes                         | <input type="checkbox"/> No                         | <input type="checkbox"/> Unknown           |
|           | If no, provide current location of vehicle   |  |   |  |
|           |  |  |   |  |
| <b>14</b> | Area of damage   |  |   |  |
| <b>15</b> | Estimated repair cost  |  |   |  |
| <b>16</b> | Was a trailer involved?  | <input type="checkbox"/> Yes                         | <input type="checkbox"/> No                         | <input type="checkbox"/> Unknown           |
|           | If yes, provide the following information.   |  |   |  |
|           | Trailer year   | Make   | Model   | License number                             |
|           | Trailer area of damage   |  |   |  |
|           | Current location of trailer  |  |   |  |
|           | Estimated repair cost of trailer   |  |   |  |
|           |  |  |   |  |
| <b>17</b> | Has a police agency conducted an investigation?  | <input type="checkbox"/> Yes                         | <input type="checkbox"/> No                         | If yes, provide the following information. |
|           | What police agency investigated the incident?  |  |   |  |
|           | Police report number   |  |   |  |
|           |  |  |   |  |
| <b>18</b> | Was the agency driver ticketed, arrested or cited for violation(s)?  | <input type="checkbox"/> Yes                         | <input type="checkbox"/> No                         | <input type="checkbox"/> Unknown           |
|           | If yes, provide details of the ticket, arrest or violation(s).   |  |   |  |
|           |  |  |   |  |
|           |  |  |   |  |
| <b>19</b> | <b>CLAIMANT INFORMATION</b>  |  |   |  |
|           | Identify other people involved in the accident. <i>(Make additional copies of this section if needed.)</i> |  |   |  |
|           | How was the person involved in the accident? <i>(Check all that apply.)</i>                                |  |   |  |
|           | Driver of other vehicle <input type="checkbox"/>   | Injured person <input type="checkbox"/>              | Owner of involved property <input type="checkbox"/> |  |
|           | Owner of other vehicle <input type="checkbox"/>  | Passenger of agency vehicle <input type="checkbox"/> | Passenger of other vehicle <input type="checkbox"/> |  |
|           | Pedestrian <input type="checkbox"/>  |  |   |  |
|           | Last name or business name   |  | First name (not necessary for business)             |  |
|           | Address  |  |   |  |
|           | City   | State  | Zip code  |  |
|           | Home phone #   | Work phone #   | Cell phone #  |  |
|           |  |  |   |  |



# Vehicle Accident Report

(Accident involving agency vehicle. May involve bodily injury/property damage.)

Attorney/Client Privileged Document

**Form 02**  
(pg. 3)

|                     |  |  |   |
|---------------------|--|--|---|
| <b>19</b>           | Vehicle make   | Model  | Year  |
|                     | Area of damage   |  |   |
|                     | Is vehicle driveable?                                      | <input type="checkbox"/> Yes <input type="checkbox"/> No   | If no, current location of vehicle                            |
|                     | Extent of damage   | <input type="checkbox"/> Moderate <input type="checkbox"/> Nothing visible <input type="checkbox"/> Severe <input type="checkbox"/> Slight |   |
|                     | Describe the property damage ( <i>other than vehicle</i> ) |  |   |
|                     | Extent of damage to property other than vehicle            | <input type="checkbox"/> Moderate <input type="checkbox"/> Nothing visible <input type="checkbox"/> Severe <input type="checkbox"/> Slight |   |
|                     | Age of injured person _____                                | Sex of injured person  | <input type="checkbox"/> Male <input type="checkbox"/> Female |
|                     | Was the injured person transported by paramedics?          | <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |
|                     | If yes, where was the injured person taken?                |  |   |
|                     | Do you expect the injured person to file a claim?          | <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |
| Describe the injury |  |  |   |

### ADDITIONAL CLAIMANT INFORMATION

Identify other people involved in the accident. (*Make additional copies of this section if needed.*)

How was the person involved in the accident? (*Check all that apply.*)

|                         |                          |                             |                          |                            |                          |
|-------------------------|--------------------------|-----------------------------|--------------------------|----------------------------|--------------------------|
| Driver of other vehicle | <input type="checkbox"/> | Injured person              | <input type="checkbox"/> | Owner of involved property | <input type="checkbox"/> |
| Owner of other vehicle  | <input type="checkbox"/> | Passenger of agency vehicle | <input type="checkbox"/> | Passenger of other vehicle | <input type="checkbox"/> |
| Pedestrian              | <input type="checkbox"/> |                             |                          |                            |                          |

Last name or business name \_\_\_\_\_ First name (not necessary for business) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Home phone # \_\_\_\_\_ Work phone # \_\_\_\_\_ Cell phone # \_\_\_\_\_

Vehicle make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_

Area of damage \_\_\_\_\_

Is vehicle driveable?     Yes       No      If no, current location of vehicle \_\_\_\_\_

Extent of damage     Moderate     Nothing visible     Severe     Slight

Describe the property damage (*other than vehicle*) \_\_\_\_\_

Extent of damage to property other than vehicle     Moderate     Nothing visible     Severe     Slight



# Vehicle Accident Report

(Accident involving agency vehicle. May involve bodily injury/property damage.)

Attorney/Client Privileged Document

**Form 02**  
(pg. 4)

|           |   |
|-----------|---|
| <b>19</b> | Age of injured person _____ Sex of injured person <input type="checkbox"/> Male <input type="checkbox"/> Female   |
|           | Was the injured person transported by paramedics? <input type="checkbox"/> Yes <input type="checkbox"/> No  |
|           | If yes, where was the injured person taken?   |
|           | Do you expect the injured person to file a claim? <input type="checkbox"/> Yes <input type="checkbox"/> No  |
|           | Describe the injury   |
| <b>20</b> | Identify witnesses of the accident. (Provide the following information for each witness. Make additional copies of this page if needed.)  |
|           | Last name <span style="float: right;">First name</span>   |
|           | Address   |
|           | City <span style="margin-left: 150px;">State</span> <span style="float: right;">Zip code</span>   |
|           | Home phone # <span style="margin-left: 150px;">Work phone #</span> <span style="float: right;">Cell phone #</span>  |
|           | Witness to accident? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown If yes, provide the following information.                                 |
|           | Relation to injured person or property owner:   |
|           | Agency employee or volunteer <input type="checkbox"/> Another program participant or park user <input type="checkbox"/> Friend <input type="checkbox"/>                                   |
|           | Other <input type="checkbox"/> Passerby <input type="checkbox"/> Relative <input type="checkbox"/>  |
|           | Did witness make any statements? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown  |
|           | If yes, provide the following information.  |
|           | What did witness say?   |
|           | Where was witness when the accident occurred?   |
| <b>21</b> | Was the driver of the agency vehicle conducting agency business at the time of the accident?<br><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| <b>22</b> | What street was the agency driver on? <span style="float: right;">What street was the other driver driving on?</span>   |
| <b>23</b> | What direction was the agency driver traveling? <input type="checkbox"/> North <input type="checkbox"/> South <input type="checkbox"/> East <input type="checkbox"/> West                 |
|           | What direction was the other driver traveling? <input type="checkbox"/> North <input type="checkbox"/> South <input type="checkbox"/> East <input type="checkbox"/> West                  |
| <b>24</b> | Weather conditions  |
|           | Dry <input type="checkbox"/> Fog <input type="checkbox"/> Ice <input type="checkbox"/> Snow <input type="checkbox"/> Wet <input type="checkbox"/>   |
| <b>25</b> | Accident diagram  |





# Property Loss Report

(For damage to agency property)

Attorney/Client Privileged Document

Form  
03

|    |  |                                     |                                   |  |
|----|--|-------------------------------------|-----------------------------------|--|
| 1  | Agency name  | Today's date                        |                                   |  |
| 2  | Date of incident (mm/dd/yyyy)  | Time of incident (hh/mm, a.m./p.m.) |                                   |  |
| 3  | Name of person completing the report   | Title of person completing report   |                                   |  |
| 4  | Business phone   | Business email                      |                                   |  |
| 5  | How did the incident occur and what property was damaged? (Provide a brief factual summary.)   |                                     |                                   |  |
| 6  | Name of the location (park, pool, community center; <i>Ex. Smith Pool, Johnson Community Center</i> ) or nearest intersection where the incident occurred.       |                                     |                                   |  |
| 7  | Is there an address for incident location? If yes, please provide the following:   |                                     |                                   |  |
|    | Street address   |                                     |                                   |  |
|    | City   | State                               | Zip code                          |  |
| 8  | Location (Specify the exact type of location/facility damaged, listing multiple locations/facilities if necessary. <i>Ex. maintenance garage, sports field</i> ) |                                     |                                   |  |
| 9  | Primary location (Identify the exact area of damage. <i>Ex. tool storage, batting cage</i> )   |                                     |                                   |  |
| 10 | Estimate of loss   |                                     |                                   |  |
| 11 | Contact person at facility   |                                     |                                   |  |
| 12 | Contact person's email   |                                     |                                   |  |
| 13 | Contact person's phone number  |                                     |                                   |  |
| 14 | Was damage caused by third-party (non-agency) individual? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown              |                                     |                                   |  |
| 15 | Has the party responsible for damage been identified? If yes, provide the following contact information for the person or persons identified:                    |                                     |                                   |  |
|    | Name   |                                     | Street address                    |  |
|    | City   | State                               | Zip code                          |  |
| 16 | Has a police agency conducted an investigation? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown                        |                                     |                                   |  |
| 17 | What police agency investigated the incident?  |                                     | What is the police report number? |  |
| 18 | Were criminal charges brought against the responsible party? If yes, what were the charges?  |                                     |                                   |  |



# Employee Injury Report

**Form  
04**

|           |   |                                    |  |
|-----------|---|------------------------------------|--|
| <b>1</b>  | Complete an Employee Injury Report for each employee injured.   |                                    |  |
| <b>2</b>  | Agency name   | Today's date                       |  |
| <b>3</b>  | Date of incident (mm/dd/yyyy)   | Time of incident (hh/mm a.m./p.m.) |  |
| <b>4</b>  | Name of person completing report  | Title of person completing report  |  |
| <b>5</b>  | Business phone  | Business email                     |  |
| <b>6</b>  | How did the incident occur? (Provide a one-line factual description.)   |                                    |  |
| <b>7</b>  | Name of the location (park, pool, community center; <i>Ex. Smith Pool, Johnson Community Center</i> ) or nearest intersection where the incident occurred.    |                                    |  |
| <b>8</b>  | Is there an address for this location? If yes, please provide the following:  |                                    |  |
|           | Street address  |                                    |  |
|           | City  | State                              | Zip code   |
| <b>9</b>  | Location (Specify the exact type of location/facility where injury occurred. <i>Ex. maintenance garage, sports field aquatic outdoor, golf course, etc.</i> ) |                                    |  |
| <b>10</b> | Primary location (Specify exact location. <i>Ex. lap pool, cart storage, classroom, pavilion</i> )  |                                    |  |
| <b>11</b> | Employer's FEIN   |                                    |  |
| <b>12</b> | Did the employee miss more than three (3) scheduled workdays?   | <input type="checkbox"/> Yes       | <input type="checkbox"/> No  |
|           |   | <input type="checkbox"/> Unknown   |  |
| <b>13</b> | What was the employee doing when the accident occurred?   |                                    |  |
| <b>14</b> | How did the incident occur? (Provide a detailed factual description.)   |                                    |  |
|           |   |                                    |  |
|           |   |                                    |  |
| <b>15</b> | Employee last name  | First name                         |  |
|           | Address   |                                    |  |
|           | City  | State                              | Zip code   |
|           | Home phone #  | Work phone #                       | Cell phone #   |
|           | Best number to contact employee   |                                    | Email  |
|           | Social security number  | Date of birth (mm/dd/yyyy)         | Gender <input type="checkbox"/> Male<br><input type="checkbox"/> Female                  |
|           | Marital status (divorced/married/single/unknown)  | Number of dependents               | Does employee speak English?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
|           | Average weekly wage   | Job title/occupation               |  |



# Employee Injury Report

Form  
**04**  
(pg. 2)

|    |  |  |   |   |   |
|----|--|--|---|---|---|
| 15 | What is the employee's employment status?  |  |   |   |   |
|    | <input type="checkbox"/> Permanent full-time   | <input type="checkbox"/> Permanent part-time   | <input type="checkbox"/> Seasonal                       | <input type="checkbox"/> Intern <input type="checkbox"/> Other                            |   |
|    | Date hired (mm/dd/yyyy)  | What is the employee's tenure? (length of employment)  |   |   |   |
|    |  | <input type="checkbox"/> Less than 1 yr. <input type="checkbox"/> 1-3 yrs. <input type="checkbox"/> 4-10 yrs. <input type="checkbox"/> 11-19 yrs. <input type="checkbox"/> More than 20 yrs. |   |   |   |
|    | Time employee began work on day of incident (hh/mm a.m./p.m.)  |  |   |   |   |
|    | Last date employee worked prior to date of incident (mm/dd/yyyy)   |  |   |   |   |
|    | If the employee died as a result of the accident, give the date of death. (mm/dd/yyyy)   |  |   |   |   |
|    | Did the incident occur on agency premises?   |  | <input type="checkbox"/> Yes                            | <input type="checkbox"/> No <input type="checkbox"/> Unknown                              |   |
|    | Injury or illness?   |  | <input type="checkbox"/> Injury                         | <input type="checkbox"/> Illness  |   |
|    | Describe the injury or illness (affected body part and type of injury; <i>Ex. contusion, bruise, laceration, sprain, break, etc.</i> ) |  |   |   |   |
|    |  |  |   |   |   |
|    |  |  |   |   |   |
|    | What object or substance, if any, directly harmed the employee?  |  |   |   |   |
|    | 16   | Did the injured employee seek medical attention?   |   | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |   |
|    |  | 17   | If yes, was the treatment given away from the worksite? |   | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| 18 |  |  | Was the employee treated in an emergency room?          |   | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
|    |  |  | 19  | Was the employee hospitalized overnight as an inpatient?                                  |   |
| 20 |  |  |   | Name of treating physician, health care provider, or emergency room                       |   |
|    | Address  |  |   |   |   |
|    | City   | State  | Zip code Phone number                                   |   |   |
|    |  |  |   |   |   |



|          |   |
|----------|---|
| <b>1</b> | Employee name.  |
| <b>2</b> | Date of incident (mm/dd/yyyy) <span style="float: right;">Time of incident (hh/mm a.m./p.m.)</span>   |
| <b>3</b> | Specific location of accident. (Ex. Second floor hallway of recreation center, storage closet of maintenance shed, south entrance of aquatic facility, etc.)  |
| <b>4</b> | Are you reporting the injury for the first time using this form? <span style="float: right;">Yes <input type="checkbox"/> No <input type="checkbox"/></span><br>If no, when did you first report the injury (verbally or in writing) and to whom did you report it?<br>Date: _____ Time: _____ Reported to: _____ |
| <b>5</b> | Describe how the injury occurred. (Identify the job task you were doing and include a step-by-step explanation of what led to the injury.)  |
| <b>6</b> | Name all people present at the time of injury (e.g., coworkers and/or witnesses).   |
| <b>7</b> | Identify all body parts you injured. (Be specific indicate left or right, upper or lower.)  |
| <b>8</b> | Did you seek medical attention on the date of the accident? <span style="float: right;">Yes <input type="checkbox"/> No <input type="checkbox"/></span><br>If yes, where did you seek treatment?  |



**Notification of Injury  
to Employer Report**  
*(Employee to complete and submit to supervisor or HR.)*

**Form  
04E**  
(pg. 2)

|   |  |       |    |
|---|--|-------|----|
| 9   | Have you injured this body part previously?                            | Yes   | No |
|   | If yes, please describe which body part and what the prior injury was. |       |    |
|   |  |       |    |
|   |  |       |    |
|   |  |       |    |
|   |  |       |    |
|   |  |       |    |
|   | If yes, where did you receive treatment?                               |       |    |
|   |  |       |    |
|   |  |       |    |
| The above information is true and accurate: |  |       |    |
| _____                                       |  | _____ |    |
| (Employee signature)                        |  | Date  |    |
| Notification of injury was received on:     |  |       |    |
| _____                                       |  |       |    |
| (Date received by employer representative)  |  |       |    |
| Notification of injury was received by:     |  |       |    |
| _____                                       |  |       |    |
| (Representative signature)                  |  |       |    |
| _____                                       |  |       |    |
| (Printed name)                              |  |       |    |

## 8. Facility Safety

### Facility Emergency Procedures

The district will use the following code system to announce various facility emergencies.

#### CODE ADAM

A MISSING PERSON has been reported to an employee.

#### CODE BLACK:

SEVERE WEATHER is imminent and the facility must be closed.

#### CODE RED:

A FIRE OR CHEMICAL LEAK has been detected and the facility must be cleared.

#### CODE BROWN:

FECAL CONTAMINATION of the pool has been identified.

#### CODE PURPLE:

Staff has received a BOMB THREAT.

#### CODE YELLOW:

A HOSTILE PERSON has been identified in the facility.

Below is a summary of procedures for the most probable or likely emergency scenarios. Staff must be familiar with these procedures and all other emergency procedures.

### Fire Emergency Procedure

- In the event that the facility fire alarm, sprinkler system is activated, all staff and guests must evacuate the facility. Staff is required to gather in designated evacuation areas for each facility.
- If staff encounters a facility fire that has not triggered the automatic alarm or fire suppression systems, staff must then pull the facility fire alarm to alert staff to a facility fire. If the fire is in its beginning stages, staff may put the fire out with a fire extinguisher if it is safe to do so. Staff and guests must evacuate the facility when the Facility Fire Alarm has been activated.
- The staff's first responsibility in fire emergencies is personal safety. However, staff is instructed to advise guests to evacuate the building during a fire emergency and to assist in evacuation if necessary and safe to do so.
- Recreation staff supervising children must have a copy of the attendance roster and perform a head count.
- Staff and guests must remain clear of the facility until the Fire Department clears the facility for safe reentry.



### **Tornado Emergency Procedure**

- In the event that a tornado warning is issued for the Morton Grove area, a community tornado siren will sound and local radio and television stations will carry tornado warning messages with emergency instructions.
- The Aquatic Center will issue a "Code Black" warning through the facility's public address or radio system. Managers on duty in Harrer Park and Oriole park, and park maintenance facilities will warn staff in person or by phone. Staff must proceed to tornado shelter areas of the facility when a "Code Black" announcement has been made.
- Staff's first responsibility in tornado emergencies is for personal safety. However, staff is instructed to advise guests to take shelter in a tornado shelter location during a tornado emergency and to assist guests in reaching such shelters within the facility if necessary and safe to do so.
- Recreation staff supervising children must perform a head count using the Evacuation Participant Headcount form located on the Common drive.
- Staff must remain in the tornado shelter locations for the duration of the tornado warning.

### **Lightning Hazard Procedure**

- Staff's first responsibility during a warning is for personal safety. However, staff is instructed to advise guests to take shelter during the warning. Guests who do not take shelter do so at their own risk.
- Appropriate shelter includes substantial buildings and vehicles with the windows and doors closed. Open-sided pavilions, trees or fences are not appropriate lightening shelters.
- The 15-second Thor Guard horn blast means take cover. Three, 5-second horn blast means all clear.

### **Code Adam Emergency Procedure**

If staff learns of a missing child from a District facility, staff will implement the nationally recognized Code Adam Procedure. Below is a six-step summary of this procedure.

1. Obtain detailed information about the missing child. This information must include height, approximate age, hair color, eye color, style of clothing and any other distinguishing characteristics.
2. Make a Code Adam announcement using the public address or radio system at the facility. The Code Adam announcement must relay details gathered in Step #1.
3. Staff will search the facility and immediate surrounding area for the missing child. If the child is not found within 10 minutes, staff will notify the police and the parents of the child.
4. If the child is found, reunite the child with the parent, guardian, or District staff member.
5. If an unknown individual(s) attempts to leave the facility with the child, get descriptions of the person, including, if possible, a license plate number. Report this immediately to the police.
6. Cancel the Code Adam Emergency via PA or radio system.

### **Facility Flood Procedure**

- Indoor flooding conditions are defined as an inflow of water to a facility resulting in standing water ½ inch or deeper or saturation of carpeting in any facility. In the event of facility flooding the following steps must be taken.

1. Staff must report flooding to the senior manager on duty for the facility.
2. Staff not involved in flood mitigation or cleanup must stay out of flooded areas. Maintenance staff will lock or otherwise isolate flooded areas of the facility. All flooded areas will remain closed to unauthorized staff and guests until flood damage is repaired and the area is inspected for safety. Only staff trained as a professional electrician will attempt to shut off electricity in a flood affected area. Electricity should be shut off at the source under the guidance of a trained professional electrician or the electric company.
3. Authorized maintenance staff will take steps to mitigate further flood damage by pumping out standing water, shutting off leaking water supplies, etc. All electrical equipment used in flooded or wet areas will have ground fault circuit interrupter (GFCI) protection.
4. If facility flooding is widespread, a portion of the facility or the entire facility may be evacuated at the decision of the senior manager on duty.

#### **Facility Blackout Procedure**

- If a facility loses power during an electrical blackout, guests must be evacuated from the area without electrical power. If the blackout affects the entire facility or if the blackout disrupts power to the facility fire alarm panel, guests must be evacuated from the entire facility. The facility will remain closed to the public until power can be restored and it is determined no secondary hazards exist.
- Once evacuation of an area affected by an electrical blackout is complete, facility maintenance staff will conduct a fire check of the facility to ensure no fires occurred as a secondary result of the blackout. This fire check should include all electrical rooms and electrical panels in the facility.

#### **Facility Gas Leak Procedure**

- A natural gas leak in a facility can be detected by smell or a persistent hissing sound. If staff encounters these signs, facility maintenance as well as the guest service staff (CRC only) or the manager on duty for the facility need to be notified. Guest service staff or the manager on duty will make a "Code Red" announcement over the facility PA system or radio system indicating a natural gas leak.
- Everyone is required to evacuate the facility in case of a natural gas leak. Staff's first responsibility is for personal safety. However, staff is instructed to advise guests to evacuate, and to assist if necessary and safe to do so.

The following precautions will be taken in a gas leak area:

- 1) Staff responsible for the facility will contact the local gas company and 911 immediately. Staff and guests must remain clear of the facility until emergency responders clear the facility.
- 2) Do not attempt to fix the leak.
- 3) Do not turn on or off electrical devices, including light switches in the gas leak area.
- 4) Do not use an open flame in the gas leak area.
- 5) Do not use cell phones in the gas leak area.

#### **Facility Lockdown Procedures**

- The need for a facility to utilize an emergency lock-down procedure will be given by the Morton Grove Police Department. The Morton Grove Police will contact the PVCC Guest Service Desk, Fitness Center, or facility key holder list to advise of an emergency in the community that requires public facilities to be locked down.



- The PVCC Guest Service Desk, Fitness Center or facility key holder will contact all facilities.
- Remote staff at school sites, parks and outdoor areas will be notified by radio or phone and given instructions by a supervisor regarding what actions to take. Pool will be cleared and closed, outdoor athletics programs or special events cancelled during a Code Yellow emergency. Camp programs will immediately be moved indoors at the CRC.
- Facility staff will lock all entrances or close gates to each facility and staff will make a Code Yellow announcement over facility PA or radio systems. Staff will inform guests that the facility is in lockdown. Guests and staff will be advised to move away from doors, windows, and gates of a facility during the lockdown emergency.
- Except in the case of a medical emergency or a facility emergency that endangers safety (i.e., fire), guests and staff will not be allowed to enter or exit facilities in lock-down during a lock-down emergency.
- The PVCC Guest Service Desk, Fitness Center or facility key holder will contact all facilities and advise them when the emergency has been lifted and normal activities may resume.

### **Routes of Egress, Fire Exits and Other Walking Surfaces**

- Stored items may not obstruct walkways, exits, or stairways.
- Emergency exit doors shall never be chained or locked in a manner that would restrict persons from exiting a building in the event of a fire or related emergency.
- Each building will have an emergency exit and shelter plan in all public rooms and areas clearly posted to assist occupants if immediate evacuation is necessary.
- Emergency lighting fixtures and illuminated exit signs should be installed in all District buildings and checked periodically to ensure proper operation.
- All floors will be maintained to avoid dangerous conditions.
- All substances spilled on floors must be **immediately** removed. Proper signage should be placed where any slip hazards exist.
- Extension cords placed along the floor must be taped down to prevent staff or guests from tripping.
- Dance floors will be inspected prior to events for sharp surfaces, splinters, or glass shards. All hazards will be removed.
- Pool decks will have edges of drainage grates below deck level.
- Trip hazards will be removed from all walking surfaces
- Holes or openings in the ground or facility floor must be barricaded and marked as a danger. Where this is not possible, staff must monitor the hole or opening.

### **General Housekeeping**

- Staff must keep all areas of their workplace, passageways, service rooms and storage rooms in a clean, orderly, and sanitary condition to the extent the nature of the work allows.
- Place all refuse in the proper containers. Waste receptacles should not be allowed to overflow.
- Rags saturated with oil, grease or fuel must be kept in a separate refuse container designated for that use only. This container must be kept closed at all times and must be emptied daily.
- All materials and equipment should be stored properly and secured in designated areas to avoid possible injury or damage to individuals or property.
- When using compressed air as a method of cleaning equipment or facilities the compressed air must be limited to 35 psi. Goggles or full-face shields with safety glasses must be worn when using compressed air as a cleaning/dusting agent. Compressed air must never be directed toward a staff member's head, face, or body.
- A non-slip coating must be used on all polished floors in work areas.



- When stacking items for storage, boxes must be stored no more than five boxes high to a maximum height of five feet. Storage in sprinkled areas must be at least 18 inches below sprinkler heads.

## **9. Ergonomics**

### **Stretching Guidelines**

- **Medical Clearance.** Be sure to obtain medical clearance if you are unsure whether to engage in stretching activities based on a pre-existing health condition.
- **Warm up First.** If you are stretching on the job during a lunch hour or a scheduled break – or at home – remember to warm up if you were not previously active. Walk while gently pumping your arms or do a favorite exercise at low intensity for two to five minutes. Stretching is more effective when you warm up your muscles first.
- **Hold Each Stretch for at Least 30 Seconds.** It takes time to lengthen muscle tissue safely. Hold your stretches for at least 30 seconds — and up to 60 seconds for a tight muscle or problem area. This may seem like a long time, so keep an eye on the clock to make sure you hold your stretches long enough. For most of your muscle groups, doing three repetitions of a 30-second stretch is enough. Due to the longer hold times, you usually perform these stretches before a strenuous work task or activities at home.
- **Focus on a Pain-Free Stretch.** A gentle pull on the muscle is good. If you feel pain as you stretch, you've gone too far. Back off to the point where you don't feel any pain, then hold the stretch.
- **Stretch Both Sides.** Make sure your joints on both sides of your body share an equal range of motion.
- **Do Not Bounce.** Bouncing as you stretch can damage muscles and tendons, leaving scar tissue as the muscle heals. Scar tissue tightens a muscle even further, making you even less flexible — and more prone to pain.
- **Relax and Breathe Freely.** Avoid holding your breath while stretching. Count out loud, even if quietly, to assure you breathe while stretching.
- **Reversal-of-Posture Exercises.** Do reversal-of-posture exercises only for 5- 10 seconds at a time to restore circulation and reverse possible micro trauma resulting from static postures. You can do reversal-of-posture exercises before, during, or after an activity or job task. (See Reversal of Posture Stretches on page 128) Reversal-of-posture exercises differ from traditional stretching exercises in the relatively short hold-times. For that reason, they are more practical to do during the workday.

**Reversal of Posture Exercises**

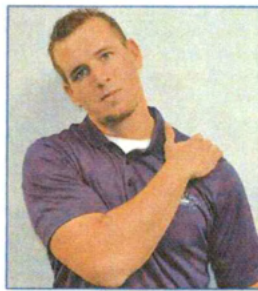


**Reversal of Posture Exercises PDRMA**



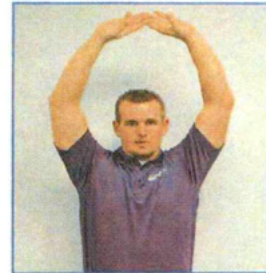
**CHIN TUCK**

Stand straight with head level. Place the web of your hand on your chin, gently pushing your head backwards. Attempt to make a "double chin." **Hold for 10 seconds.**



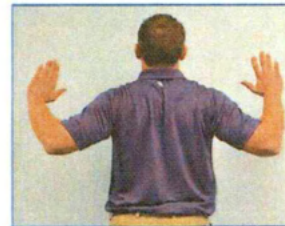
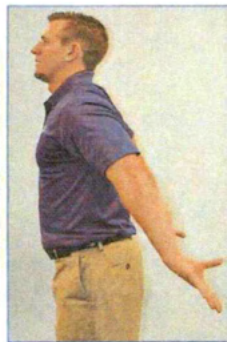
**SHOULDER STRETCH**

Place one hand on shoulder to stabilize it. Drop ear toward opposite shoulder. **Hold the stretch for 5 seconds and repeat on opposite side.**



**SHRUG-BREATH**

Inhale, cross arms, clench fists and shrug shoulders up toward the ceiling. Exhale slowly while pushing thumbs back and squeezing shoulder blades together. **Hold at the end for 5 seconds.**



**OVERHEAD STRETCH**

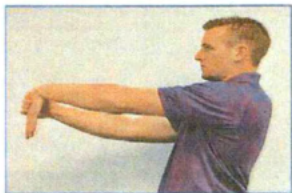
Lift arms overhead. Slowly pull your shoulder blades down and back, as if to put your elbows into your back pockets. **Hold for 5 seconds.**

**Putting Patients First**  
For more information or to schedule an appointment  
call 877-97-REHAB (877-977-3422) or visit [www.acceleratedrehab.com](http://www.acceleratedrehab.com)



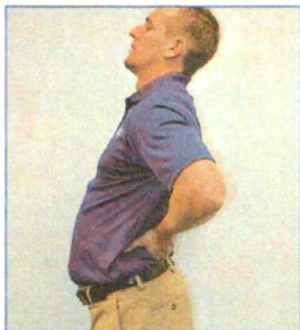
**FOREARM STRETCH 1**

Start with arm straight out at chest level, fingertips up. Use the opposite hand to grab the back of the outstretched hand, pulling it back toward you. **Hold for 5 seconds and repeat on opposite side.**



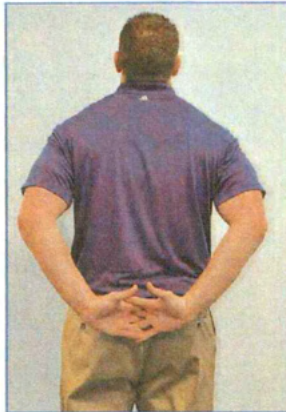
**FOREARM STRETCH 2**

Start with arm straight out at chest level, fingertips down. Make a fist. Use opposite hand to pull your wrist toward you. **Hold for 5 seconds and repeat on the opposite side.**



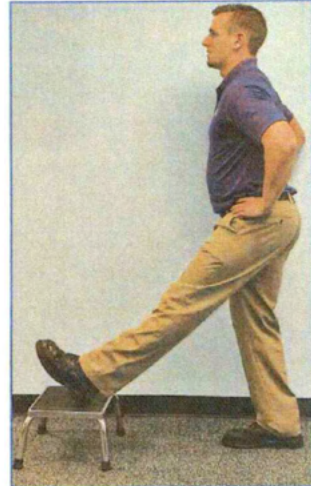
**BACKWARD BEND**

Place both hands toward the middle of the low back and push your hips forward, gently keeping the knees straight. Allow your back to arch and look up at the ceiling for **10 seconds**.



**ANTERIOR STRETCH**

With your elbows straight, clasp hands behind the back. Lift your hands away from your back. **Hold for 5 seconds.**



**HAMSTRING STRETCH**

Place heel on elevated step. Keep your head and chest up, hips back and slightly lean forward. **Hold for 5 seconds and repeat for opposite leg.**

**GENERAL RULES**

1. If you are currently being treated for an injury, please check with your physician first.
2. Perform at the beginning of the work shift, at breaks, and at the end of the shift.
3. Each Reversal of Posture position should be held for 10 seconds each or 5 seconds for each extremity.
4. Remember to perform Reversal of Posture positions slowly.
5. The "holding time" is as important as the motion.





## Ergonomics-Office/Sitting on the Job

Sitting jobs require less muscular effort, but that does not exempt people from the injury risks usually associated with more physically demanding tasks. Sitting requires the muscles to hold the trunk, neck and shoulders in a fixed position. A fixed working position squeezes the blood vessels in the muscles reducing the blood supply to the working muscles just when they need it the most. An insufficient blood supply accelerates fatigue and makes the muscles prone to injury. Employees who work in a sitting position for long periods may suffer back pain, muscle tenderness and aches, varicose veins, stiff necks, and numbness in the legs.

### What is a "good" sitting body position?

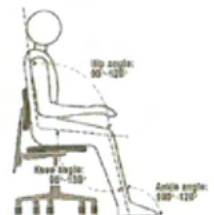
There is no one or single body position that is recommended for sitting. Every worker can sit comfortably by adjusting the angles of their hips, knees, ankles and elbows. The following are general recommendations.

Keep the joints such as hips, knees and ankles open slightly (more than 90°)

Keep the upper body within 30° of an upright position



- Always keep the head aligned with the spine.
- Keep upper arms between vertical and 20° forward.
- Keep elbows at an angle between 90° and 120°.
- Keep forearms between horizontal and 20° up.
- Support the forearms



Keep the wrists straight and aligned with the forearms. Place the working object so that it can be seen at viewing angle of 10° to 30° below the line of sight.

- Keep shoulders low and relaxed.
- Keep elbows tucked in.
- Tuck chin in and do not bend forward when looking down and forward.
- Change positions frequently but remain within recommended ranges.
- Alternate crossed legs.
- Avoid bending to the side.
- Avoid bending forward.
- Do not slouch.
- Do not sit for more than 50 minutes at a time

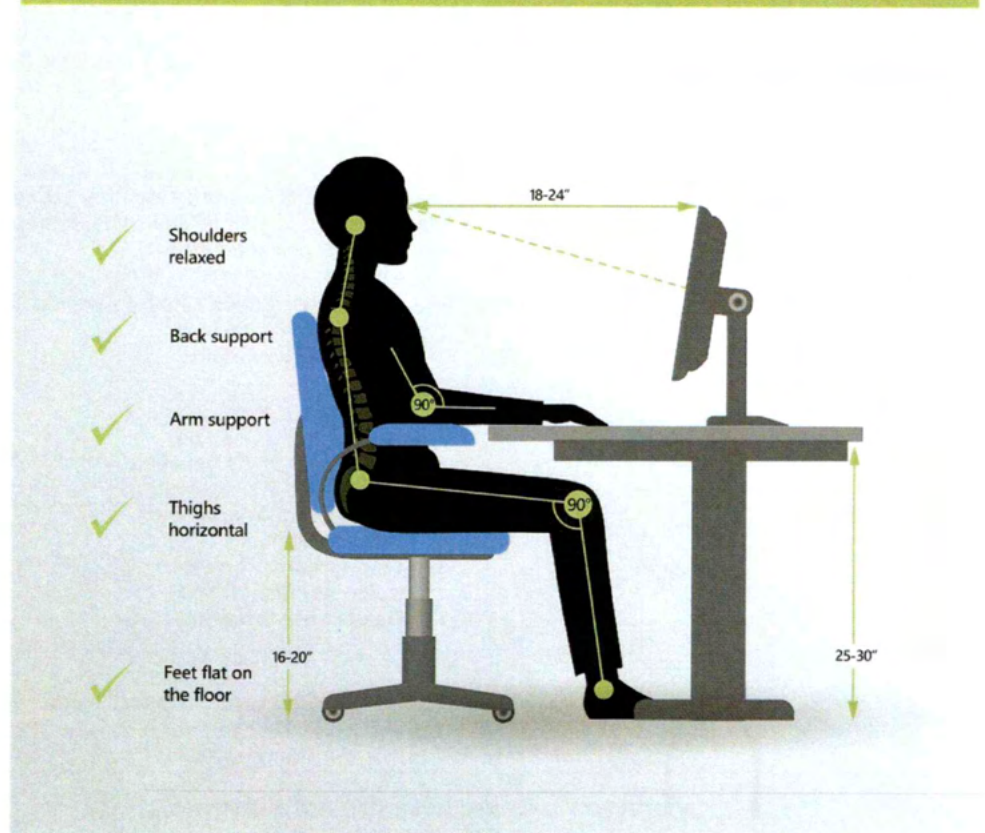


*This fact sheet is provided for PDRMA's use by Alliant Risk Control Consulting. This information is not intended to be exhaustive. The discussion and best practices suggested herein should not be regarded as legal advice. Readers should pursue legal counsel or contact their insurance providers to gain more exhaustive advice.*

Source: Alliant Insurance Services, Inc. • PHONE (800) 789-5655 • [www.alliantinsurance.com](http://www.alliantinsurance.com)

3 / 2008

# CORRECT SITTING POSTURE



### Safe Lifting and Material Handling

- Back injuries resulting in low back pain continue to be one of the most significant issues in worker health and safety in every industry. The following rules and guidelines are in place to reduce back injury risk for maintenance and non-maintenance related tasks throughout the district.
- Objects heavier than 50 lbs. or awkward in nature must be lifted using a two or more-person lifting technique. If this is not possible or appropriate for the lifting task, use mechanical assistance such as a jack, powered mobile equipment, powered lift, or hoist to lift the object.
- Lifting tasks must be planned by Supervisory staff or crew leaders so that the distance to manually carry a load is minimized. If the lifted object must be transported a long distance, use mechanical assistance such as a dolly, cart, EZ-GO or pickup truck to transport the object.
- Proper lifting technique, as illustrated below must be used whenever possible.

**BEND YOUR KNEES**



Get to the level of the load if you can. Test a corner of the load before you lift to see if you can lift it safely.

**HUG THE LOAD**



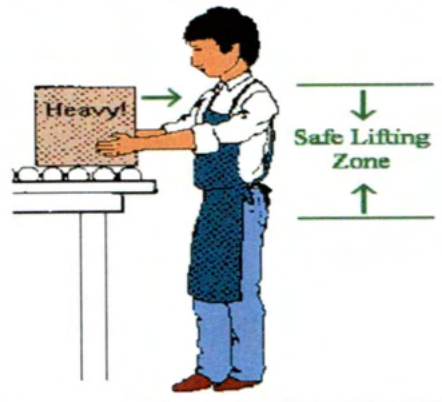
Avoid reaching out for loads or carrying them away from your body. You have less strength and stability when doing this. Your back will be bent. Try to maintain a straight back.

**AVOID TWISTING**



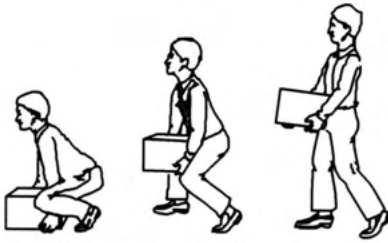
Turn with your feet, not your back. Your back is carrying weight now and more easily injured when twisted.

- Whenever possible, heavy objects will be stored in the Safe Lifting Zone. The safe lifting zone is the area between a person's shoulders and waist. This allows for greatest ease of lifting and back safety. The Safe Lifting Zone is illustrated below.





- In instances where proper safe lifting techniques cannot be achieved because of the requirements of the job, alternate safe lifting techniques can be used.



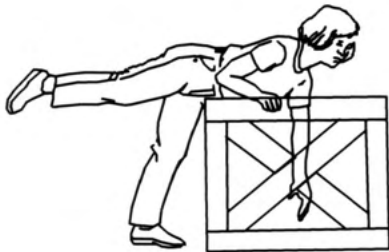
**The Diagonal Lift**

Squat. Head up. Back arched.  
Feet spread. One foot ahead.



**The Power Lift**

Partial squat. Head up.  
Back arched. Feet spread.  
One foot ahead.



**The Golfer Lift**



**The Partial Squat Lift**



**The Straight Leg Lift**

Bend at the waist, not the back

## 10. Tools and Equipment

### Ladders

- **Never use a defective ladder. Select the right ladder for the job.**
- For indoor use, stepladders or multi-purpose ladders are usually recommended.
- For outdoor work, taller stepladders, multi-purpose, or extension ladders are generally more appropriate.

- Do not use aluminum ladders when working around electricity. Choose a ladder made from non-conductive material for electrical work, such as when working near overhead power lines.
- Make sure that the ladder is the proper length to do the job safely without having to stretch to reach an item, improvise or use the top two steps of a step ladder. Choose a ladder that is designed for how you intend to use it. For example, do not use step ladders in a folded and leaned position in place of a straight ladder.
- Choose a ladder that is capable of supporting your weight and the weight of any materials you will be using. See the table below.

| Type | Weight Rating | Duty Rating            |
|------|---------------|------------------------|
| 1-AA | 375 pounds    | Super Heavy Duty       |
| 1-A  | 300 pounds    | Extra Heavy Duty       |
| 1    | 250 pounds    | Heavy Duty Industrial  |
| 2    | 225 pounds    | Medium Duty Commercial |
| 3    | 200 pounds    | Light Duty Household   |

- Ladders must always be of sufficient length to reach the work being performed. Straight ladders must extend at least 3 feet above the surface staff is climbing to.
- Ladders must be placed firmly on the ground, be equipped with non-slip safety feet, and be kept free of grease and oil.
- Always use a wood or fiberglass ladder to perform electrical repairs.
- To keep a straight ladder from slipping or falling backwards while in use, maintain a 4 to 1 ratio of the ladder's height versus the distance the base of the ladder is away from the object being climbed.
- Folding ladders must always have the stabilizing bar locked when in use.
- Staff will not use the top two steps of a folding ladder or straddle the folding ladder.
- Ladders must not be tied together to make longer ladders or longer ladder sections.
- Staff must not use makeshift ladders of any kind.
- Staff using ladders near doorways must barricade the doorway so that the ladder being used isn't struck or knocked over and people on the ground are not struck from work objects above them. Staff using ladders may not carry objects or tools by hand up a ladder. Tool belts must be used, or tools must be lifted or hoisted to the person on the ladder.
- Only one person is allowed on a ladder at a time.
- Ladders and ladder rungs must be free of water, oil, grease, and other slipping hazards.
- When ascending or descending a ladder staff must face the ladder.
- Staff must not overreach or stretch to reach an item while on a ladder.

### Hand Tools

- Staff using hand tools must wear PPE appropriate for the task being performed.
- Always select the proper tool to perform a task.
- Examine all hand tools for cracks, splits, or defects before using them. Report any damage to the Supervisor immediately. Never use defective or damaged tools.
- Staff will not use axe-like tools on stone or concrete.
- When carrying knives or other sharp tools, staff will ensure these tools are properly closed or the blade is protected to guard against cuts and damage to the tool.
- Staff will not use a screwdriver to otherwise make punctures.

- **Always return tools to the proper place.**
- Never toss tools, hand them to another person.

### **Power Tools and Equipment**

- Use of power tools and equipment is restricted to staff who have documented safety training and instruction prior to using the equipment.
- Powered tools and equipment such as saws, mowers or any equipment that may pose a risk of injury to unprotected staff or guests through moving parts, noise, radiant/heat, ejected or flying objects etc. may not be used in the vicinity of unprotected staff, guests or the public.
- Electrical tools should always be grounded, and the cords inspected for damage such as cuts, splices, or broken prongs. Use ground fault circuit interrupter protection when around water.
- Staff will always carry tools by the handle, never by the cord or hose.
- Handle all power tools cords with care. Keep away from heat, oil and sharp edges.
- While using power tools, proceed with caution when others approach.
- Power tools must not be operated without guards or safety devices attached. DO NOT attempt to bypass guards or safety devices to work more comfortably or faster.
- When possible, use a clamp or a vice to allow both hands to operate the power tool.
- Avoid accidental starting of a power tool – do not touch the trigger of a pneumatic or electrical tool while it is connected to a power source.
- Keep all power tools sharp, clean, lubricated and in proper working order.
- Do not wear loose clothing, ties, or jewelry while operating power tools.
- Staff will make sure conditions for operating electric tools are safe. Electric power tools will not be used in areas where the cord or plug may meet standing water.
- Servicing or repairing of any machinery will be completed by authorized maintenance personnel only.

### **Fire Prevention**

- Smoking is prohibited in District facilities within 15 feet of all entrances and in all District vehicles. Smoking is also prohibited in all wooded areas of the Park District as well as within 100 feet of any soccer, baseball or football field, tennis court or basketball court. Flammable and combustible materials may not be stored within 36 inches of water heaters, boilers, space heaters, electrical transformers, or other potential sources of extreme heat or open flame.
- All flammable liquids must be stored in flammable material storage cabinets. Flammable liquids must not be stored with incompatible materials such as oxidizers or other corrosive materials.
- Fire extinguishers are provided throughout the district facilities, and display NFPA labeling denoting the type of fire it is suitable for extinguishing. Most fire extinguishers provided by the district are dry chemical or foam-based extinguishers suitable for extinguishing class A, B or C fires. Below is an explanation of the classes and types of fire that may occur in District facilities.



Class A fires are classified as ordinary combustibles. Fires in this classification usually have wood, paper, cloth, or other dry materials as fuel. Most class A fires can be extinguished by water.





Class B fires are classified as flammable liquid fires. Fires in this classification usually have grease, gasoline, oil or another flammable liquid as fuel. Class B fires cannot be effectively extinguished by water.



Class C fires are classified as electrically energized fires. These types of fires involve live electrically energized components. The use of water on this type of fire is ineffective and can lead to a risk of electric shock.

- Staff must know the locations of the fire extinguishers and emergency exits nearest the staff member's workstation.
- Fire extinguishers may not be blocked or obstructed from access.
- Fire extinguishers are to be used with fires in the beginning stages only. If a fire is growing, spreading or otherwise threatens to block an escape route, staff must evacuate the area immediately.
- Used fire extinguishers must be reported immediately to the Risk Manager for recharge or replacement.

## **Electrical Safety**

### **Use of a trained professional electrician**

The following types of situations should be handled by a trained professional electrician:

- Blown fuses or tripped breakers with an undeterminable cause:
- Work to be completed on live electric circuits or machinery where power cannot be blocked, isolated, or locked out
- Work to be completed on circuit panels
- Work to be completed to eliminate moisture in circuit panel or around electrical lines.
- Work to be completed on buried electrical cable
- Electrical work to be completed where the use of a mechanical lift is required
- Connection of electricity to a building or facility for the first time
- Running temporary electrical wiring for a special event or festival
- Electrical work during flood conditions or sump pump failure
- Staff performing electrician duties must have proof of current training on file with Human Resources equivalent to a trained professional electrician.

### **NFPA, OSHA and NEC requirements**

- All staff or contractors initiating electrical work at any District facilities will follow the National Consensus Standard for Electrical Safety in the Workplace, NFPA 70-E.
- Contractors, maintenance personnel and all other staff must follow rules established by NFPA 70E for approaching live exposed electrical equipment (arc blast boundary, limited approach boundary, restrict approach boundary and prohibited approach boundary).
- District staff must maintain OSHA established safe clearances from overhead electrical wires while performing any type of maintenance work. OSHA establishes a safe clearance of 10 feet away from electrical power lines carrying less than 50,000 volts. The safe clearance increases 4 inches for each 10,000 volts over 50,000.

- All new electrical work must be properly grounded to meet NEC requirements.
- A working clearance of 3 feet around breaker boxes and heating units must be maintained.

### **Electrical Cords**

- Electrical wires with defective plugs, insulation or cracked components must be discarded. It is not acceptable to repair electrical wiring with electrical tape or to remove the ground prong from an electrical plug.
- Extension cords must be used for their intended purpose. Staff must take care to avoid using indoor electrical extension cords for outdoor uses, running over electrical extension cords with vehicles or mobile equipment, and running electrical cords through doors, open windows, or wall openings.
- If extension cords are placed along the floor, do not run them under carpeting and secure them properly to avoid tripping.
- Electrical extension cords are for temporary use and are not allowed for use in lieu of permanent wiring. Extension cords must be properly rated for the job intended. All extension cords must also have UL rating.
- Do not use extension cords to plug in computers, space heaters or office equipment, to plug in permanent pieces of equipment (i.e., saw, grinder), or to provide electricity to a facility or area where electricity was not originally provided.

### **Electrical Circuits**

- When replacing fuses, be sure to use appropriate tools such as a fuse puller to avoid potential shocks and burns. Be sure to replace the fuse with a fuse of the same rating.
- If a circuit constantly trips or fuses continually blow out, this indicates a problem with the circuit. Notify the Risk Management and/or Superintendent of Parks and Facility Maintenance immediately. Do not attempt to bypass this problem with a makeshift fix.
- Facilities with ground fault circuit interrupters (GFCI) must have these devices tested monthly during the facility safety inspection.
- GFCI outlets or cords are required near all sinks, water faucets, or any other area where water is within 3 feet of an electrical outlet. GFCI must also be used when setting up outdoor special events, construction areas or work areas with wet conditions.
- Electrical circuits should not be overloaded.

### **Underground Electrical**

- If digging is required for a maintenance task, state law requires that the Joint Utility Location for Information for Excavators (J.U.L.I.E.) be contacted at least 48 hours in advance of the project. J.U.L.I.E. staff will visit the project location and mark the location of underground utilities.
- J.U.L.I.E. can be contacted at 800-892-0123

### **Miscellaneous**

- Refueling or transferring fuel to a gas must be done with the gas can sitting on the ground to avoid the buildup of static charge.
- Broken light fixtures and light bulbs must be replaced immediately. Florescent tube-type lighting fixtures should have a protective plastic tube around the florescent bulb if unprotected by a hard light cover.



### **Lock-out/Tag-out**

The district has established energy isolation or lock-out/tag-out requirements for the control of hazardous energy as required by the Illinois Department of Labor. These requirements cover the servicing and maintenance of machines and equipment in which the unexpected startup or release of hazardous energy could cause injury to staff members. If staff members are performing service or maintenance that do not expose them to the potential for the unexpected release of hazardous energy the Lock-out/Tag-out requirements do not apply.

For the purposes of lock-out tag-out there are six sources of hazardous energy that could be released by machines or equipment. These are electrical energy, hydraulic or pneumatic energy, chemical energy, thermal energy, mechanical potential energy, and gravitational energy. All of these potential energy sources must be identified by staff before beginning a service or maintenance project.

Only trained and authorized staff may engage in lock-out/tag-out procedures or service/maintenance projects that require lock-out/tag-out.

Staff that are performing maintenance, service or repair on machines or equipment that require lock-out/tag-out must at a minimum follow the general eight step lock-out procedure listed below. Steps must be followed in the order shown.

1. Identify the machine or equipment that requires lock-out, the reason for the lock-out and any related equipment or machinery that will be affected when the machine or equipment is taken out of service by lock-out or tag-out.
2. Notify all affected staff that a lock-out/tag-out procedure will be taking place in their area.
3. Shut the machine or equipment down using normal stopping procedures.
4. Disconnect, neutralize, or otherwise isolate the hazardous energy sources.
5. Apply lock-out and tag-out devices in the appropriate areas.
6. Test the effectiveness of the lock-out/tag-out procedure by trying to activate the equipment or machine while in a locked-out state.
7. Perform the required service, repair, or maintenance.
8. Restore the machine, equipment, or system back to service.

### **Special Situations**

- For information on special lock-out situations such as a lock-out involving multiple people, shift changes, on-site contractors or emergency lock-out removal please see the Lock-Out Tag-out program posted on the District's Common drive.

### **Confined Space**

- District facilities contain spaces that are considered to be "confined" because their configurations hinder the activities of any staff that must enter, work in, and exit from them. In many instances, staff that work in confined spaces also face increased risk of exposure to serious physical injury from hazards such as entrapment, engulfment, and hazardous atmospheric conditions. Because of these increased working hazards the District has established a procedure for entry into confined spaces and permit required confined spaces.



- A confined space has limited or restricted means of entry or exit, is large enough for an employee to enter and perform assigned work and is not designed for continuous occupancy by the employee.
- A permit-required confined space is one that meets the definition of a confined space and has one or more of these characteristics:
  - Contains or has the potential to contain a hazardous atmosphere,
  - Contains a material that has the potential for engulfing the entrant,
  - Has an internal configuration that might cause an entrant to be trapped or asphyxiated by inwardly converging walls or by a floor that slopes downward and tapers to a smaller cross section, and/or
  - Contains any other recognized serious safety or health hazards.

### **Office Safety**

- Staff could be exposed to many different hazards throughout the workday that can cause serious injury. The following is a listing of basic District rules and regulations.

### **Safety Maintenance**

- Staff shall be responsible for keeping the immediate work area clean and orderly. Good housekeeping practices are very important in maintaining a safe office environment.
- Furniture (tables, desks, chairs, & cabinets) should be maintained in good condition and be free of sharp corners, projecting edges, wobbly legs, etc. Desk drawers and cabinet doors will be always closed when not in use.
- Report any loose or rough floor covering that could cause tripping injuries.
- Office staff should not attempt to make electrical or mechanical repairs.
- Never use rubber-based glues, markers, or typewriter cleaning fluids near heat or flames. Use these materials in well-ventilated areas to avoid inhalation of fumes that can cause dizziness and headaches.

### **Sharp or Pointed Objects**

- Never keep letter openers, scissors, or sharp, pointed objects in shirt pockets or stored upright in drawers. Always carry objects with the pointed portions away from the body.
- Always operate paper cutters and shredders with extreme caution, keeping hands and fingers away from the cutting area. Keep paper cutters closed and locked when not in use.

### **Desks and Chairs**

- File cabinets must be loaded so that they are not top heavy and prone to tipping over.
- Never use a chair, desk, or any other office furniture as a makeshift ladder. If reaching raised material is necessary, use a stepladder if accessible.
- Never tilt a chair back on two legs. Before sitting down, always be sure the chair is there.
- Immediately tag and remove all broken chairs from use.
- Always adjust the workstation to a comfortable setting including computer screen height and brightness, chair and desk height, keyboard position, etc. If assistance is needed in adjusting the workstation, contact the Risk Manager.

## **11. Park and Field Safety**

### **Playground Safety**

In addition to weekly inspections by the Parks Department, it is important that all staff who supervise children on playgrounds as part of District programming take a few moments to observe play equipment for potential hazards to children. The National Playground Safety Institute has identified some of the leading causes of injury on playgrounds. Below are a few of the leading causes most appropriate for recreation program staff to monitor play equipment for.

#### **Improper Protective Surfacing**

- The surface or ground under and around the playground equipment should be soft enough to cushion a fall. Acceptable surfaces are hardwood fiber/mulch, sand, and pea gravel. These surfaces must be maintained at a depth of twelve inches, be free of standing water and debris, and not be allowed to become compacted. Synthetic or rubber tiles and mats are also appropriate for use under play equipment. Staff should observe the playground and report areas where protective surfacing is compacted, worn, damaged or missing.
- Protrusion & Entanglement Hazards: Examples of protrusion and entanglement hazards include bolt ends that extend more than two threads beyond the face of the nut, hardware configurations that form a hook or leave a gap or space between components and open "S" type hooks. Rungs or handholds that protrude outward from a support structure may be capable of penetrating the eye socket. Special attention should be paid to the area at the top of slides and sliding devices. Ropes should be anchored securely at both ends and not be capable of forming a loop or a noose.
- Trip Hazards: Trip hazards are created by play structure components or items on the playground. Exposed concrete footings, abrupt changes in surface elevations, containment borders, tree roots, tree stumps and rocks are all common trip hazards that are often found in a play environment.
- Lack of Maintenance: There should be no missing, broken, or worn-out components. All hardware should be secure. The wood, metal, or plastic should not show signs of fatigue or deterioration. All parts should be stable with no apparent signs of loosening. The surface material must also be maintained. Check and report signs of vandalism.
- Pinch, Crush Shearing, and Sharp Edge Hazards: Components in the play environment should be inspected to make sure there are no sharp edges or points that could cut skin. Moving components such as suspension bridges, track rides, merry-go-rounds, see-saws, and some swings should be checked to make sure that there are no moving parts or mechanisms that might crush or pinch a child's finger.

#### **Pool Safety**

- Safety and Health practices and daily operations for Harrer and Oriole pools must follow rules and guidelines set in the District's Aquatics Staff Manual, the PDRMA Aquatic Safety Guidelines Manual and the IDPH Illinois Swimming Pool Code.

The Illinois Swimming Pool Code can be found online:

<http://www.ilga.gov/commission/jcar/admincode/077/07700820sections.html>



## 12. Fall Protection

### Preventing Slips Trips and Falls

- Slips, trips, and falls account for 15% of all accidental deaths, second only to automobile fatalities. There are some simple actions staff can take to minimize the risk of slip trip and fall injuries to staff and guests.

### Slips

- When walking on wet surfaces, shorten your stride, walk with feet pointed out slightly, and make wider turns.
- Clean up spills immediately. If you are unfamiliar with the contents or how to safely contain or clean up a spill, contact the Human Resources & Risk Manager.
- In wet or snowy conditions walk more slowly so you can react to traction changes. Wear slip resistant shoes or boots and dry off shoes as soon as practical after entering a building (wet shoes on dry floors are as dangerous as dry shoes on wet floors). Wear sunglasses on sunny winter days so you can more easily see slippery areas.
- Wear the proper footwear for the job or task you must complete. If you must walk in slippery areas or areas that could be wet or icy, wear footwear that is relatively slip resistant. If you must walk in areas that may be uneven or have trip hazards use footwear that is comfortable, easy to walk in and provides good stability and ankle support.

### Trips

- Do not allow carried packages to obstruct your view or allow awkward carried packages to affect your balance as you are walking.
- Avoid walkways that have obstructions, tripping hazards, or broken pavement. Pay attention to changes in walkway elevation (i.e., stairs, thresholds, etc.).
- Close desk and file drawers when not in use.
- Report burned out or missing lights.
- Report any uneven or broken pavement, sidewalks, or handrails.

### Falls

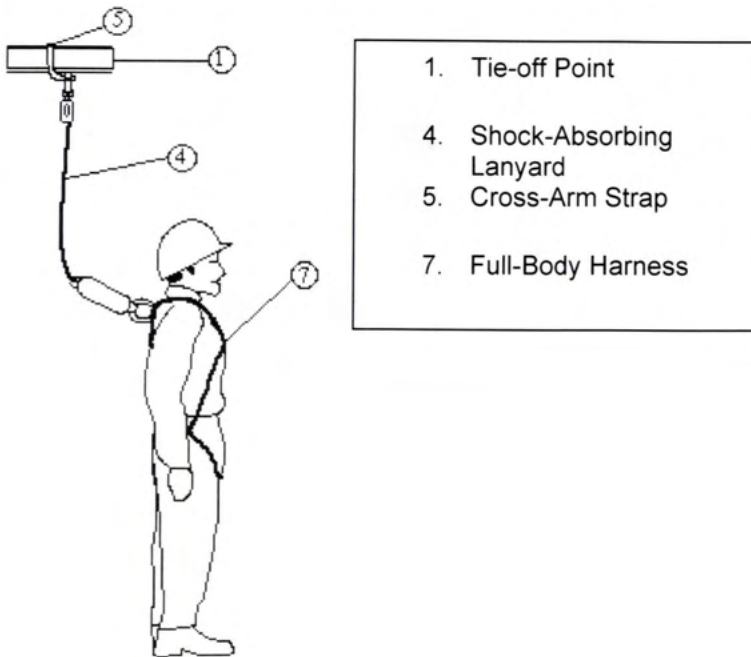
- NEVER stand on a chair or other object to reach a high object. Always use a ladder or step stool.
- Exercise caution on stairs; do not skip steps and never jump from the last step.
- Use handrails.
- Do not run.
- Report any unsafe conditions.

### Preventing Falls from Height

- Staff members working at heights over four feet where no guard rails are provided to protect against falls must use a personal fall arrest device while working. Additionally, staff members working on scaffolding, indoor or outdoor personnel lifts must wear a personal fall arrest device.
- Prior to assigning staff to work a task or job that has an unprotected fall hazard or requires the use of scaffolding or personnel lifts, Supervisory staff will hold a 5–10-minute meeting with staff assigned to the task to accomplish the following:
- Ensure that staff understands that a personal fall arrest system must be used when performing the job.
- Ensure the staff understands the type of personal fall arrest equipment needed and how to use it.



- Ensure that staff has read and understands the fall control procedures and any additional PPE that must be worn while completing the job.
- A personal fall arrest system consists of a fall protection harness and lanyard with appropriate D rings and tie off points as illustrated on the next page.



- Staff using personnel lifts must work in pairs. One staff member must perform the work while riding the lift. The second staff member must attend to the lift on the ground in case of a fall or equipment malfunction.
- Staff is prohibited from riding in the lift buckets of end loaders or other mobile equipment with such capability.
- Personal fall arrest systems must be inspected prior to use. Fall harnesses and lanyards must be replaced if they have any of the following characteristics:
  - Equipment has been involved in a prior fall incident.
  - Equipment has rips, tears, or significant discoloration.
  - Equipment shows signs of burn or pock marks from open flame or welding operations.
  - Equipment has broken or loose hardware and buckles.

### 13. Vehicle Operator Safety

The District's Vehicle Operator Safety Program includes all rules and regulations for staff operating Motor Vehicles, Powered Industrial Trucks and all other vehicles while performing work related duties for the district. All operators of District owned vehicles are subject to the rules and regulations of the type of vehicle operated as well as the general rules and requirements of the Vehicle Operation Safety Program. A few important elements of this safety program are listed below.

## Vehicle Check-In/Check-Out Procedure

**Vehicle Check Out:** Only staff on the authorized vehicle operator list for Park District vans are allowed to check out a Park District van from the PVCC. Please remember, Park District vehicles are for Park District business only. Use of Park District vans or vehicles on personal business is prohibited.

- Step#1: Pick up keys from PVCC. You must sign the vehicle in and out.
- Step #2: Complete a Vehicle Inspection Checklist prior to departing with the vehicle. Any safety concerns must be addressed before departing with the vehicle.

**Vehicle Check In:** Be sure to return the vehicle on time. Return the vehicle with the interior in a clean condition; clean up any mess you make in the vehicle. The vehicle must also be gassed up. Please be considerate of other users. Do not return the vehicle almost out of gas.

- Step #1: Park the vehicle in its designated spot. Remove all personal items from the vehicle. Be sure the vehicle is locked.
- Step #2: Turn in keys in PVCC.

## General Vehicle Operator Requirements

- Staff must immediately notify their immediate supervisor of any traffic citations, arrests or accidents resulting in a police report whether using an agency vehicle or their personal vehicle. Immediate notification requires that notice be given on the day of the occurrence or if during normal non-working hours, day off etc., on the next day worked.
- No staff member may use or be under the influence of alcohol or illegal drugs and/or possess or transport alcohol or illegal drugs while operating a Park District vehicle.
- If staff is currently prescribed medicine that may affect alertness and ability to operate vehicles or machinery the operator is prohibited from being under the influence of or using these prescription medications during working hours that require them to operate vehicles or machinery.
- All operators of vehicles equip with seatbelts may only operate the vehicle when properly wearing a seatbelt. All passengers of motor vehicles must also be properly wearing seatbelts before the vehicle is in motion.
- The use of a cell phone by the operator of a vehicle is prohibited when the vehicle is in motion or in any way considered to be in traffic. Hands free devices for cell phones **do not** exempt vehicle operators from this requirement. Similarly, the operator of a vehicle may not send or receive text messages or email from a cell phone or any other portable electronic device while the vehicle is in motion or in any way considered to be in traffic.
- If children under the age of 8 are transported in a Park District van, or minivan, they must be seated using a child restraint system. Further, children under the age of 8 may not ride in the front seat of any agency vehicle.
- Staff may not use District vehicles for any personal purpose. District vehicles are designated for District business purposes only. Similarly, District vehicles, except for golf carts, may not be operated by anyone other than District staff.
- Loading of passengers into a District vehicle will be done from the curb side only. No one may enter a District vehicle from the street side of the vehicle except the operator of the vehicle.
- Operators of District vehicles that transport guests must be at least 21 years of age.



## **Regulated Commercial Vehicle Operator Requirements**

In addition to the General Vehicle Operator Requirements, Operators of Regulated Commercial Motor Vehicles must abide by the requirements of the State of Illinois. Please note the differences in driver licensing requirements and drug/alcohol use regulations.

- All drivers of Commercial Motor Vehicles for the Morton Grove Park District must be at least 21 years old.
- All operators of Regulated Commercial Motor Vehicles must submit to periodic DOT regulated fitness for duty physicals and random drug/alcohol testing.
- All newly hired staff who will be Commercial Motor Vehicle drivers must have submitted an application that states his/her name, social security number, and the identification number, class and state issuing the Commercial Driver's License. This information must be maintained on record for at least 3 years after the driver's employment with the Morton Grove Park District has terminated.
- All Drivers of Commercial Motor Vehicles for the Morton Grove Park District must have the proper classification of CDL required to operate a Regulated Commercial Motor Vehicle of the type and classification he/she is required to operate. The license presented must be current and not in revoked, expired, or suspended status and the Driver must only possess a license from one state.
- All Drivers of Commercial Motor Vehicles for the Morton Grove Park District must be able to read and speak the English language well enough to be able to read road signs, converse with the public, respond to official inquiries and make entries on reports and records.
- A driver who receives notice that his/her license has been revoked, suspended, or otherwise withdrawn must notify the Morton Grove Park District of the contents of the notice before the end of the business day following the receipt of the notice.
- No driver will operate a commercial motor vehicle while his or her ability or alertness is impaired, likely to become impaired because of illness, fatigue, or any other cause to make it unsafe to begin or continue to operate the vehicle.
- No driver of a commercial vehicle shall be on duty and possess or be under the influence of the following drugs or other substances unless under the instructions of a licensed medical practitioner who has advised the driver and the employer in signed correspondence that the substance will not impair the driver's ability to operate the commercial motor vehicle safely.
- Schedule I substances as indicated in chapter 21 of the Code of Federal Regulations part 1308.11. The list of banned substances in this chapter can be found attached to the appendix of this program.
- Any amphetamine or amphetamine derivative (i.e., "pep" pills, "bennies" etc.)
- Any narcotic drug or narcotic derivative, or any other substance to a degree that renders the driver incapable of safely operating the commercial vehicle.
- No driver of a commercial motor vehicle will have in his or her possession or use a radar detecting device while in operation of a commercial motor vehicle.

## **General Vehicle Operator Safety Rules**

- No vehicle shall be driven up to anyone standing in front of a fixed object.
- No vehicle shall be driven directly up to a fixed object such as a wall, picnic bench, tree etc.
- Vehicle Operators will follow the rules and laws of public roadways when operating vehicles on public roadways.



- Arms or legs are prohibited from being or outside the cab/passenger area of the vehicle while the vehicle is in motion.
- When left unattended all controls for the vehicle will be in the off position and gears set in the park (or neutral) position and emergency brakes will be set. Keys will be taken from the vehicle if the operator will be more than 25 feet away from the vehicle or the vehicle or its passengers are out of sight of the operator.
- Vehicle Operators will yield the right of way to pedestrians, fire trucks, ambulances, police cars or any other emergency vehicles.
- Vehicle Operators are required to look in the direction of travel (forward or reverse) and keep a clear view of the path of travel while traveling in either direction. If view of the path of travel becomes blocked, the Vehicle operator must immediately stop the vehicle and wait for the blockage to be cleared before continuing.
- Horseplay including stunt driving and drag racing are strictly prohibited.
- A pre-trip inspection must be thoroughly completed by the Vehicle Operator before operating the vehicle. All instructions on the inspection form must be followed.
- Headlights, running lights or work lights on vehicles must be turned on in darkness and/or low light/ low visibility situations. When weather is poor, all headlights, work lights or running lights must be turned on when the vehicle is in operation or in the public roadway.
- Vehicle Operators must avoid always running over loose objects in the path of travel, except when avoiding the loose object would cause the operator to swerve into another lane of traffic or turn abruptly.
- Vehicle drivers must always look ahead in the path of travel and plan for loose objects in the path of travel.
- Vehicle Operators must reduce speed to a safe level when negotiating turns and turn the steering wheel in the smooth sweeping motion. Except when at very low speed, the steering wheel will be turned at a moderate even rate.
- Upon encountering a pedestrian on a park pathway vehicle operators must slow down below 10 miles per hour, pull to the right-hand side and off the pathway where possible.
- Vehicle Operators will be required to slow down below posted local speed limits and the Morton Grove Park District speed limit during poor weather or roadway conditions.
- Vehicle Operators will be required to avoid operation of any Park District vehicle if using prescription or over the counter medication that will affect the ability to operate a vehicle.
- Vehicle Operators will be required to always conform to the principles of defensive driving/operation.
- Vehicle Operators will be required to adhere to the specific safety rules pertaining to their vehicles as well as any safety rules for specific operations such as loading or unloading, parking, or fueling.

#### **14. RECREATION SAFETY**

##### **Abuse and Neglected Child Reporting Act**

The district is required to report to the child abuse hotline whenever there is reasonable belief that a child is being abused or neglected. The hotline operates 24 hours per day, 7 days per week, 365 days per year. If any type of child abuse is suspected, notify the immediate Supervisor or the Executive Director.

### **Child Care Safety Rules**

- Staff are not allowed to administer medication unless the parent has notified the district office of medication needs and has signed the Medication Dispensing Information form.
- Do not allow any children to leave the boundaries of the Program. Be aware of any strangers in the parks. Do not allow children to live with anyone but a parent, or previously approved guardian.
- Staff are not allowed to hit or spank any participant in the Program. Appropriate discipline procedures should be followed as outlined in the camp staff manual.
- Staff should not assist any child in the bathroom facilities.
- If a stray dog should enter park district property, phone the Park Patrol immediately. Do not approach the dog or allow any of the children near the dog.
- On days where the heat index is 90 degrees or above, periodic breaks (every 30 min. to 1 hr.) should be taken to drink plenty of fluids.
- Keep any hazardous chemicals or dangerous objects away from the reach of children.
- Do not leave personal bags or purses where children can have easy access.
- Keep all sharp objects (scissors, letter openers, etc.) out of reach of children.
- When leaving the district building for outside activities, bring a first aid kit and a park district cell phone. Staff is responsible for refilling the kit as needed.
- Counselors/teachers must have emergency information on each participant when they leave the district building.

### **Playground Safety Rules**

- A playground Supervisor may be considered a Day Camp Counselor, Preschool Teacher, or any individual that acts as an overseer of children participating in or using District playground equipment.
- All playground Supervisors should be trained in basic first aid & CPR.
- A playground Supervisor must be located on any playground used by children participating in District programs.
- Do not permit too many children to play on a single piece of equipment. Observe play patterns to identify any unsafe behaviors.
- Do not roughhouse or play tag on or near any playground equipment. No objects carried in hands are allowed when on any apparatus.
- Never allow vehicles, mowers, or other mobile equipment in proximity to playing children.

### **Rings/Monkey Bars**

- Equipment is to be used for hanging or traveling, not for gymnastic stunts.
- One person should travel at least halfway before the second one begins. Only one person should stand on any approach landing.
- Drop from rings onto an approved surface only. Do not swing out over a hard surface and drop.

### **Climbing Apparatus**

- Never hang by the knees, stand on top, or jump from the apparatus.
- Keep both hands in contact with the apparatus when climbing or descending.
- Do not play below any climbing apparatus.



### **Slides**

- Climb one step at a time, one person at a time.
- Do not climb up the slide chute.
- Slide down in a sitting position, feet forward.

### **Swings**

- One individual per swing in a seated position.
- Do not run behind or in front of swings in motion.
- Do not jump from the swings.

### **Bats and Balls**

- Bats may be swung in approved areas only. Do not throw bats.
- Do not climb the baseball backstops.
- Basketball and Volleyballs are not to be kicked.

## **15. Other Safety Topics**

### **Personal Protective Equipment**

The Occupational Health and Safety Administration and the Illinois Department of Labor require District staff that work with any hazard that could cause injury to the hands, feet, head, face, eyes, ears, skin, or respiratory system to wear appropriate PPE.

All positions of employment and foreseeable work tasks have been analyzed for such safety hazards using a PPE hazard assessment. The PPE hazard assessment is used by the Risk Manager and Supervisors in determining required PPE for staff performing certain tasks or in specific jobs throughout the district. Supervisors will inform staff of the specific types of PPE required on their positions before staff completes new hire orientation.

If assigned a specific task, staff will be informed by Supervisors of the appropriate PPE to be used before the task is started. In all cases, staff is responsible for wearing required PPE. For more information the program, see the Risk Manager or a Supervisor.

### **Hearing Conservation**

To protect staff from noise induced hearing loss, the district has implemented a Hearing Conservation program. The program consists of three main parts, monitoring for potentially harmful noise exposures, protecting against potentially harmful noise exposures, and monitoring staff that is exposed to potentially harmful noise exposures.

### **Noise Monitoring Results**

All District work locations and equipment with a potential for a high level of noise exposure are monitored every three years for a potentially harmful level of noise exposure (85 decibels and above). Staff must wear hearing protection when using equipment from the list below:

- Sod Cutter
- Workman utility cart
- Reel mowers



- Bobcat Mobile Equipment/End loaders
- Park Maintenance Tractors
- Weed whackers
- Rotor Tillers
- Chipper/Shredder
- Leaf Blowers
- Portable Air Compressors
- Chainsaws
- Brush Mower
- Hedge Trimmer
- Disc Saws

**Protecting against harmful noise exposures**

Staff using equipment or working around equipment with harmful noise exposures must wear approved hearing protection.

**Monitoring staff exposed to harmful noise levels**

Staff exposed to a time weighted average of 85 decibels or above will be given an audiometric test by a qualified physician to judge the effect of excessive noise on such staff members. To see if staff qualifies for this program, please see the Risk Manager.

**C. Respiratory Protection**

Staff are exposed to harmful dusts, fogs, fumes, mists, gases, smokes, sprays, and vapors during work operations may require the use of a respiratory protection device. Staff must consult the Material Safety Data Sheet (“SDS”) of each chemical substance used for respiratory protection requirements if:

- The substance used is toxic
- The substance is used in a confined space
- The substance is used in an area with little or no ventilation.

Staff is responsible for following all applicable safety guidelines and rules contained in the SDS regarding respiratory protection as well as instructions given by Supervisory staff and/or the Risk Manager regarding the use of respiratory protection.

The district provides two types of respiratory protection to staff, dust masks and air purifying respirators. The following general rules apply to the use of these respiratory protection devices.

- Staff will be trained in the proper use of respiratory protection devices including applicability of each device before use is permitted.
- Staff must complete and pass a medical evaluation conducted by a physician of the district’s choosing before certain use of a respiratory protection device is permitted.
- Staff will complete fit testing and fit check procedures for a specific respirator conducted by the Risk Manager before use of a respiratory protection device is permitted.
- Staff will return all used respirators to the Risk Manager after use for disposal, sanitation, and storage.

## **Blood borne Pathogens**

The district's primary objective in developing an HIV/HBV/AIDS/Infectious Diseases program is to minimize the district employees' exposure to HIV, HBV, and other infectious diseases.

The district educates employees to reduce the risk of exposure to a blood borne pathogen. The Blood borne Pathogen's material covers:

- Explanation of the Human Immunodeficiency Virus (HIV), the Hepatitis B (HBV), AIDS and other infectious disease risks in the district environment.
- Description of how HIV, HBS, AIDS and other infectious diseases are contracted and spread.
- Explanation of safety precautions, universal precautions and procedures designed to minimize the risks.
- Explanation of the appropriate actions to take after contact with another person's blood and/or other bodily fluids.
- Ongoing monitoring of medical and legal information and updating of information as appropriate.

## **Training**

- Required for all new employees.
- Provided by the District at no cost to the employees during regular working hours.
- Reviewed annually for designated first responders.
- An accessible copy of the Illinois Department of Labor's regulations relating to Blood borne Pathogens is in Human Resources.

## **If performing CPR or First Aid**

- All body fluids (blood, saliva, secretions from open sores or wounds, and other body wastes) must be contacted only while wearing latex exam gloves.
- All CPR/Automated External Defibrillator ("AED") and first aid care must be given while wearing latex exam gloves.
- CPR will always be given using a CPR barrier shield.
- Dispose of contaminated bandages, gloves, and barrier devices in a red biohazard bag. Seal the bag and place it in the nearest trash receptacle. Do not place sharp objects in the biohazard bags.
- Wash hands with soap and water for at least 15-30 seconds after removal of gloves.

## **If cleaning up spilled bodily fluids**

- All body fluids (blood, saliva, secretions from open sores or wounds, and other body wastes) must be contacted only while wearing latex exam gloves.
- Thoroughly clean up blood and bodily fluids. Absorbent toweling, cloths, and/or powders may be used. Never pick up broken glass with hands.
- All toweling, cloths and contaminated items must be disposed of in a red biohazard bag. Broken glass and other contaminated sharp objects must be kept in a sharp's container.
- Disinfect the area of the spill. Clean spill areas with a solution of 1 part bleach to 10 parts waters.
- Dispose of contaminated items, including gloves in a red biohazard bag. Seal the bag and place in the nearest trash receptacle. Do not place sharp objects in the biohazard bags.
- Hands must be washed with soap and water for at least 15-30 seconds after removal of gloves.



### **Hazard Communication-SDS**

The Illinois Toxic Substance Disclosure to Employees Act (P.A. 38-240) and the Hazard Communication Standard (29 CFR 1910.1200) are both laws that give agency employees in Illinois a right to know about the hazardous materials in the workplace.

The district has developed a comprehensive Hazard Communication (“Hazcom”) Program to ensure that information on the hazards of chemicals used in our operations is communicated to our employees. The program is intended to meet all requirements of the above regulations.

The Right-to-Know Law requires the district to train employees about the health and safety hazards of the chemicals in the workplace. A “hazardous chemical” is any chemical which can be a physical or health hazard. A few examples of “hazardous chemicals” used in the district’s operations include pool chemicals, custodial supplies, fuels, paints, pesticides, automotive products, compressed gases, and fertilizers.

### **Safety Data Sheets**

SDS is documents that explain the chemical components and hazards that staff members are exposed to while performing jobs. SDS contains the following safety information about the chemicals staff work with or are exposed to:

- Identity of Material and Manufacturer
- Hazardous Ingredients
- Physical and Chemical Characteristics
- Fire and Explosion Hazard Data
- Reactivity Data
- Health Hazard Data (Limits, Symptoms, etc.)
- Precautions for Safe Handling
- Control Measures and first aid

Staff are responsible for following the safe handling procedures contained in the chemical’s SDS and being familiar with possible physical effects of the chemical and first aid procedures when using any hazardous chemical.

### **Chemical Labeling**

All chemical containers must be properly labeled as to the contents of the container. Proper labeling may consist of manufacturer labeling, or Hazardous Material Identification System (“HMIS”) labeling.

Containers that do not have manufacturer labeling must have HMIS labeling. If staff encounters unlabeled chemical containers, contact the Risk Manager immediately.

For more information on the Hazard Communication Program, Safety Data Sheets, or chemical container labeling, please consult the nearest Right to Know station.

### **Facility Medical Emergency Protocol**

- The information provided in this section is a basic outline of Facility Medical Emergency Response and CPR/AED protocol.



- Activate the Emergency Response Procedure for the facility. Facility Medical Emergency Response Procedures for individual District facilities can be found on the District's Common drive.
- Staff designated as a facility first responder, must respond to the scene of the emergency immediately. First responders must bring latex exam gloves, a CPR barrier mask, first aid kit and AED (if available).
- Begin CPR/AED protocol as necessary.
- Assess scene safety.
- Assess responsiveness. Tap shoulder and shout "Are you OK? I am a trained CPR responder, and I can help." If the victim is unresponsive be sure emergency services has been called (dial 9-911 form any District phone).
- Perform Initial Assessment:

**MORTON GROVE PARK DISTRICT**

**STAFF ACKNOWLEDGMENT**

I, the undersigned staff member, acknowledge receiving a copy of the Morton Grove Park District's ("District") Staff Safety and Risk Management Manual ("Manual").

I acknowledge my responsibility to abide by the safety rules and guidelines in this Manual.

I understand and agree that the primary reason I am accountable for this information is the safety and wellbeing of me, coworkers, and guests of the district.

I further understand that violations of the rules and guidelines contained in this Manual may subject me to disciplinary action as outlined in the Personnel Policy Manual. Accordingly, I recognize that no portion of this Manual establishes a contractual obligation on my behalf or on the part of the district.

I understand that this Manual may be updated with the Board of Commissioners approval and that staff will be notified in writing of any such changes.

\_\_\_\_\_  
Employee Name (Printed)

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

# **Crisis Management Plan Morton Grove Park District**

September 2023



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## Crisis Management Plan

### What Is a Crisis?

A crisis is a situation or event that causes – or has the potential to cause – intense public or media focus such as an accidental drowning, serious injury, allegations of child abuse, severe vehicle accident, or criminal act. Any incident, minor or grave, that attracts significant public/media interest and scrutiny will impact the nature and scope of a crisis event.

### Chain of Responsibility

It is critical for employees to understand their respective roles in the event of a crisis. This includes immediately implementing the agency's emergency response plan and reporting any potential or actual crisis situation to the Agency Director or Crisis Team Leader.

The Morton Grove Park District has appointed **Executive Director as the Crisis Team Leader**. This person, in conjunction with agency management, activates the Crisis Management Plan and coordinates the crisis response. If the Agency Director or Crisis Team Leader is not available, immediately report any event to the Department Head. Do not report a crisis situation via voice mail, text, social media or email as time may be of the essence, and you should communicate directly to an authorized person about a potential crisis situation. **CRISIS TEAM LEADER: Jeffery Wait: 224-355-4069**

In the event the Crisis Team Leader or Executive Director is unavailable, identify the next available person from the list below (starting from the top) to activate and manage the crisis plan. That staff member is responsible for implementing the agency's Crisis Management Plan and notifying all Crisis Team members. The Crisis Team is then responsible for decision making during the crisis including fact gathering, notification of key persons/agencies, operational decisions, public relations and media response.

The following is the list of alternate **Crisis Team Leaders**:

1. Marty O'Brien: 847-774-0207 or mobrien@mgparks.com
2. Keith Gorczyca: 847-815-2837 or kgorczyca@mgparks.com
3. Sue Braubach: 847-710-3074 or sbraubach@mgroveparks.com
4. Michelle Trevino: 847-704-0847 or mtrevino@mgparks.com

There also is a chain of responsibility for the role of spokesperson. The Spokesperson, Executive Director, is responsible for making official statements (written or oral) to the media on behalf of the Crisis Team and agency and coordinating the dissemination of public information via social media and the agency website. All those listed as potential Spokespersons should review their duties on a periodic basis to ensure they are prepared in the event of an actual crisis. Staff members should direct all media inquiries to the Executive Director.

**Note: No formal media or public statement of any kind should be made until PDRMA legal counsel has reviewed and approved those statements.**

The following is a list of alternate agency Spokespersons:

1. Michelle Trevino

### **Legal Considerations for PDRMA Members**

After any serious incident, PDRMA members have to manage a wide variety of issues, demands and distractions – simultaneously pulling them in many directions. However, one of the most important actions to complete during the initial crisis-response period is to **CALL PDRMA IMMEDIATELY** (regardless of the time or day) and to contact the agency’s corporate counsel! Time is of the essence, and it may be critical to consult with legal counsel and PDRMA staff early in the crisis to establish attorney/client privilege and protect the investigation. PDRMA risk management claims and legal staff are part of your team and are ready to provide guidance.

During non-working hours, an emergency service answers calls to PDRMA and immediately contacts appropriate PDRMA staff. Members should also immediately contact their corporate counsel for additional legal input and to serve as legal liaison to the members’ board. **To reach PDRMA, simply call 630-769-0332, 24 hours a day, 365 days a year.**

During a crisis, PDRMA provides members with helpful instructions about how to:

- Communicate and cooperate with a police or other agency investigation.
- Maximize and protect the confidentiality of any internal investigation by coordinating with PDRMA legal counsel.
- Respond to the victim’s family, members of the public, the media and other third parties.
- Provide customized legal and risk management services to mitigate the incident.

### **Protect the Investigation – Get Legal Counsel Involved Immediately**

It is critical that the member agency does not accept or assume responsibility and/or liability for any incident *before all facts are fully known and confirmed* **and without PDRMA’s guidance.**

There is a delicate balance between acknowledging the seriousness of the incident and being accountable to your community, and making unnecessary (and often incorrect) admissions of liability and/or responsibility



In the age of instant communication and immediate media involvement, which may or may not be reporting accurate information, it is challenging to exercise restraint and caution. However, while it might be difficult to withhold comment, PDRMA’s legal counsel must be part of the investigative process, public response, and overall coordination of communication for any serious incident (both internal and external). PDRMA’s role is to establish, maintain and protect confidentiality and attorney-client privilege, as well as to help members avoid making comments and statements that may unnecessarily expose their agency to potential liability and/or unfounded public scrutiny.

“Attorney-client privilege” is a legal rule that protects certain communications between a client (i.e., a PDRMA agency/employee) and attorney and keeps those communications privileged and confidential. By assuring confidentiality, clients can make *full and frank* disclosures to their attorney, who can better provide candid advice and effective representation. However, communications that do not fall within the scope of attorney-client privilege are often subject to public disclosure via the Freedom of Information Act (FOIA), subpoena and discovery in litigation, or through third parties such as law enforcement and other official investigative agencies. Those unprotected communications sometimes contain inaccurate information, incomplete information and/or admissions that others can and will use against the member in a court of law and the court of public opinion.

**Remember,** you can only give a statement with absolute confidentiality to PDRMA’s legal counsel (or your corporate counsel). This includes written statements prepared by staff witnesses and third-party accounts documented and prepared by member staff. Members should consult with PDRMA’s legal counsel **before** requesting or preparing substantive written statements or incident/loss reports, or before contemplating any disciplinary action against staff. This does not include compiling a list of witnesses and/or potential witnesses that includes personal and professional contact information.

**Morton Grove Park District should take the following steps immediately after a crisis:**

1. Initiate the Crisis team.
2. Contact PDRMA at 630-769-0332.
3. Consult with PDRMA’s legal counsel and/or the agency’s corporate counsel before giving any statement, requesting a written statement, preparing a written statement, preparing any report – or forwarding substantive text messages, tweets or emails about the incident.

Morton Grove Park District should obtain legal counsel *prior to* cooperating with investigating law enforcement or other official agencies. It is crucial for members to consult with PDRMA's legal counsel *before* providing any statement to law enforcement agencies or other official investigating agencies such as OSHA, IEPA or the Department of Public Health.

Cooperation with an official third-party investigation and consulting with a PDRMA attorney is not inconsistent or mutually exclusive. For example, if a law enforcement investigator asks, "Why do you need a lawyer?" you simply say: "The Agency wants to provide its full cooperation but also wants to protect its legal rights." Keep in mind that investigative reports and/or statements taken by investigating police or other official investigator(s) are often subject to public disclosure under FOIA laws.

Third parties such as the local media, personal injury attorneys and potential claimants may also be able to obtain business text messages, tweets, blog entries, Facebook postings and emails among staff via FOIA requests, records subpoenas and/or written discovery requests in a subsequent lawsuit. For the same reasons you avoid creating a damaging "paper trail," you should not create an equally damaging electronic trail with texts, email messages or social media among staff. There is no such thing as a "private" message among agency staff.

Prepare a preliminary Accident/Incident Report using PDRMA's Accident/Incident Report Form and *not* your agency's internal accident/incident form. When completing the PDRMA Accident/Incident Report Form, always provide a brief, objective and factual account of the incident without any personal opinions as to fault or other unknowns.

PDRMA's standard claims reporting forms contain specific language designed to establish and protect the confidentiality of the report through attorney-client privilege. Never release this report to any third party (including investigating police) without first consulting PDRMA's legal counsel and obtaining authorization from PDRMA. Any written account or description of the incident or supplemental written (including electronic) communication or report pertaining to the incident should have the following language at the top of the document:

***THIS DOCUMENT IS AN ATTORNEY-CLIENT PRIVILEGED COMMUNICATION  
PREPARED FOR, AND AT THE REQUEST OF, PDRMA'S LEGAL COUNSEL.***



When directed by PDRMA legal counsel or PDRMA-assigned outside legal counsel, communications (email, fax, other) should always contain the above phrase in the subject heading of the communication and should be directed to Ed Dutton, Director of Claims and Legal Services, and/or Steve Kleinman, PDRMA General Counsel. Please DO NOT send the draft documents to any other recipients (e.g., facility managers, superintendents, etc.) since that could negate the attorney-client privilege. PDRMA's fax number is 630-769-0449.

**Remember**, any "internal report" you create that is not specifically and purposely directed to PDRMA's legal counsel or your agency's corporate counsel may be obtained via a FOIA or other document request and be potentially damaging in subsequent litigation.

**DO NOT** request or prepare any witness and/or employee statements without first consulting PDRMA's counsel. Such statements are often incomplete, inaccurate and/or misleading. For non-employee witnesses (i.e., patron witnesses), get their personal contact information and a brief verbal account of the incident. At a later time, PDRMA will arrange to conduct a subsequent interview and/or request a written witness account.

When/if PDRMA asks agency staff to document a witness account, insert the following language at the top of the summary:

***THIS DOCUMENT IS AN ATTORNEY-CLIENT PRIVILEGED COMMUNICATION  
PREPARED FOR, AND AT THE REQUEST OF, PDRMA'S LEGAL COUNSEL.***

Use PDRMA's in-house legal counsel or a PDRMA-assigned outside counsel to conduct your agency's internal confidential investigation.

While members often want to conduct their own investigation, if they do that *on their own* and not at PDRMA's request, the investigative findings and materials may be discoverable or subject to disclosure. However, if PDRMA conducts the investigation on behalf of the member all related communications are more likely to be subject to attorney-client privilege and protected. PDRMA legal counsel can hire investigators, employ consulting experts, and enlist a variety of research and investigative resources on a member's behalf. PDRMA can then report the results back to the member while protecting the findings and conclusions from disclosure.



### **General Action Steps to Consider When a Crisis Occurs**

The Crisis Team Leader should use the following steps as a guide to manage a crisis and make decisions:

1. Whenever a crisis involving personal injury and/or property damage occurs, the first responsibility of the Crisis Team is to activate the agency's emergency response plan and ensure necessary and appropriate actions are taken to minimize further loss. Immediate safety needs of people and property are the top priority.
2. Another Crisis Team responsibility is to obtain, compile, monitor and verify the accuracy of incoming information. It is critical to document **all** incoming events and information in chronological order to assess and address the crisis accurately. The team must verify and review new and incoming information against past and known information. The team needs the available information to be compiled accurately in order to make well-informed decisions.
3. Agency staff will feel the emotional and physical impact of a crisis. The Crisis Team should reassure agency staff so the process of information gathering can begin. Employees exhibiting signs of unusual stress and/or an inability to attend to their respective duties effectively should be relieved of their duties and directed to a designated area. Employees directly involved in the incident should remain on duty until the decision is made as to whether or not to conduct post-incident interviews under the direction of PDRMA legal staff.
4. The Crisis Team should consider moving employees directly involved in the crisis incident to a more private location if media is present or the environment is stressful. The agency should provide transportation for staff to a secure facility for debriefing, interviewing and evaluation of their physical and emotional well-being.
5. Notify parents of minor employees as to the location of their children as soon as possible. Inform parents as they arrive that they can remain with their son/daughter and possibly be present during the interview process conducted by police or PDRMA legal staff.
6. Identify a secure facility location for the Crisis Team to meet and begin implementing the Crisis Management Plan. This is where the team continues fact finding and coordinating the crisis response with key parties such as emergency response agencies, PDRMA, EMS, local police, key staff, legal counsel and the media.

- a. Communicate to all agency staff that a crisis exists and to forward all communications and relevant information immediately to the Crisis Management Team. Identify the agency Spokesperson and reinforce with staff to direct any and all media inquiries to the agency Spokesperson.
  - b. The Crisis Team Leader and legal counsel direct staff actions, coordinate information gathering, liaise with outside groups, interface with emergency responders, communicate with staff and the public, and provide direction on needed resources.
7. Contact the governing board president to inform her about the situation, and then notify other board members. Remind all board members not to make any public comments concerning the incident, and that PDRMA is conducting a formal investigation under the direction of its legal counsel.
8. Identify all staff directly involved in the crisis as soon as possible so legal counsel and the agency director can interview and debrief them.
9. Assign staff to monitor (and digitally record/videotape, if possible) television news reports, social media sites, local blogs, radio stations and other media outlets to determine what information about the crisis is available to the public.
10. Assign staff to verify the accuracy of information as it becomes known. Legal counsel and the Crisis Team rely on this information to respond to the crisis, prepare a media relations plan, address public concerns, determine the scope and nature of investigative action, and attend to the needs of victims, staff, relatives, and other affected parties.
11. Establish a communication team to answer incoming phone calls, emails, and social media outlets to keep the Crisis Team informed. The communication team documents all incoming information received or directed to the agency. The team documents who called, the information provided/requested, the caller's title, time of call, and return phone number or email address. The team should forward all emails and social media inquiries to the Crisis Team.
12. Develop a crisis communications strategy working in conjunction with the Crisis Team and legal counsel and consider the following:
  - a. Obtain legal counsel approval of all public communications.

- b. Identify the newsworthiness of the incident and how the media is reporting it.
- c. Communicate with staff informing them of the crisis and that all statements shall come from the agency spokesperson (**See Appendix C**).
- d. Reassure the community and manage public relations.
- e. Verify the accuracy and availability of information.
- f. Limit initial contact with the media to a written press release.
- g. Debrief and prepare the agency Spokesperson.
- h. Determine the manner and means of addressing the media (i.e. off-camera or on-camera).
- i. Limit an on-camera response to the designated Spokesperson to read a prepared, written statement to the press. The Crisis Team should regularly reassess the need to address the media. Consider what stage the crisis is in; the scope and extent of the crisis; the expectations of your community; public relations; the need to balance inaccurate reporting; and the ability of the press to report about the crisis fairly. The Spokesperson should never admit or address fault or liability, so it is critical to coordinate all media response with legal counsel.

#### **Crisis Information Gathering – Questions to Consider**

It can be difficult for the Crisis Team to know how to start the information-gathering process. The team can use the following list of sample questions as a guide to gather information and make decisions:

1. Is the emergency-response portion of the crisis complete or ongoing?
2. Has the agency notified PDRMA?
3. Have the families of all victims been notified? (Coordinate with local police.)
4. Have the proper authorities been notified? (Police, fire, poison control, EPA, Department of Public Health, utility companies, etc.)
5. Have all Crisis Team members been notified and gathered? Does the team need to establish a crisis center? If so, where?
6. Has the team notified your agency attorney and board members?
7. What is the status of the internal investigation process?



8. Is there an investigation being conducted by a third party? (Police, fire, EPA, OSHA, private investigator, aquatic certification entity, etc.)
9. Has the Crisis Team been provided contact information for all potential staff and non-staff witness(s)?
10. Has the team assured the public the crisis is under control?
11. Has the agency representative contacted the local and/or reporting media to tell them the agency will provide information once facts have been gathered and verified? Has onsite media been made reasonably comfortable (electrical power for equipment, computer access, administrative support services, coffee, etc.)?
12. Is a formal written press statement appropriate and/or necessary?
13. Has the agency communicated the appropriate level of compassion for the victim(s) and the families?
14. Has the agency Spokesperson been updated with current information and thoroughly prepared? (Anticipated questions, rehearsed responses, etc.)
15. Have false, misleading or inaccurate statements been made and/or reported by the media that should be balanced by facts?
16. Are there visual images of the incident and/or post-incident damages/losses? (Cell phone, video or photographs, security video cameras, etc.)
17. Should the EAP and/or other counseling/support services be made available for agency staff/board member? Does agency staff need a group EAP meeting in addition to individual staff counseling?

## **Members of the Crisis Team and Their Roles**

### **Morton Grove Park District Executive Director Sample Duties (Official Spokesperson, Crisis Team Leader)**

Often the Agency Director acts as the official Crisis Team leader and as Spokesperson. The Executive Director, working with legal counsel, is responsible for the overall coordination of the Crisis Management Plan.

The Executive Director or designated legal counsel are typically the primary representative of the agency throughout the crisis. However, others with specialized and/or direct knowledge may also serve in the Spokesperson's role.

### **Leadership Staff Sample Duties**

- Coordinate and draft communications under direction of Crisis Team with legal input.
- Compile a list of local television, radio and newspaper phone numbers and contacts, if known.
- Distribute information through media channels as directed. (Agency website; social media sites; patron distribution lists; and local, television and print reporters.)
- Manage the communications team in monitoring media outlets, including social media, to track crisis reporting. (Facebook, Twitter, blogs, etc.)
- Update the agency website to take on a lower profile as necessary based on the sensitivity of the crisis. Provide information proactively through the website to communicate with the public.
- Identify and manage all communication channels including email lists, mailing lists, website and social media.
- Keep agency staff and the board informed and updated on facts and developments. Employees often need reassurance and/or a better understanding of the crisis. These communications also provide an opportunity to remind employees they should direct media and third-party requests for information to the designated agency Spokesperson. Careful monitoring of media output, along with careful management of internal communications, prevents the release of misinformation, problematic speculation and rumors.

### **Department Head Sample Duties**

Department Heads ordinarily coordinate the information and activities associated with their operations as directed by the Crisis Team. Duties may include:

- Coordinate the processing and verification of departmental policies, procedures, training, records, etc.

- Provide information concerning any applicable contracts, affiliate groups and independent contractors the agency uses.
- Communicate with staff concerning agency policies on not sharing any information about the incident or making comments to people outside the agency (See Appendix C).
- Determine if any affected staff needs EAP assistance or other support services.
- Reschedule planned programs/activities as necessary, locating alternative programming sites or cancelling programs, if appropriate. This includes communicating programming changes to affected staff and the general public.

### **Superintendent of Parks Sample Duties**

The Superintendent of Parks coordinates the information and activities associated with department operations as directed by the Crisis Team. Duties may include:

- Provide Crisis Team with access to necessary buildings, facilities and staff resources.
- Coordinate needed services with the village police department, utility companies, other park districts, etc.
- Secure the crisis location and authorize access only to approved personnel.
- Establish a centralized media center, as directed.
- Coordinate processing and verification of departmental policies, procedures, etc.
- Provide information about applicable contracts, affiliate groups and independent contractors the agency uses.
- Communicate with staff concerning agency policies on not sharing any information about the incident or making comments to people outside the agency (**See Appendix C**).
- Determine if any staff need EAP or other support services.

### **Supervisors Sample Duties**

Agency Supervisory staff may need to assist the agency director, legal counsel, Spokesperson, superintendents, Crisis Team, Risk Manager, PDRMA or clerical staff. Assignments may include:

- Provide specific information about a program or facility.
- Compile and verify facts and information and formulate appropriate responses to questions and concerns.
- Communicate with staff concerning agency policies on not sharing any information about the incident or making comments to people outside the agency. (**See Appendix C**)
- Assist the Spokesperson in responding to inquiries, as directed.
- Monitor media outlets.
- Identify alternative programming sites, as necessary.



### **Risk Manager Sample Duties**

- Assist PDRMA legal and risk management staff during the investigative process. (Including other authorized third-party investigators.)
- Coordinate identification of witnesses and gather personal and professional contact information.
- Take photographs/digitally record/video tape and preserve evidence as directed by legal counsel.
- Secure evidence gathered and release evidence only after approval by PDRMA's legal counsel using a chain-of-custody document. (See Appendix D.)
- Contact the necessary governmental agencies, when applicable. (EPA following chemical spills, IDOL following the death of an employee, Illinois Department of Public Health, etc.)
- Obtain, compile or present pertinent safety documentation or practices conducted by the agency.
- Complete the PDRMA Accident/Incident Report Form (not an internal reporting form), have PDRMA legal counsel review it, and send it to PDRMA within 24 hours of the incident.
- Gather employee statements in a narrative format to supplement the accident report form and as directed by PDRMA legal counsel.
- Obtain any pertinent contracts, waivers, training records, certifications or similar documentation. Contact EAP and/or other support services to inform them of the crisis and possible need for services.
- Review circumstances and cause(s) of the crisis and, if applicable, recommend and implement post-crisis measures to minimize future similar events.

### **Administrative Staff Sample Duties**

- Work with Communications Manager (if applicable) to screen telephone calls, email, website and social media inquiries.
- Screen reporters, family members or others who may arrive unannounced at the administration building. Obtain the following information and keep a log:
  - Name.
  - Title and organization. (Who is the person representing?)
  - Name of newspaper, radio or TV station, if applicable.
  - Telephone number to reach the person.
  - Email address of person, if applicable.
  - Reporter's deadline, if applicable.
  - Nature of the inquiry.

- If a reporter, photographer, attorney, investigator or victim's family appears in person at the administrative office or another location, obtain the above information and immediately contact the Crisis Team and official Spokesperson.
- All responses to information inquiries are limited to providing the official information pre-approved by the Crisis Team for distribution. If possible, a script should be provided (and up-dated periodically) for all staff to read from if responsible for answering the agency phones.

### **Spokesperson Sample Duties**

The role of the Spokesperson is to represent the agency as the liaison to the media and third parties. At the direction of the Crisis Team, the Spokesperson presents official, accurate and pre-approved information to the media on behalf of the agency. The agency is not obligated in any way to share information with the media. However, it is often advisable to provide a brief statement, before requested, acknowledging the incident and expressing sympathy for the family and others involved.

Any agency-approved communication should never include a "no comment" statement. Such a statement leads to a misinterpretation that the agency has something to hide, leading to speculation and innuendo and prompting the media to find other information sources that may be unreliable and/or have hidden agendas. The agency can, with legal counsel input, provide a written press release including the following:

- Acknowledge the incident/crisis.
- Express compassion and support for victims and their families.
- Explain it is premature to provide details pending further investigation.
- Describe rescue/proactive efforts/safety record, etc.
- Emphasize the matter is under investigation and your agency is fully cooperating with other agencies.
- Assure public you will provide additional facts as they become known.

The designated Spokesperson should have in-depth knowledge of the organization, be well spoken and professional, and be comfortable and confident in the role as Spokesperson. Pre-crisis training through exercises such as mock press conferences is a valuable exercise to prepare your Spokesperson for a future crisis situation. Remember, the Spokesperson is the agency's primary liaison and the face of your agency that the public sees.

On behalf of the agency and Crisis Team, the Spokesperson presents factual information in a means and manner directed by the Crisis Team. If the agency determines a press conference or

in-person interview is necessary, it is advisable to have the Spokesperson begin by reading a prepared statement that accurately presents the agency's response to the crisis. This allows the agency to list points proactively for the media to know, even if reporters do not ask the Spokesperson questions that would elicit that information.

The Spokesperson should not answer any questions for which verified facts are not available. In such a situation, the Spokesperson can say:

*“Regretfully, we all must respect the pending investigation, and it is premature to address this question/issue at this time. I certainly would not want to provide any inaccurate or misleading information inadvertently. Of course, as facts become known and verified, I would be pleased to revisit this question/issue.”*

In addition, the Spokespersons **should never**:

- Release victim information until family members are notified.
- Speculate on liability, damage costs, causes, etc., until verified and reviewed by legal counsel.
- Fix blame on others or mislead.
- Speak off the record.

### **Role of Board Members and Elected Officials**

Board members and elected officials are concerned during a crisis. Often, they feel obligated to speak to the media, victims/families, and/or the general public. Despite their good intentions, they may inadvertently compromise the agency's reputation and ability to minimize potential liability exposure. Strongly advise board members not to make any statements to the news media or any third party without prior consultation and approval from legal counsel. PDRMA counsel or assigned counsel often speaks with board members through the protection provided by executive session to update them on the crisis and related legal and liability issues.

### **Role of Employees in Dealing with the News Media**

All employees must recognize their role in a crisis. They must understand it is the agency's policy and expectation that any information released comes from the designated Spokesperson. Employees should know, as soon as possible, the contact information of the agency Spokesperson.

Advise those employees directly or indirectly involved in the crisis that reporters or other investigators may approach them. The same is true for employees involved in the investigative process and/or information flow. Reinforce your media-response policy with these employees during interviews and crisis debriefing so they know the appropriate responses to questions.



Offer employees the following guidelines in handling reporters or others seeking information:

1. If anyone approaches you for information, you are not required to give an interview, and we ask you to direct the person to the designated agency Spokesperson. You can say, "I'm sorry. I'm not the best person to answer that question. You should contact (state designated Spokesperson), and I am confident he/she can assist you."
2. It is acceptable not to know the answer to a question. Say, "I don't know," and direct the reporter/person to the Spokesperson.
3. Never say, "No comment." Reporters may interpret that phrase to imply guilt or that you have something to hide. Instead, say, "Please understand that I am not the best person to discuss this event. I would not want to provide inaccurate or incomplete information unintentionally. You should direct your inquiry to (provide name and number of designated Spokesperson)."
4. Never make an off-the-record statement. There is no such thing as an off-the-record comment. Any statement made off-the-record can become front page headlines. The confidentiality of off-the-record statements cannot, and often will not, be guaranteed.

### **Media Relations Plan**

Through direction of the Crisis Team and legal counsel, the Spokesperson coordinates all interaction with the media and any outside requests for information. The Crisis Team decides the time, place and means of sharing information with the media and/or responding to media requests, with advice of legal counsel.

You want to show you are a willing partner in sharing information, and you are committed to cooperating with the media. However, you must also be very clear that the agency will not share any information until legal counsel verifies and reviews it.

Do not make promises to reporters. Tell them you will share information when it is available for the public.

Monitor all news and social media to determine how the crisis is being reported. Determine whether reports are objective and accurate. When necessary, prepare and distribute accurate information to balance any serious false statements.

Always prepare an initial written press release and consider posting it on your website or on other social media channels.

### **Continuing Operations Considerations**

- **Evaluate staff readiness** – The head of the Crisis Team should meet with supervisors of employees directly involved in the incident to determine if they are ready to resume duties. If not, does the agency have enough resources to continue operating with non-involved staff?
- **Reopen the facility** – Consider a gradual reopening to keep staff from becoming overwhelmed following the incident. A supervisor should be available when reopening a facility involved in a crisis event to answer any questions from the public so as not to distract the staff.
- **Communicate with the public** – Set a date to reopen when staff is ready. Consider shorter hours or limiting public participation in programs for a period of time. Let the public and patrons know staff evaluations and other readiness training was completed prior to reopening.
- **Communicate with outside groups/users** – Consider suspending out-of-the-ordinary programming activities, special events or large-group facility use for a period of time.

## Appendix A - Sample Initial Press Release

The Morton Grove Park District has recently been informed that on (date of crisis) at approximately \_\_\_\_\_(identify time), the following occurred:

(Briefly describe crisis)

At this time, the specific facts and circumstances surrounding this event have been neither fully substantiated nor confirmed. We are currently in the process of investigating this matter in full cooperation with:

(Identify other investigative agencies)

Out of respect for the investigative process and in fairness to the families and parties involved, we are unable to provide further details at this time. However, we are committed to providing additional facts and developments as they become known and confirmed. In the interim, anyone wishing to provide or request further information should contact (identify agency Spokesperson) at (phone number). We are also providing up-dated information on our agency website at [Mortongroveparks.com](http://Mortongroveparks.com).



**Appendix B - Emergency Phone List**

Below is the list of people to contact in the event of a crisis situation. Please call these individuals in the order listed. If there is no response, call the next person on the list.

**Morton Grove Park District Executive Director - Jeff Wait**

Time Called \_\_\_\_\_

Office.....

Home.....

Cell Phone.....

Email.....

**PDRMA**

Time Called \_\_\_\_\_

Office (630) 769-0332

Fax (630) 769-0449

PDRMA After Hours – Includes instructions on how to reach PDRMA staff after hours.

Email.....

**Morton Grove Park District Human Resources & Risk Manager- Michelle Trevino**

Time Called \_\_\_\_\_

Office.....

Home.....

Cell Phone.....

Email.....

**Morton Grove Park District – Superintendent of Finance –Marty O’Brien**

Time Called \_\_\_\_\_

Office.....

Home.....

Cell Phone.....

Email.....

**Morton Grove Park District Attorney – Steve Adams**

Time Called \_\_\_\_\_

Office.....

Home.....

Cell Phone.....

.....

Fax.....

Email.....

**Governing Board President**

Time Called \_\_\_\_\_

Office.....

Home.....

Cell Phone.....

Fax.....

Email.....

## Appendix C - Statements of Admission and Social Media

**(To be read or otherwise communicated to staff from Management)**

In a tragedy such as the one that has occurred, it is important to remind everyone of the agency's communication policy. It is critical to the reputation of the agency that all incident-related communications be accurate, appropriate and properly attributed. Only those employees officially designated by the agency have the authorization to speak on behalf of the agency. In this matter, (identify Spokesperson) has been designated the agency Spokesperson. Staff is expected to refer all media inquiries to Executive Director Jeff Wait, as our agency Spokesperson. Should anyone from the media contact you, a simple and appropriate response would be: *"Please understand that Jeff Wait has been designated as the Morton Grove Park District's Spokesperson. Kindly direct your inquiries to Jeff Wait."* You can then simply walk away, hang up the phone, or close the door. You have no obligation to talk to the media and should not feel pressured to do so.

Staff should be cautious in discussing the incident with family members, friends, residents and other third parties. Your communications may be inaccurate, misunderstood, misperceived, or result in rumors that can negatively impact the image of the Morton Grove Park District and our staff, and compromise our ability to defend potential litigation. Similarly, the agency recognizes and respects the right of employees to use social networking, personal websites, texting and weblogs as a medium of self-expression. Again, only those employees officially designated by the agency have the authorization to speak on behalf of the Agency. It is important to keep in mind that this matter is currently under investigation. Many facts remain unknown, and there is significant information that has yet to be confirmed

Please be careful to avoid disclosing any information that may compromise the investigation, is confidential, or may violate privacy rights or privacy perceptions. Show proper consideration and respect to coworkers, the victim(s), our patrons and others. While we cannot prevent you from using social media, we strongly recommend you do not use it to discuss the incident or to discuss this incident in an inappropriate or counterproductive manner. Your perceptions or representations may not be accurate, may violate attorney/client privileged, may violate privacy rights, and can later be used against you or the agency by the media or in a future lawsuit against the agency. In short, remember that what you post will be around for a long time, so consider the content carefully.



The agency and its Employee Assistance Program provider are available to you if you should need help coping with the incident. Please see any manager if you have questions about this policy.

## Appendix D - Sample Chain of Custody Document

Chain of custody documents are important from a legal perspective in that it document the movement and location of physical evidence from the time it is obtained until the time it is presented in court.

A chain of custody document should be used when physical evidence as part of an investigation is placed in secure storage and/or provided to another person or organization. It is important to document the chain of custody so that it reflects the care provided in handling important physical evidence when stored or transferred to indicate its condition and that it was not physically altered while in the care of any individual.

**(Reference here the incident relating to the need to execute a chain of custody document)**

John Doe, Manager for the Anytown Park District **(Describe here exactly what was done to obtain a device or document, on what day, time and where stored securely).**

\_\_\_\_\_ Date \_\_\_\_\_

John Doe, Any Town Park District

### Example:

John Doe turned over control of the above cited device/document to Jeff Smith, PDRMA, at approximately 11:00 a.m. on xx/xx/xxxx at (Add location here). Jeff Smith delivered the device/document to Sara Yager, PDRMA, Director of Claims and Legal Services, at the PDRMA office at approximately 8:30 a.m. on xx/xx/xxxx.

### Description of Device or document:

6" X 5" white box hard drive (now brownish and discolored) square shape with venting around three sides.

- In hand-written pen on one side. – **"10.20.13.10 (space) Sept 2009"**
- Three ports on one side – one round, one cable jack and a rectangle prong jack.
- Additional manufacturer information on a label that may be readable, but will need closer inspection and cleaning to identify details. Manufacturer listed as Security Digital.

**Security Camera:**

3 XYZ Security Cameras provided by John Doe to Jeff Smith on xx/xx/xxxx. Jeff Smith provided cameras to Sara Yager on xx/xx/xxxx.

Camera description:

Camera 1      Bar Code 10.4.192.33      10.23.15.109

\_\_\_\_\_ Date \_\_\_\_\_  
Ed Dutton, PDRMA

On xx/xx/xx (approximately 9:00 a.m.), Sara Yager provided the devices to Eric Hohenstein, PDRMA Claims Supervisor, who removed the hard drive and three security cameras from their storage container for the purpose of photographing the items and placing identifying stickers on the devices. The hard drive and camera were returned to their original container and securely stored at the PDRMA office.

\_\_\_\_\_ Date \_\_\_\_\_  
Eric Hohenstein, PDRMA



## Emergency Operations Guidelines 1

### **Policy Statement**

It is a significant purpose of the Morton Grove Park District to provide programs and facilities for general use in the safest method. No procedure or structure is unsusceptible from emergencies, and the Morton Grove Park District acknowledges its responsibility for the safety of its employees and patrons. All measures taken and determined will provide the highest safety, assessing the circumstances and options.

In providing such a plan, the Morton Grove Park District is responsible for delivering a safe environment for all employees and patrons.

All responsible Morton Grove Park District employees will acquaint themselves with this manual and their role in the event of an emergency.

## Emergency Phone Numbers

|   |                                |
|---|--------------------------------|
| Police                                      | 911                            |
| Non-emergency:                              | 847-470-5200                   |
| Fire  | 911                            |
| Emergency Medical and Ambulance             | 911                            |
|   |                                |
| Morton Grove Park District                  |                                |
| Administration/Community Center             | 847-965-1200                   |
| Maintenance                                 | 847-965-0065                   |
|   |                                |
| PDRMA, Park District Risk Management Agency | 630-769-0332                   |
| Village of Morton Grove                     | (847) 965-4100                 |
| Public Works                                | (847) 470-5235                 |
| Sheriff                                     | 630-668-0900                   |
| Public Health                               | 630-620-3325 or 630-682-7400   |
|   |                                |
| Public Utilities                            |                                |
| Northern Illinois Gas                       | 630-629-4000 or 1-800-942-6100 |
| Commonwealth Edison                         | 1-800-334-7661                 |
| J.U.L.I.E. (underground cable)              | 1-800-892-0123                 |
|   |                                |
| Illinois and National Agencies              |                                |
| State Police                                | 630-742-3553                   |
| Children & Family Services                  | 1-800-252-2873                 |
| Poison Control                              | 1-800-222-1222                 |

## Plans of Action and Description of Emergencies

### Severe Weather

#### 1. Lightning

- A. Warning will only be flashes at a distance. Conditions are most ideal just prior and during heavy storms. This is not however, the only time there is lighting.
- B. Seek shelter if outdoors or remain inside whatever building you are in at the start of the storm.
- C. If no structure is available:
  1. Do not stand under a natural lightning rod such as a tall tree in an open field.
  2. Do not touch any pooled water and stop all water activities.
  3. Stay away from metallic objects like fences, bicycles or golf clubs.

4. If caught in an open field and you feel or see your hair stand on end, drop to your knees and bend forward with your hands on your knees.
  5. NOTE: DO NOT LIE FLAT
  6. In open fields seek low areas.
  7. Avoid using the telephone except in emergencies.
- D. Thorguard: When a lightning threat is detected within a 2.5-mile radius of the system:
1. A 15-second uninterrupted horn blast will sound along with a continuous strobe flash.
  2. All outdoor activities will be suspended, and park patrons should immediately seek shelter in a building or closed automobile and remain in shelter until the threat has passed.
  3. When lightning threat potential has passed:
    - A horn will sound three short blasts.
    - The strobe light will turn off.

## 2. Thunderstorms

- A. Warnings: weather alert, radio, or TV announcements will be broadcast indicating the areas of concern. Preparations for sheltering or dismissal of activities should be considered and acted upon.
- B. All water activities should be stopped, and pool areas evacuated at sighting of lightning to a safe distance or position as determined by pool manager and conditions.

## 3. Tornadoes

- A. Tornado danger signs:
  1. Severe thunderstorm-frequent lightning, heavy rains and strong winds.
  2. Hail bullets of ice from a dark cloudy sky.
  3. Roaring noise like ten jet planes or a hundred railroad trains.
  4. Funnel - a dark spinning "rope" or column from the sky to the ground.
- B. Radio and TV announcements of a Tornado Watch is a forecast of the possibility of one or more tornadoes in a large area.
  1. Continue normal activities but WATCH for tornadoes.
  2. If a tornado (a funnel cloud) is sighted move at a 90 degree angle away from it.
  3. Notify proper authority.
- C. Radio and TV announcements of a Tornado Warning means that a tornado has been detected and may be approaching.
  1. A 5-minute steady blast of the emergency siren system will be activated if possible.
  2. Shelter should be sought:
    - a) In the lowest level of available structure near interior walls or hallways.
    - b) Avoid using large rooms such as gyms or auditoriums.
    - c) Avoid rooms with large glass exposures.
    - d) In open areas try to lie flat in the nearest ditch.
  3. The following areas are recommended as safe places to seek shelter in the event of a tornado or tornado warning:



- a) Prairie View Community Center: The two locker rooms will be the primary locations.
- b) Maintenance Building: Safe areas in this building are limited at best the restrooms. Stay away from Garage 2 and 3.
- c) Austin Park Fieldhouse: The bathrooms are recommended for shelter of staff and patrons.
- d) Mansfield Park Fieldhouse: The bathrooms are recommended for shelter of staff and patrons.
- e) Oketo Park Fieldhouse: The bathrooms are recommended for shelter of staff and patrons.
- f) National Park Fieldhouse: The bathrooms are recommended for shelter of staff and patrons.
- g) Parks (In general): In open areas try to lie flat in the nearest ditch or in the lowest level of available structure near interior walls or hallways.

#### 4. Blizzards or Winter Storms

- A. Radio or TV announcements of a Winter Storm Watch means hazardous winter weather conditions may affect the area.
- B. Radio or TV announcements of a Winter Storm Warning means hazardous winter weather conditions are threatening the area.
- C. A severe storm is defined as one that produces (6) six inches or more of snow in 48 hours or less or damaging ice over 5,000 square miles.
- D. If a winter storm occurs:
  - 1. Considering the additional potential hardships of winter weather it is advised that preparations for dismissal of all activities be initiated.
  - 2. Try to stay inside if possible. If you must go out, avoid over exertion, dress warmly in loose fitting, light weight clothing. Keep dry. Remember to wear a hat and gloves.

#### **Fire & Explosions**

- 1. At visual sighting of smoke or fire:
  - A. Sound fire alarm system and/or notify occupants of condition.
  - B. Notify fire department 911.
  - C. Evacuate area if necessary.
  - D. Employees trained in the usage of fire extinguishers may attempt to extinguish small fires if the proper extinguisher is available.
    - 1. At sounding of fire alarm and/or conditions that a fire exists:
      - a. Close doors and windows if time and conditions permit this to be accomplished safely.
      - b. When smoky conditions exist, crawl toward exit on hands and knees along walls.
      - c. Always feel doors for signs of heat prior to opening. Use caution when reaching for door handles. Metal conducts heat as well.
    - 2. When evacuation is necessary:
      - a. Proceed in an orderly fashion.
      - b. Assemble in pre-designated areas.

- c. As soon as possible take roll call to insure safe exiting of all Individuals.
- d. Render first aid as necessary.
- 3. Return to normal activities only after the fire department and/or supervisory staff have declared the area safe.

If a fire alarm is sounded at the Prairie View Community Center, the following will apply:

**Guest Services:**

- 1. Guest Services staff will immediately call the Fire Department, 911 to verify the alarm.
- 2. Guest Services staff will check upstairs restrooms and all persons evacuate through the nearest exit doors. Take daily schedule when exiting.
- 3. Remain outside until given the "all clear" by the fire department.

**Instructors:**

- 1. The Executive Director shall have all participants line up in an orderly fashion and evacuate through the nearest exit doors.
- 2. Human Resource and Risk Manager: Will check bathrooms to make sure they are all clear.
- 3. Superintendents: Will check Fitness Center to make sure it is all clear.
- 4. Once outside, instructors will take an immediate head count to assure staff that all participants are outside.
- 5. Instructors and participants shall remain outside until an "all clear" is given by the fire department.

**Hazardous Materials Incident**

- 1. Notification can be the visual observance of an incident or public announcements by police, fire or another emergency agency.
- 2. What to do when engaged in inside activities:
  - A. Determine the need to leave the building.
  - B. If an incident is within the structure, you are to ensure involved area is closed off to all but emergency personnel.
- 3. If incident is outside the structure, you are in:
  - A. Stay inside unless advised to evacuate.
  - B. Close all windows and doors on the side of the structure that faces the incident.
  - C. Relocate activities to areas of the structure opposite to the exposed side.
  - D. Arrange for evacuation if advised to do so by public safety authorities.
  - E. Evacuate in the direction and to a location as directed by public safety personnel.
  - F. Maintain order within the group and ensure roll call is taken upon arrival at designated area.
  - G. Notify Morton Grove Park District administration office at 847-965-0538.
  - H. Notify parents/guardians of location so they can pick minors up.
- 4. If the activity is outside near the incident:
  - A. Move all personnel to an area up wind from the incident. A generally accepted minimum safe distance is 1/4 mile.

- NOTE: Actual safe distance varies with products and ambient weather conditions.
- B. Once relocated to a safe area, ensure a roll call is accomplished.
  - C. Administer first aid if necessary.
  - D. Notify Morton Grove Park District administration office at 847-965-0538.
  - E. Notify parents/guardians of location so they can pick minors up.
- E. Return to normal activities only after public safety and supervisory personnel have declared the area to be safe.

### **Floods**

1. Notification of flood potentials will be given via radio, TV, public safety agency warnings or public address systems. This is one of few emergencies that require evacuation as a normal action. Upon notification, preparations to evacuate must be started.
2. Terminate all activities.
3. Notify necessary transportation agencies, parents/guardians of the condition so evacuation can be carried out in a safe efficient manner.
4. Flash flooding: In cases where there is flash flooding or insufficient time for notifications, personnel should progress to the highest area as rapidly as possible in an orderly manner.

### **Earthquakes**

1. During an earthquake the solid earth moves and sways. The shaking and swaying seldom causes death or injury. Most casualties are the result of falling objects and debris from damaged and destroyed buildings. For these reasons, potential of injury can be reduced through removal of:
  - a. Items that are stored above user head heights.
  - b. Items that would impede progress of evacuation.
  - c. Cabinets with open face shelving or structurally weak latches or doors.
  - d. Chemicals in breakable containers stored on shelving.
2. Anticipate the hazards that could be caused by:
  - a. Ruptured water or gas lines.
  - b. Suspended ceilings.
  - c. Glass windows and doors.
  - d. Desks or tables that are not secured.
3. Personnel in building:
  - a. Seek shelter under tables or desks with head placed between knees and facing away from windows.
  - b. Move toward inside walls away from large open areas, crouch down and cover their heads.
5. Personnel outside:
  - a. Lie or sit personnel down.
  - b. Try to maintain a tranquil attitude amongst the group.
  - c. The safety of all personnel will be greatly enhanced if supervisory personnel can maintain an orderly and tranquil composure.
  - d. Once a quake has subsided, it is essential to take roll to account for personnel.



6. Return to normal:

- a. No structure or area altered or affected by an earthquake will be utilized until public safety and supervisory personnel have approved their usage. This is inclusive of building, pools and play areas.

**Prairie View Community Center Earthquake Evacuation Procedures**

An earthquake can happen without warning. As soon as you feel an earthquake's shaking or hear its rumble, go to safety immediately. When it's over, survey where you are and check for injuries.

**Maintenance Building**

- Take shelter under tables until the earthquake is over.
- Austin Park Fieldhouse
- Take shelter under tables until the earthquake is over.
- Mansfield Park Fieldhouse
- Take shelter under tables until the earthquake is over.
- Oketo Park Fieldhouse
- Take shelter under tables until the earthquake is over.
- National Park Fieldhouse
- Take shelter under tables until the earthquake is over.

**Supervisor's Office**

- Get under a desk or table. Survey scene and proceed outside.

**Registration Office**

- Get under counters, away from windows. Survey scene and proceed outside to the side of Prairie View Community Center.

Avoid The Stairwell - Be prepared for possible after-shocks.

**Turn Off Utilities**

- Upstairs staff turns off gas valve outside of kitchen door. Downstairs staff turns off electricity and water valve in furnace room.

Proceed to downstairs areas only if it is safe to do so.

**Utility Emergencies**

1. Gas Line Break

- A. Top priority item - with the first confirmation of a break in a gas line take the following actions:

When break is inside a building and the concentration is noticed throughout building, evacuate without further action.

- Notify police and fire 911

- Notify Morton Grove Park District administration office at 847-965-0538.
- Notify Northern Illinois Gas at 629-4000.
- When a break is outside a building, notify Administration and Northern Illinois Gas.

## 2. Electrical Power Failures

- Determine extent of problem.
- Within a portion of building.
- Only the building you are in.
- An entire area of community.

### B. Actions to take in case of problem 1 and 2 above.

- Notify Morton Grove Park District administration at 847-965-0538.
- Notify Morton Grove Park District maintenance at 847-965-0065.

### C. Actions to take in case of community wide problem.

- Contact Morton Grove Park District Administration Office for advice on dismissal potential. If dismissal is effected insure that all personnel are advised to stay clear of any and all downed power line.
- When incident involves potential electrocution or person being held by electrical power do the following:
  - Do not touch victim.
  - Call 911.
  - Try to remove victim from capture of electrical power by turning off source of power. If this fails, wait for emergency personnel to arrive.
- Water Pipe Ruptures or Loss of Water
  - a. Notify Morton Grove Park District maintenance at 847-965-0065.
  - b. If advised to do so, notify City or County public officials as required.

### D. Telephone or Communication Loss

- By available means, notify Morton Grove Park District administration at 847-965-0538.
- If advised, notify proper communications company to request service.
- Note: Loss of phone system is potentially a sign that emergency alarm systems may not be in service. Maintain fire and security watch until the Park District administration can relieve the situation.

## **Lockdown**

In an imminent threat to public safety, such as an active shooter or other threat of violence, one or more buildings at the Morton Grove Park District may be placed on lockdown.

- a. Locking all exterior doors and windows
- b. Covering windows
- c. Stay out of sight of windows facing the outside
- d. Clear rooms that cannot be secured, such and hallways
- e. Take attendance of those in your department
- f. Do not allow anyone outside of the building to enter, or vice versa

Prairie View Community Center: Safe areas in the building include areas where there are doors with locks

- A. Maintenance Building: Safe areas in this building are limited at best the restrooms.

- B. Austin Park Fieldhouse: The bathrooms are recommended as shelter for staff and patrons.
- C. Mansfield Park Fieldhouse: The bathrooms are recommended as shelter for staff and patrons.
- D. Oketo Park Fieldhouse: The bathrooms are recommended as shelter of staff and patrons.
- E. National Park Fieldhouse: The bathrooms are recommended for shelter of staff and patrons.

### **Civil Or National Disorders**

#### **1. Bomb Threat**

- A. These are potentially dangerous and normally descriptive situations. To secure the premises and resume operations requires quick action by the staff. Knowing what to do when a threatening phone call is received requires training and practice.
- B. A secretary or staff member who receives the bomb threat telephone call should first note:
  - Voice characteristics: raspy, slurred, accent, distinct diction patterns.
  - General manner: rational and calm, emotional and righteous, sure or unsure.
  - Background noise: traffic, office machines, animals.
  - Local or long distance.
  - A checklist should be kept at the secretary's desk. If a call is received that a bomb has been planted, the secretary should also try to determine the following from the call:
    - Name of caller or organization.
    - Date of call.
    - Time of call.
    - Exact location of bomb.
    - Time set for detonation.
    - What does the bomb look like.
    - Why the bomb was planted.
    - What kind of explosive used.
    - Caller: male, female, adult, child.

If the caller does not wish to answer questions, try to encourage the caller to do so by expressing a desire to save lives. Try to keep the caller on the phone as long as possible so that the call can be traced. Have someone alert the telephone company to begin tracing the call.

- Number for telephone company 1-800-698-4200
- Police Department number: 911
- Fire Department number: 911
- Administration Office: 847-965-0538



## Emergency Operations Guidelines

- A. Check all rooms in building for a possible device location. Do not touch any suspected items. While checking building look for possible clues or indicators of a bomb.
  - 1. Waste containers.
  - 2. Doors ajar.
  - 3. Windows open.
  - 4. Are unusual lights on or off.
  - 5. Recently delivered packages.
  - 6. Exposed wires or matchbooks.
    - 7. Length of pipe.
    - 8. Wires or strings attached to unknown objects or unusual items.
  
- B. If any suspicious object that is believed to be a bomb is discovered, the following procedures should be followed:
  - 1. Do not move or disturb the object.
  - 2. Evacuate the building immediately to a distance of at least 500 feet.
  - 3. Program leaders should take a count of patrons.
  - 4. Telephones or radios should not be used.
  - 5. Fire and police should be told of any information pertaining to the location of the bomb.
  - 6. Staff and patrons should remain away from the building until authorities determine that it is safe to re-enter the building.
  
- C. Should a bomb explode in a Park District facility:
  - 1. Evacuate as soon as possible.
  - 2. Administer first aid as needed.
  - 3. Take roll of all personnel.
  - 4. Notify police - 911.
  - 5. Notify Morton Grove Park District administration at 847-965-0538.
  - 6. Return only after the police and Park District administration have determined that the area is safe.
  
- D. Civil Unrest, Demonstrations and Disturbances.

With any of the above conditions it is advised that the following take place:

  - 1. Notify the police department - 911.
  - 2. Notify the Morton Grove Park District administration at 847-965-0538..
  - 3. Notify the occupants of the building, using a calm, tranquil voice, of the pending situation.
  - 4. Any other actions should be taken only with the advice of public safety officials and Morton Grove Park District administration.
  - 5. Maintain security of important sensitive documents located at facility.

E. National Disaster/Disorder

1. National emergencies or disasters; all actions during these situations must be based on information, time and general climate of the particular situation. Information will most normally be received from the Illinois Emergency Service and Disaster Agency of Cook County. This agency will provide notification via public address systems, radio, and TV. Constant monitoring of these systems will be necessary in these situations. It is essential that supervisory personnel maintain an attitude of tranquility and calm for the enhancement of public safety at large.

**Ozone Alerts**

1. Ozone is regarded as one of the chief sources of air pollution during late spring, summer and early fall. It has been proven to be a health hazard for chronic respiratory and coronary illnesses.
2. Methods of alert and classifications are by public notifications by Illinois Environmental Protection Agency during the period of May 1st through September 30th.

Levels of alert:

- A. Yellow - levels of 170 part per billion (PPB) and conditions are expected to re-occur the following day.
- B. Red - levels of 300-500 PPB and conditions are expected to re-occur the following day.
3. Actions to be taken:
  - A. Yellow alert - notify personnel engaged in Park District outside activities of condition and monitor individuals known to have respiratory problems.
  - B. Red alert - recommend stopping all outside activities until alert is terminated.

**Serious Injuries and Illness**

1. For general information, should an incident occur the following information is provided.
  - A. Ambulance and emergency services - 911.
  - B. Police Department - 911
2. If a person is:
  - A. Not breathing - do CPR (if trained).
  - B. Bleeding severely - apply direct pressure and elevate wound.
  - C. Unconscious - treat for shock by elevating legs.
  - D. Severely/injured or extent of injuries are unknown or involve the spine - keep victim as immobile as possible and calm. Do not move unless responsible medical help is available.

**Reporting Accidents/Incidents**

1. Following all emergency situations, the supervisor shall gather all information regarding the situation and complete a report. This information shall include, but is not limited to names, locations, times, dates, agencies and action taken.
2. A report of the events and actions taken shall be listed to serve as documentation for investigation and legal purposes. This report shall be turned into the Administration Office within 24 hours of the incident.
3. It is very important that all accidents/incidents be reported regardless of who is involved, or how minor the accident/incident might seem at the time. The whole



purpose of the safety committee is to prevent accidents/incidents through education. We need the information that accident/incident reports contain to learn from our mistakes and thereby reduce the chance of the same accident/incident reoccurring.

4. It is not our intention to ridicule those who have an accident, only to learn from the experience.
5. Please report all accidents/incidents to your supervisor, no matter what type (bodily injury, vehicular, etc.) or how minor. Failure to do so only puts you and the people you work with at greater risk of becoming a statistic.

### **Media Coverage**

1. In the event of an emergency situation, no employee shall release any information regarding the district, employees, patrons or emergency actions taken to the press or media agencies.
2. All inquiries of this type shall be directed to the Director or the Morton Grove Park District President of the Board of Commissioners.

### **Crisis Management**

1. What Is a Crisis?
  - A crisis is a situation or event that causes, or has the potential to cause, keen public or media concern. It could be, among other things, an accidental drowning, allegations or abuse, a severe vehicle accident, or a criminal act that occurred on agency property. The potential crisis list is endless. The Morton Grove Park District has appointed the Director as head of its Crisis Team. This person will decide whether the crisis plan needs to be implemented or whether the situation needs to be monitored and handled carefully. If the head of the crisis team is not available, a potential or immediate crisis should be reported to any Department Head.
2. Chain of Responsibility
  - In the event that the designated crisis team head/spokesperson is absent, the following chain of responsibility will be followed in descending order. All decisions and public responses should come through a consensus of the crisis team members. Spokespersons will be responsible for making official statements to the media on behalf of the crisis team. All listed spokesperson should review their duties on a periodic basis to help ensure their preparedness in the event of an unexpected crisis.

The following is a chain of responsibility order for crisis team head / spokespersons:

Executive Director

### **3. General Action Steps When A Crisis Occurs**

- A. Whenever a crisis occurs that involves injury or property damage, the first responsibility of the Crisis Team is to ensure that the agency's emergency response plan is implemented, local EMS services are contacted, and any other actions are taken to minimize further loss. Until the crisis is controlled, it is not recommended that any statements be made to the media until the Crisis Team has had time to fully assess the crisis and its impact on those involved.



- B. Stay calm and in control. Notify employees that a crisis exists and that all information about the crisis needs to be immediately communicated to the Crisis Team. Notify the head of the Crisis Team at once and provide all known details. The Crisis Team Head will direct actions depending on the severity of the crisis,
  - C. the need for immediate information, and the time of day. If contacted, members of the crisis team must report to the designated location.
  - D. PDRMA should be immediately contacted in all crisis or potential crisis situations. If applicable, an Accident Report Form should be submitted to PDRMA within 24 hours. PDRMA's fax #: 630-769-0449. The Crisis Team Head shall contact attorney if deemed necessary.
  - E. Depending upon the situation, contact the governing Board President to make him/her aware of the situation, followed by notifying other available Board members.
  - F. Continue to obtain and compile accurate information as quickly as possible so the Crisis Team can disseminate accurate information to the media, if warranted. Document all events surrounding the crisis. Staff should be assigned to monitor (and videotape if possible) television news reports. In addition, local news radio stations should be monitored to gather facts being reported. Any staff directly involved should be interviewed by the crisis team as soon as possible. The Crisis Team may appoint fact gatherers to verify all facts necessary for the preparation of written press/media releases, a meeting with the press, meeting with relatives, and other affected parties.
  - G. Guest Services will answer phone calls and relay any pertinent information to the Crisis Team. Guest Services, as well as the entire Crisis Team, will document all information received: who called, their title, time of call, etc.
  - H. The spokesperson may address the media after the crisis team has prepared a statement. The designated spokesperson should speak on behalf of the agency and fault should not be discussed. (In certain instances, the Crisis Team should not disseminate information to the press or make a public statement.
  - I. Depending upon the crisis, a press release may be prepared by the crisis team and presented to the media.
1. Specific Action Steps for Crisis Team
- The following is a list of questions that will be addressed to begin the process of responding to the crisis. Depending upon the circumstances, there may be much more information to gather.
    - A. When appropriate, have the proper authorities been notified? (Police, fire, poison control, EPA, utility companies, etc.)
    - B. Has the Morton Grove Park District attorney and board members been notified?
    - C. Has PDRMA been notified? (Phone #:630-769-0332, Fax:630-769-0449)
    - D. PDRMA Helpline 630-435-8989
    - E. Have victims' families been contacted?
    - F. What outside parties should be notified?
    - G. Has the crisis situation been fully investigated? What is the potential for a secondary crisis?
    - H. Are damage estimates accurate?

- I. How can the Crisis Team assure the public that the crisis is under control?
- J. Has the waiting media been made comfortable (electrical power for equipment, coffee, etc.)?
- K. Will a formal press conference be appropriate and/or necessary? When: Where:
- L. Has the spokesperson been updated with current information and tested with anticipated media questions?
- M. Will a crisis center need to be established? Where?
- N. Have false statements been reported by the media, which should be balanced with facts?
- O. Have photographs or videotape been taken to document the damage?
- P. Is it necessary to contact the EAP or other counseling services for employees or public involved in the crisis?

## 2. Members of The Crisis Team and Their Roles

### Director (Official Spokesperson & Crisis Team Head)

- The Director or Deputy Director in the Director's absence will act as the official crisis team head and as the spokesperson. The Director will be responsible for the overall coordination of the agency's crisis management plan. The director is the primary voice of the park district throughout the crisis but may request that others with more knowledge of the affected department's operation also speak to the media.

### Department Heads

- The appropriate Department Heads will coordinate the processing of incoming information such as witness statements, employee statements, in-coming phone calls, radio reports, television reports, accident investigation results by safety coordinator and PDRMA.

The Department Head is further responsible for establishing the following:

- Exactly what happened?
- Who was/is involved?
- Where did the incident occur?
- When did it happen?
- Why did it happen?
- What is currently being done to control or minimize the existing crisis?
- If the answers to the above questions are not known, when will they be known?
- Update the official spokesperson about changes in the situation as they occur.

### Superintendent of Parks

- The Superintendent of Parks will ensure that the Crisis Team has access to necessary buildings, facilities, and power sources. Depending upon the crisis, the Superintendent will coordinate efforts with the Village Public Works Department, Police Department, Utility Companies, etc.
- If directed by the crisis team head, the Superintendent of Parks will establish a media center. When applicable, the media should be guided to a designated location so they can monitor the crisis and receive the most up-to-date information on the crisis situation. The Superintendent of Parks will be responsible for obtaining any needed audiovisual equipment.



### Supervisor Duties

- Agency supervisory staff may be assigned to assist the director, spokesperson, superintendents, crisis team, safety coordinator, or clerical staff. Some potential assignments may include: Providing specific information on a program or facility.
- Being responsible for identifying and reserving a designated media site capable of accommodating a large group such as a news conference or open public forum.
- Help assemble accurate information and formulate accurate answers to questions.
- Contact the news media as directed by the spokesperson. Obtain information about callers and inquiries from office administration. Assist the spokesperson in responding to inquiries as directed.
- Record and date all statements given to the media.

### Risk Manager Duties

- Assist PDRMA with investigative efforts.
- Coordinate the identification of witnesses and gather information.
- Take photographs and preserve any evidence.
- Contact the necessary governmental agencies when applicable (i.e. EPA following chemical spills, IDOL following the death of an employee, etc.)
- Obtain, compile, or present pertinent safety documentation or practices conducted by the agency.
- Complete the Accident/Incident Report Form which should be faxed to PDRMA within 24 hours, 630-769-0449. The safety coordinator will be responsible for gathering employee statements in a narrative format to supplement the accident report form.
- Contact EAP services or other counseling agencies as directed by the crisis team head.
- Review the accident circumstances and causes and decide a course of action to eliminate, or hopefully, prevent a similar situation from occurring in the future. This information will be presented to agency staff after the crisis is controlled.

### Office Staff Duties

- Answer telephone inquiries associated with the emergency and screen reporters, photographers, or others that arrive unannounced at Park facilities. Before answering any questions, obtain the following information and keep a log of the calls and media visitors:
  - The name of the person who is calling or visiting.
  - Their title and organization.
  - The name of the newspaper, radio, or TV station (if applicable).
  - The telephone number where the inquirer can be reached.
  - Their fax number.
  - Reporter's deadline (if applicable).
  - Provide only the official information that has been approved by the spokesperson. Let the caller know that they will be contacted as quickly as



possible with accurate information. If a reporter, photographer, or other interested persons have arrived at the reception desk, notify the official spokesperson after obtaining the above information.

#### Spokesperson Duties

- The role of the spokesperson is to present official, accurate information to the media on behalf of the agency, when appropriate. The agency is not obligated to share any information with the media. However, the term “no comment” can lead the media to look for unreliable sources of information. In limited circumstances, it may be prudent not to discuss the crisis with the media pending further investigation. The designated spokesperson should have in-depth knowledge of the organization, be a good public speaker, present oneself in a professional manner, and be trained as a spokesperson.
- On behalf of the agency and crisis team the spokesperson should present factual information to the media at the crisis location, or at a press conference. It is best to begin any interview by reading a prepared statement to accurately present the agency’s response to a crisis.
- The spokesperson should refrain from answering any questions when verified acts are not available. In addition, spokespersons should never:
  - 1) Release victim information until family members are notified.
  - 2) Speculate on liability, damage costs, causes, etc. (until verified).
  - 3) Fix blame on others or mislead.
  - 4) Speak off the record.
  - 5) The spokesperson should admit that a crisis has occurred, and highlight what steps are being taken to control it. The spokesperson should:
    - i. State the facts surrounding the crisis.
  - 6) Highlight rescue efforts.
  - 7) Highlight positive safety record.
  - 8) Use the media to tell the agency’s story.
  - 9) Balance any false statement made by the public or others.
  - 10) An effective means of preparing for a spokesperson’s role is to conduct a simulated press conference. This role-playing exercise can simulate a potential crisis response at your agency by developing a fictional scenario and having the spokesperson answer difficult questions the media may ask pertaining to a crisis.
  - 11) When a spokesperson is confronted with a difficult question, it is best to respond by stating that (the question) is still under investigation and that additional information will be released when available. This will give the spokesperson and the crisis team additional time to confirm facts, gather additional facts and formulate a specific answer to the difficult question.
  - 12) The spokesperson should keep agency employees informed regarding the facts
  - 13) of a crisis when appropriate. Failure to inform employees can lead to the release
  - 14) of misinformation, speculation, and false rumors.

#### Role of Board Members and Elected Officials

- It is recommended that board members and elected officials not make any statements to the news media until after meeting with the Crisis Team or has been

directed by the Crisis Team Head. It is recommended that any statements made to the new media only come through a designated spokesperson.

#### Role of Employees in Dealing with the News Media

- In a crisis, all information should be released from members of the Crisis Team through the designated spokesperson for the agency. Reporters may approach employees who are knowledgeable of the event or who are witnesses to the event. Employees should direct reporters and others to the agency spokesperson for their information.
- Listed below are some guidelines employees can follow when talking with reporters:
  - If a reporter questions you, you are not required to give an interview. If you are uncomfortable, you can say, "I'm not the best person to answer that question. You may want to discuss this with (state proper person), the agency's official spokesperson.
  - It is acceptable not to know the answer to a question. Just openly admit, "I don't know." Direct the reporter to the spokesperson who may have the answer.
  - It is okay to express sympathy for any persons injured during a crisis. However, employees should direct any specific questions concerning the crisis to the agency's spokesperson.
  - Don't say, "No comment." Reporters may interpret the "no comment" phrase to imply guilt and reluctance to talk with the media. You can say, "at this time, it would be premature and speculative to discuss the matter pending further investigation."
  - Don't say anything you don't want to see in print. A negatively phrased "joke" loses its humor in print and can be very embarrassing when read later.
  - Never make an "off-the-record statement." The confidentiality of off-the-record statements cannot be guaranteed.

#### Media Relations Plan

- The Crisis Team Head/Spokesperson will coordinate all interactions with the media. In general, it is beneficial to communicate with the media when accurate information is available. In some cases it may not be prudent to present detailed information on a crisis to the media. The crisis team and legal counsel should make this decision. However, in some situations failure to make an official statement to the media or release information may lead to the media seeking alternative and unreliable sources of information.
- The spokesperson may designate other individuals to be interviewed as appropriate, and will coordinate these interviews and be present for difficult questions. The agency's legal counsel or PDRMA's General Counsel should also be available to assist in answering certain questions.
- It is recommended that waiting media be made as comfortable as reasonable
- possible with electrical power, indoor waiting area, coffee, etc. when applicable.



## **Reunification**

The immediate goal of school reunification drills is to establish safe and orderly procedures for reuniting students with their parents/guardians.

- The Morton Grove Park District is the established reunification site.
- A school safety team is designated consisting of school administrators, teachers, support staff, and Morton Grove law enforcement to direct and oversee the drill.
- The Morton Grove Park District staff will assist in any area requiring help during reunification.
- The Executive Director office space is designated as the command center during reunification.

## **Emergency Phone List**

Listed below are the phone numbers and pager numbers of people to contact in the event of a crisis situation. Please call the individuals in the order listed. If there is no response, then call the next person on the list.

To use pager numbers: dial the pager number and wait for a beep, then dial the number at which you can be reached.

**Executive Director – Jeff Wait** Time called:

Office: 847-965-3007

**Human Resources and Risk Manager– Michelle Trevino** Time called:

Office: 847-965-0538

Cellular: 847-704-0847

**Superintendent of Finance – Marty O’Brien** Time called:

Office: 847-965-3004

**Superintendent of Parks-Keith Gorczyca** Time called:

Office: 847-965-3009

**Superintendent of Recreation- Sue Braubach** Time called:

Office: 847-965-3010

## **News Media Outlets**

### **Television Stations Phone Numbers Email/Fax**

WGN – Channel 9 773-528-2311 [wgntvinfo@tribune.com](mailto:wgntvinfo@tribune.com)

WLS – Channel 7 (ABC) 312-750-7777 No email; Fax 312.899.8019

WMAQ – Channel 5 (NBC) 312-836-5555 Submit via website

WBBM – Channel 2 (CBS) 312-944-6000 [tips@cbschicago.com](mailto:tips@cbschicago.com)

FX:312.849.7200

WFLD – Channel 32 (FOX) 312-565-5532 Submit via website

### **Radio Stations**

WBBM AM 780 800-784-6397 [wbbmnewsradiotips@cbsradio.com](mailto:wbbmnewsradiotips@cbsradio.com)

WGN AM 720 312-222-4700 [tips@wgnradio.com](mailto:tips@wgnradio.com)

### **Daily Newspapers**

Chicago Tribune 312-222-3232 [triblocaltips@tribune.com](mailto:triblocaltips@tribune.com)

FX: 312.222.4674

Chicago Sun Times 312-321-2522 [metro@suntimes.com](mailto:metro@suntimes.com)



Daily Herald 630.955.3500 [suburbanevents@dailyherald.com](mailto:suburbanevents@dailyherald.com)  
Shaw Media – Suburban Life  
Ryan Terrell, Morton Grove Editor 630.427.6252 [rterrell@shawmedia.com](mailto:rterrell@shawmedia.com)  
FX: 630.969.0228  
Kate Schott – Herald News [kschott@shawmedia.com](mailto:kschott@shawmedia.com)  
The Bugle Newspaper 815.436.2431 [jsamples@buglenewspapers.com](mailto:jsamples@buglenewspapers.com)

**Post Crisis Evaluation Form**

Everyone involved with the crisis situation should complete this questionnaire.

1. Name, Date, Position, Department

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2. What was your role?

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3. How did you learn of the incident?

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4. Were you satisfied with how you were notified?

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5. How could notification be improved? \_\_\_\_\_

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6. Rank how you feel the park district handled the crisis. (Scale 1-10: 1=poor,10=excellent) \_\_\_\_\_

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7. How can the park district improve its Crisis Plan? \_\_\_\_\_

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8. How could this accident have been prevented? \_\_\_\_\_

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9. What steps need to be taken to prevent a future incident? \_\_\_\_\_

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**Emergency Operation Guidelines & Crisis Management Plan  
Acknowledgment of Receipt**

The Emergency Operation Guidelines and Crisis Management Plan is an addition to the many safety policies and procedures already in place at the Morton Grove Park District. As an employee, you are expected to read this document thoroughly and return this completed acknowledgment of receipt form, which will be placed in your personnel file.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Date



**MORTON GROVE  
PARK DISTRICT**

## Memorandum

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**To:** Board of Park Commissioners  
**From:** Marty O'Brien, Superintendent of Finance  
**Date:** September 20, 2023  
**Subject:** BINA Hearing Date

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**Issue:**

To set the date for a Bond Issue Notification Act (BINA) hearing.

**Discussion:**

The Board of Park Commissioners is required to conduct this public hearing to receive public comments on the proposal to sell up to \$1,200,000 General Obligation Limited Tax Park Bonds. The bonds will be used to maintain, improve, and protect the existing land and facilities of the District as well as to refund certain outstanding park district obligations. The bonds will be repaid from funds collected through the 2023 tax levies which will be collected in 2024.

The proceeds of the bonds, which are expected to be used for the following items, are tentative and subject to change.

- Oriole Pool Bond and Interest Payments
- Update playground at Palma Lane Park
- Tri Deck Mower
- Utility Truck
- New Roof Top Units for PVCC
- Club Fitness Improvements

We estimate the total cost of these capital projects to be \$1,500,000.

We would like to hold the meeting on October 18, 2023 at 6:30pm. Following the BINA Hearing, the regular Board of Park Commissioners meeting for October will commence.

**Park Board Action:**

To set the date for a BINA hearing for October 18, 2023 at 6:30pm.





**MORTON GROVE  
PARK DISTRICT**

## Memorandum

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**To:** Board of Park Commissioners  
**From:** Jeffrey Wait, Executive Director  
**Date:** September 20, 2023  
**Subject:** Travel, Meals, and Lodging approval

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**Issue:**

The Executive Director will be attending the National Recreation and Parks Association's annual conference from October 9<sup>th</sup> to the 12<sup>th</sup> in Dallas, Texas.

**Discussion:**

Per the State of Illinois' Public Act 99-604 and District Ordinance #O-06-16, all travel, meal, and lodging expenses advanced over \$750.00 for any employee or member of the Board must be approved by majority roll call vote in an open meeting of the Board of Park Commissioners prior to payment.

The attached worksheets contain the estimated travel expense for the Executive Director.

|               |                 |
|---------------|-----------------|
| Airfare       | \$601.81        |
| Hotel         | \$1,108.08      |
| Meals         | \$174.00        |
| Miscellaneous | <u>\$150.00</u> |
| Total         | \$2,033.89      |

The costs for airfare and hotel accommodations have been prepaid on a district credit card. The Executive Director will utilize a district credit card to pay for meals. The amount for meals is based on the district policy of allowing \$18.00 for both breakfast and lunch and \$36.00 for dinner.

The Executive Director will submit receipts for all transactions.

**Park Board Action:**

For the Board of Park Commissioners to approve the travel, meals, and lodging for the Executive Director to attend NRPA in the amount of \$2,033.89.

Morton Grove Park District

## TRAVEL, MEAL AND LODGING EXPENSE REIMBURSEMENT FORM

Name of Official or Employee: Jeffrey Wait

Title/Position of Official or Employees: Director

Name and Date of the Activity/Event: 2023 NRPA Conference – October 9-12, 2023

Check Number (if applicable): \_\_\_\_\_

Credit Card Receipt Number (if applicable): \_\_\_\_\_

Description of the purpose of the expense: Attendance to the National Recreation and Parks Association's annual conference in Dallas, Texas from October 9<sup>th</sup> through 12<sup>th</sup>.

### Estimated Costs or Actual Costs with receipts:

Mileage: \_\_\_\_\_

Estimated Cost of Meals: \$174

Parking: \_\_\_\_\_

Estimated Cost of Hotel/Lodging: \$1,108.08 for four (4) nights

Car rental: \_\_\_\_\_

Airfare: \$601.81

Estimated Cost of Other Transportation (bus, train, taxi, shuttle, etc.): \$150

Employee's/Officer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Director's Authorization: \_\_\_\_\_ Date: \_\_\_\_\_

ATTACH ALL RECEIPTS



**MORTON GROVE  
PARK DISTRICT**

# Memorandum

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**To:** Board of Park Commissioners  
**From:** Jeffrey Wait, Executive Director  
**Date:** September 20, 2023  
**Subject:** Lobbyist discussion

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**Issue:**

The Board needs to discuss if the District should pursue hiring a lobbyist.

**Discussion:**

A Commissioner has inquired about the District hiring a lobbyist to assist it in the pursuit of outside funding in support of the District's financial needs. Staff has spoken with two park districts who utilize a lobbyist to gain an understanding of how they use their lobbyist. Staff has informally shared this information with the Board. It is now appropriate for the Board to discuss if hiring a lobbyist is in the best interest of the District and to provide staff direction to that end.

**Park Board Action:**

For the Board of Park Commissioners to discuss if the District should pursue the hiring of a lobbyist.



## Board Updates & Information

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# Morton Grove Park District

## UPDATE & INFORMATION

September 20, 2023

### RECREATION AND PROGRAMMING REPORT – SUE BRAUBACH

#### General/Special Events

- Staff sent out end of the summer surveys to participants.
- Recreation staff has started working on their 2024 budgets along with planning for winter programs.
- Fall staff have been attending training this past month to prepare for the start of our fall programs.
- Harrer Pool closed for the season on Monday, September 4<sup>th</sup>.
- Upcoming events:

| Event                         | Date                       | Time           | Place                    |
|-------------------------------|----------------------------|----------------|--------------------------|
| Community Blood Drive         | September 30 <sup>th</sup> | 8:00am-Noon    | National Park Fieldhouse |
| Paws N Pose                   | October 7 <sup>th</sup>    | 9:00am         | Prairie View Park        |
| Men's 16" Softball Tournament | October 7 <sup>th</sup>    | 11:00am-3:00pm | Harrer Park              |

#### Kelly Moore - Fitness:

- Circuit Strong class is back from summer hiatus on Wednesday mornings.
- Barre Fusion has moved to Thursdays at 10am and is now taught by Emily O'Neill.
- The women's stretch room has been repainted to match the locker room.
- Our Personal Trainer, Susan, now has an official park district email address and business card to help streamline communication with clients.
- Club Fitness is being advertised with postcards sent to households, banners at the parks, and an ad in school folders.

#### Daniel Bregman - Athletics:

- Fall adult softball leagues began on Tuesday, September 12<sup>th</sup>.
- Requests for softball/baseball and soccer rentals have continued in September.
- Summer Hot Shots sports classes concluded in early August with the fall session beginning the week of September 5<sup>th</sup>.
- Karate classes are set to begin September 6<sup>th</sup> with 84 currently enrolled.
- Tae-kwon-do is set to begin September 5<sup>th</sup> with 13 currently enrolled.

- Gymnasium rentals continue in September on Tuesday, Wednesday, and Thursday evenings and Saturday afternoons.

### **Claire Baumgartner - Camps/Pre-School/Kinder Odyssey**

- Preschool began on September 6<sup>th</sup>. Staff worked hard to set up their classrooms, organize parent meetings, and plan.
- We have a new teacher in our four-year-old class, Her name is Mary Kay Hastings. We are very excited to have her on our team. Preschool is fully staffed.
- Preschool registration as of September 7<sup>th</sup>.
  - Two-year-old: 6 students
  - Three-year-old: 19 students
  - Four-year-old: 26 students
- Kinder Odyssey began in August. Class is located in the Multi-Purpose Room of the Harrer Pool building. The teachers worked hard to turn it into a classroom.
- Kinder Odyssey is full with 26 students enrolled.
- Our Summer Camp wrapped up on August 18<sup>th</sup>. We had a summer full of fun. Evaluations were sent out to parents and are still coming in.

### **Susan Smentek - Dance/Cultural Arts/Sponsorship**

- Fall Dance programs began on September 7<sup>th</sup> with 56 registered as of 9/11. Four new dance instructors have been hired, Miss Alisha, Miss Brook, Miss Jasmine and Miss Natalie.
- Piano lessons begin on September 19<sup>th</sup>. With the addition of instructor Gail Mangurten, we are full with 31 students.
- New voice lesson instructor, Marlene Flood, will begin teaching on September 19<sup>th</sup> with three students.
- The Morton Grove Singers will return to rehearsals on September 21<sup>st</sup>. Spots are still available in this class.
- A new Crochet & Knitting class begins on September 13<sup>th</sup> with 10 participants. Fashion Sewing with Ciao Bella also begins on September 13<sup>th</sup>.
- New Learn to Sign ASL classes, offered via Zoom by Language in Action, have three students starting September 13<sup>th</sup>. Zoom Spanish classes begin on September 11<sup>th</sup> with three students.
- Edits have been made to the Sponsorship program packet for 2023-2024. Current sponsors will be sent information on renewal in October.
- Dog and Puppy Training classes will begin on September 21<sup>st</sup>.
- Registration is open for the Four Winds Casino Trip, Thursday, November 2<sup>nd</sup>.



### **David Torres - Aquatics/B4 School/BASE**

- Harrer Pool is now closed for 2023 – We had a great and safe pool season.
- One month into B4 and B.A.S.E. - staff are doing an outstanding job with the new curriculum/protocol and building a good relationship with the students.
- First Schools Day Off is October 9<sup>th</sup>. Field Trip will be Lambs Farm in Libertyville.

### **Kathy Herrmann - Marketing**

- The monthly E-Newsletter was sent to School District 63, 67, 69 and 70 on September 5<sup>th</sup>.
- Work begins on the Winter Activity Guide soon. Set to go to printer early November. The guide will have listings of programs for December-March.
- Banners, fieldhouse signs and signboards updated for the season.
- Eblast(s) and social media posts to promote Fall programming – ongoing.
- Website updates completed weekly as needed.
- Fitness Postcard is going to print mid – September.
  - Fitness banners to go up on Monday, September 18<sup>th</sup>.

### **FINANCE DEPARTMENT REPORT - MARTY O'BRIEN**

- The Finance Department is starting the budget process for next year. As part of the budget process, we will take into consideration any increases in the minimum wage.
- The Finance Department updated the 2024 capital plan. The capital plan contains what funds we spent this year and what projects we intend to complete in the next five years. We intend to present the final capital plan to the board in October.
- Both Oriole and Harrer Pools were closed for the season and all computer equipment and cash drawers were relocated to the storage room.
- For the September Board Meeting, the Finance Department will request approval from the board to conduct a BINA hearing on October 18, 2023. This hearing is necessary in order to sell bonds in November of 2023.

### **HUMAN RESOURCES & RISK MANAGEMENT– MICHELLE TREVINO**

- Staff completed the end-of-season evaluations.
- Park Patrols will continue to work through September.
- There were eight rentals.
- The Crisis Management Manual has been updated.
- I will be attending a PDRMA Human Resources training in the Glenview Park District.

## **PARKS AND MAINTENANCE – KEITH GORCZYCA**

- Assisted public works with set up for the Sustainability Expo.
- The shade structure project at Harrer ballfield #1 and #2 is completed. New player benches were installed in the dugouts and fencing replaced.
- A new AC unit was installed at the museum.
- Deep cleaning, floor buffing and changeover were completed at Austin, Mansfield and Oketo field houses for the upcoming pre-school season.
- Austin Park ballfield renovations were complete.
- Soccer fields were lined at Hren and Harrer Parks.
- Repairs were completed to the storm drain in the PVCC parking lot.
- Mansfield Park was cleaned up from storm damage to trees.
- PVCC rooms cleaned and prepped for upcoming pre-school classes.
- Routine maintenance items this month included: turf mowing, watering plant material, equipment repairs, facility cleaning, increased trash pickup, park and playground inspections and repairs, facility inspections, vehicle inspections, fire extinguisher inspections, and numerous work order requests.