

TITLE 4**MUNICIPAL PERSONNEL****CHAPTER**

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2. PERSONNEL POLICY.
3. INFECTIOUS DISEASE CONTROL POLICY.
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CHAPTER 1**SOCIAL SECURITY--TOWN PERSONNEL****SECTION**

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4-101. Policy and purpose as to coverage. It is hereby declared to be the policy and purpose of the Town of Burns, Tennessee, to extend as of the date hereinafter set forth, to employees and officials thereof, not excluded by law or this chapter, and whether employed in connection with a governmental or proprietary function, the benefits of the System of Federal Old-Age and Survivors Insurance as authorized by the Federal Social Security Act and amendments thereto, including Public Law 734, 81st Congress. In pursuance of said policy, and for that purpose, the town shall take such action as may be required by applicable state and federal laws or regulations. (1980 Code, § 1-701)

4-102. Necessary agreements to be executed. The mayor of the Town of Burns, Tennessee, is hereby authorized and directed to execute all the necessary agreements and amendments thereto with the director of old age and survivors insurance agency, State of Tennessee, as agent or agency, to secure coverage of employees and officials as provided in the preceding section. (1980 Code, § 1-702)

4-103. Withholdings from salaries or wages. Withholdings from the salaries or wages of employees and officials for the purpose provided in the first section of this chapter are hereby authorized to be made in the amounts and at

such times as may be required by applicable state or federal laws or regulations, and shall be paid over to the state or federal agency designated by said laws or regulations. (1980 Code, § 1-703)

4-104. Appropriations for employer's contributions. There shall be appropriated from available funds such amounts at such times as may be required by applicable state or federal laws or regulations for employer's contributions, and the same shall be paid over to the state or federal agency designated by said laws or regulations. (1980 Code, § 1-704)

4-105. Records and reports. The said town shall keep such records and make such reports as may be required by applicable state and federal laws or regulations. (1980 Code, § 1-705)

4-106. Exclusions. There is hereby excluded from this chapter any authority to make any agreement with respect to any position or any employee or official now covered or authorized to be covered by any other ordinance creating any retirement system for any employee or official of said town or any employee, official or position not authorized to be covered under applicable state or federal laws or regulations.

The mayor is authorized and directed to execute an amendment to said Agreement of 01-01-83 to exclude from coverage under the Federal System of Old Age, Survivors, Disability, Health Insurance, the services of an election worker and an election official if the remuneration paid for such services in a calendar year is less than \$1,000 on or after January 1, 1995, ending on or before December 31, 1999 and, the adjusted amount determined under section 218(c)(8)(B) of the Social Security Act for any calendar year, commencing on or after January 1, 2000, with respect to services performed during any such calendar year. This exclusion to be effective in and after a calendar year in which a state's modification is mailed, or delivered by other means, to the appropriate federal official. (1980 Code, § 1-706, as amended by Ord. #95, Jan. 1995)

4-107. When effective. It being immediately necessary for the preservation of the public peace, health and safety, an emergency is hereby declared to exist by reason whereof this ordinance shall be in full force from and after its passage, and approval, and shall be effective the 16th day of May, 1983. (1980 Code, § 1-707)

CHAPTER 2

PERSONNEL POLICY

SECTION

- 4-201. Personnel policy.
- 4-202. Employees.
- 4-203. Hiring procedures.
- 4-204. Benefits.
- 4-205. Grievances procedures.
- 4-206. State and federal personnel mandates.
- 4-207. Miscellaneous personnel policies.
- 4-208. Dismissal.
- 4-209. Personnel policy changes.

4-201. Personnel policy. (1) Purpose. The purpose of this chapter is to establish a system of personnel administration in the Town of Burns, Tennessee.

(2) At-will employer. The Town of Burns, Tennessee is an at-will employer. Nothing in this chapter may be constructed as creating a property right or contract right to any job for any employee.

(3) Coverage. The following personnel are not covered by this policy, unless otherwise provided:

- (a) All elected officials.
- (b) Members of appointed boards and commissions.
- (c) Consultants, advisers, and legal council rendering temporary professional service.
- (d) The city attorney.
- (e) Independent contractors and/or contract employees.
- (f) Volunteer personnel.
- (g) The city judge.
- (h) The city court clerk.

All other employees of the municipal government are covered by this personnel policy. (1980 Code, § 1-901, as amended by Ord. #87, Feb. 1994; and replaced by Ord. #117, § 1, June 1998)

4-202. Employees. (1) Full-time. Full-time employees are individuals employed by the municipal government who normally work 40 hours per week.

(2) Part-time. Part-time employees are individuals who may not work on a daily basis or work on a daily basis fewer than 8 hours a day and may work fewer than 30 hours per week or who are temporary and/or seasonal employees. (1980 Code, § 1-902, as replaced by Ord. #117, § 2, June 1998)

4-203. Hiring procedures. (1) Policy statement. The primary objective of this hiring policy is to insure compliance with the law and to obtain qualified personnel to serve the citizens of the municipality. The municipality shall make reasonable accommodations in all hiring procedures for all persons with disabilities.

(2) Application. All persons seeking appointment or employment with the municipality must complete a standard application form provided by the municipal government. Applications for employment shall be accepted in the city clerk's office during regular working hours only. Applications will remain on active status for six (6) months after accepted or until the job for which the application is submitted is filled, whichever period of time is less.

(3) Interviews. All appointments will be preceded by an interview with the department head.

(4) Pre-appointment exams. For certain positions, the employee may be required to undergo a validated physical agility examination related to the essential functions of the job, validated written and/or oral test related to the essential functions of the job, drug testing, and upon a conditional offer of employment, a medical examination to determine the employee's ability to perform the essential functions of the job. Reasonable accommodations shall be made in the physical agility exam for applicants with disabilities making a request for accommodations.

(5) Appointments, etc. All appointments shall be made in accordance with lawful provisions of the municipal charter if there are applicable provisions in the charter. (1980 Code, § 1-903, as replaced by Ord. #117, § 3, June 1998)

4-204. Benefits. (1) Holidays. Generally full-time employees are allowed a day off with pay on the following holidays:

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|-----|------------------------|--------------------------|
| (a) | New Years Day | January 1st |
| (b) | M. L. King Day | 3rd Monday in January |
| (c) | Presidents Day | 3rd Monday in February |
| (d) | Memorial Day | Last Friday in May |
| (e) | Independence Day | July 4th |
| (f) | Labor Day | 1st Monday in September |
| (g) | Columbus Day | 2nd Monday in October |
| (h) | Veterans Day | November 11th |
| (i) | Thanksgiving Day | 4th Thursday in November |
| (j) | Day after Thanksgiving | 4th Friday in November |
| (k) | Christmas Eve | December 24th |
| (l) | Christmas Day | December 25th |

Employees must be in a pay status on the work day before and the work day after the holiday, unless otherwise excused by their supervisor, to receive compensation for the holiday.

Any employee required to work on a regular holiday shall be granted 8 hours off on an alternate day approved by the supervisor or an additional 8 hours pay for the holiday.

(2) Vacation leave. Vacation leave period is from January 1, to December 31, of each calendar year and cannot be carried over to the next calendar year.

All full-time employees of the municipality shall accrue vacation leave monthly upon the compensation of each calendar month of service. Vacation leave will begin to accrue as of the first full month of employment, but cannot be taken until the employee has completed six (6) months of employment. As the number of years of service increases, the amount of leave granted increases and may accumulate to the maximum accrual as shown below:

- | | | |
|-----|--------------------|-----------------|
| (a) | After one year | One (1) week |
| (b) | After four years | Two (2) weeks |
| (c) | After eight years | Three (3) weeks |
| (d) | After twelve years | Four (4) weeks. |

Vacation leave shall be taken at a time approved by the employee's supervisor. Upon separation, employees are entitled to be reimbursed for any unused vacation leave, not to exceed the maximum accrual allowed for the years of service completed.

(3) Sick leave. All full-time employees shall accumulate one (1) day of sick leave with pay for each month of work completed for the municipality, maximum accumulation of 120 days. Sick leave shall be granted for any of the following reasons:

- (a) Person illness or physical incapacity resulting from causes beyond the employee's control.
- (b) Exposure to contagious disease so that employee's presence at work might jeopardize the health of other employees.
- (c) Medical, dental, optical or other professional treatments or examinations.
- (d) Acute illness.

An employee may be granted five (5) days off with pay for death of a member of the employee's immediate family (i.e. spouse, parents, children). In cases of other relatives they may be granted three (3) days off with pay. Sick leave shall be taken in daily increments. Employee's shall not be paid for unused sick leave upon the employee's termination, resignation, or retirement. (as added by Ord. #117, § 4, June 1998)

4-205. Grievance policy. The purpose of this section is to prescribe uniform disposition procedures of grievances presented by individual employees. A grievance is a written question, disagreement, or misunderstanding concerning administrative orders involving only the employee's work area, reasonable accommodations under Americans with Disabilities Act, physical

facilities, unsafe equipment, or unsafe material used. The grievance must be submitted within (5) working days of the incident causing the grievance.

Employees must remember that there is no grievance until the department head or other appropriate persons has been made aware of the dissatisfaction by written notice. Once this is done, the following steps are to be taken:

Step 1. Discuss the problem with the immediate supervisor. If satisfaction is not obtained, the grievance is advanced to the second step.

Step 2. Discuss the problem with the appropriate department head. If the grievance is not resolved, it is advanced to the third step along with all documentation.

Step 3. Discuss the problem with the mayor of the municipality. If the grievance is not resolved, it is advanced to the fourth step along with all documentation.

Step 4. Discuss the problem with the city council. The council's decision is the last and final step in the process. The decision of the council is final and binding to all parties involved. (as added by Ord. #117, § 5, June 1998)

4-206. State and federal personnel mandates. (1) Discrimination prohibited. The municipality is an equal opportunity employer. Except as otherwise permitted by law, the municipality will not discharge or fail or refuse to hire any individual or otherwise discriminate against any individual with respect to compensation, terms, conditions, or privileges of employment because of the individual's race, color, religion, gender, or national origin, or because the individual is forty (40) or more years of age. The municipality will not discriminate against a qualified individual with a disability in regard to job application procedures, hiring or discharge, employee compensation, job training, or other terms, conditions, and privileges of employment. (Title VII of Civil Rights Act of 1964-42 USC, 2000e15; Equal Act 1963-29 USC 206(d); Age Discrimination in Employment Act-29 USC 621 et seq; Americans with Disabilities Act-42 USC 506 et seq).

(2) Sexual harassment prohibited. Sexual harassment by any employee or elected or appointed official of the municipality will not be tolerated. Sexual harassment is unwanted sexual conduct, based upon sex, by an employee's supervisor(s) or fellow employees or others at the work place that creates a hostile work environment, makes decisions contingent on sexual favors, or adversely affects an employee's job performance. Examples of conduct that may constitute sexual harassment are: sexual advances, request for sexual favors, propositions, physical touching, sexually provocative language, sexual jokes, and display of sexually-oriented pictures or photographs.

Any employee who believes that he/she has been subjected to sexual harassment should immediately report this to their supervisor or a member of

the city council. Within the limits of the Tennessee Open Records Law, the municipality will handle the matter with as much confidentiality as possible. There will be no retaliation against an employee who makes a claim of sexual harassment or who is a witness to the harassment. The municipality will conduct an immediate investigation in an attempt to make the corrective action reflect the severity of the conduct. If it is determined that no harassment has occurred, this will be communicated to the employee who made the complaint, along with the reasons for determination.

(3) Occupational safety and health. The municipality shall provide job safety and health protection for all employees in accordance with the Occupation Safety and Health Administration (OSHA) Legislation (29 USC 656 et seq.) and the Tennessee OSHA Law (Tennessee Code Annotated, § 50-3-101 et seq.).

(4) Overtime compensation. The Fair Labor Standards Act (FLSA) shall govern the overtime compensation of municipal employees (29 CFR 553.1 et seq.).

(5) Military leave/veterans' re-employment. All employees who are members of reserve components of armed forces, including the National Guard, are entitled to leave while engaged in "duty or training in the service of this state, or of the United States, under competent orders," they must given such leave with pay not exceeding 15 working days in any one calendar year (Tennessee Code Annotated, § 8-33-109). Also, any employee of the municipality who leaves his/her job voluntarily or involuntarily, to enter active duty in the armed forces may return to the job in accordance with Veterans' Re-employment Rights (38 USC 202-2016) and the Tennessee Military Leave Act (Tennessee Code Annotated, § 8-33-101 et seq.).

(6) Family and medical leave. N/A less than 50 employees.

(7) Commercial driver's license. Fire truck, police vehicle, and emergency medical vehicle operators are exempt from the CDL requirements.

(8) Employee drug testing. Employees may be subjected to drug testing if required by department heads or the city council.

(9) [Deleted.] This subsection was deleted by Ord. #144, June 2002.

(10) Employee right to contact officials. No employee shall be disciplined or discriminated against for communicating with an elected official. However an employee may be reprimanded for making untrue allegations concerning any job-related matter (Tennessee Code Annotated, § 8-50-601-604).

(11) Civil leave. Civil leave with pay shall be granted to employees for the following reasons:

(a) Jury duty (Tennessee Code Annotated, § 22-4-108).

(b) To answer a subpoena to testify for the municipality.

(12) Voting. When elections are held in the state, leave for the purpose of voting, if requested, shall be in accordance with Tennessee Code Annotated, § 2-1-106.

(13) Political activity. Employees have the same rights as other citizens to be a candidate for state or local political and to participate in political

activities by supporting or opposing political parties, political candidates, and petitions to governmental entities. No employee may campaign on municipal time or in municipal uniform nor use municipal equipment or supplies in any campaign or election (Tennessee Code Annotated, § 7-51-1501).

(14) Travel policy. All employees, including elected and appointed officials, are required to comply with the municipality's travel policy BMC, Title 4, Chapter 4, and as required by Tennessee Code Annotated, § 6-54-901. (as added by Ord. #117, § 6, June 1998, and amended by Ord. #144, June 2002)

4-207. Miscellaneous personnel policies. (1) Outside employment. No full-time employee of the municipality may accept any outside employment without written authorization from the department head.

(2) Use of municipal time, vehicles, facilities, etc. No employee may use or authorize the use of municipal time, facilities, equipment, or supplies for private gain or advantage to oneself or any other person, group, or organization other than the municipality. Decisions about aid to charitable, civic or other organizations will be made exclusively by the governing body.

(3) Accepting of gratuities. No employee shall accept any money, other considerations, or favors from anyone other than the municipality for performing an act that he/she would be required or expected to perform in the regular course of his/duties. No employee shall accept, directly or indirectly, any gift, gratuity, or favor of any kind that might reasonably be interpreted as an attempt to influence his/her actions with respect to the municipality's business. (as added by Ord. #117, § 7, June 1998)

4-208. Dismissal. (1) At-will. Employees may be dismissed for cause, for no cause, or for any cause as long as it does not violate federal and/or state law or the municipal charter.

(2) Name-clearing hearing. A name-clearing will be given to any terminated, demoted, or suspended employee that requests one. This hearing will not be conducted to provide an employee any property rights. The purpose of the hearing is solely to let the employee clear his/her name. (as added by Ord. #117, § 8, June 1998)

4-209. Personnel policy changes. Nothing in this chapter may be construed as creating a property right or contract right to the job for any employee. The provisions of this personnel policy may be changed by ordinance from time to time as the need arises. (as added by Ord. #117, § 8, June 1998)

CHAPTER 3

INFECTIOUS DISEASE CONTROL POLICY

SECTION

- 4-301. Purpose.
- 4-302. Coverage.
- 4-303. Administration.
- 4-304. Definitions.
- 4-305. Policy statement.
- 4-306. General guidelines.
- 4-307. Specific guidelines for town departments.
- 4-308. Hepatitis B vaccinations.
- 4-309. Reporting potential exposure.
- 4-310. Hepatitis B virus post-exposure management.
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- 4-312. Disability benefits.
- 4-313. Training regular employees.
- 4-314. Training high risk employees.
- 4-315. Training new employees.
- 4-316. Records and reports.
- 4-317. Legal rights of victims of communicable diseases.

4-301. Purpose. It is the responsibility of the Town of Burns to provide employees a place of employment which is free from recognized hazards that may cause death or serious physical harm. In providing services to the citizens of the Town of Burns, employees may come in contact with life-threatening infectious diseases which can be transmitted through job related activities. It is important that both citizens and employees are protected from the transmission of diseases just as it is equally important that neither is discriminated against because of basic misconceptions about various diseases and illnesses.

The purpose of this policy is to establish a comprehensive set of rules and regulations governing the prevention of discrimination and potential occupational exposure to Hepatitis B Virus (HBV), the Human Immunodeficiency Virus (HIV), and Tuberculosis (TB). (1980 Code, § 1-1001(1))

4-302. Coverage. Occupational exposures may occur in many ways, including needle sticks, cut injuries or blood spills. Several classes of employees are assumed to be at high risk for blood borne infections due to their routinely increased exposure to body fluids from potentially infected individuals. Those high risk occupations include but are not limited to:

- (1) Paramedics and emergency medical technicians;
- (2) Occupational nurses;

- (3) Housekeeping and laundry workers;
- (4) Police and security personnel;
- (5) Firefighters;
- (6) Sanitation and landfill workers; and
- (7) Any other employee deemed to be at high risk per this policy and an exposure determination. (1980 Code, § 1-1001(2))

4-303. Administration. This infection control policy shall be administered by the mayor or his/her designated representative who shall have the following duties and responsibilities:

- (1) Exercise leadership in implementation and maintenance of an effective infection control policy subject to the provisions of this chapter, other ordinances, the town charter, and federal and state law relating to OSHA regulations;
- (2) Make an exposure determination for all employee positions to determine a possible exposure to blood or body fluids;
- (3) Maintain records of all employees and incidents subject to the provisions of this chapter;
- (4) Conduct periodic inspections to determine compliance with the infection control policy by municipal employees;
- (5) Coordinate and document all relevant training activities in support of the infection control policy;
- (6) Prepare and recommend to the board of commissioners any amendments or changes to the infection control policy;
- (7) Identify any and all housekeeping operations involving substantial risk of direct exposure to body fluids and shall address the proper precautions to be taken while cleaning rooms and blood spills; and
- (8) Perform such other duties and exercise such other authority as may be prescribed by the board of commissioners. (1980 Code, § 1-1001(3))

4-304. Definitions. (1) "Body fluid" - fluids that have been recognized by the Center for Disease Control as directly linked to the transmission of HIV and/or HBV and/or to which universal precautions apply: blood, semen, blood products, vaginal secretions, cerebrospinal fluid, synovial fluid, pericardial fluid, amniotic fluid, and concentrated HIV or HBV viruses.

(2) "Exposure" - the contact with blood or other body fluids to which universal precautions apply through contact with open wounds, non-intact skin, or mucous membranes during the performance of an individual's normal job duties.

(3) "Hepatitis B Virus (HBV)" - a serious blood-borne virus with potential for life-threatening complications. Possible complications include: massive hepatic necrosis, cirrhosis of the liver, chronic active hepatitis, and hepatocellular carcinoma.

(4) "Human Immunodeficiency Virus (HIV)" - the virus that causes acquired immunodeficiency syndrome (AIDS). HIV is transmitted through sexual contact and exposure to infected blood or blood components and perinatally from mother to neonate.

(5) "Tuberculosis (TB)" - an acute or chronic communicable disease that usually affects the respiratory system, but may involve any system in the body.

(6) "Universal precautions" - refers to a system of infectious disease control which assumes that every direct contact with body fluid is infectious and requires every employee exposed to direct contact with body fluids to be protected as though such body fluid were HBV or HIV infected. (1980 Code, § 1-1001(4))

4-305. Policy statement. All blood and body fluids are potentially infectious for several blood-borne pathogens and some body fluids can also transmit infections. For this reason, the Center for Disease Control developed the strategy that everyone should always take particular care when there is a potential exposure. These precautions have been termed "universal precautions."

Universal precautions stress that all persons should be assumed to be infectious for HIV and/or other blood-borne pathogens. Universal precautions apply to blood, tissues, and other body fluids which contain visible blood. Universal precautions also apply to semen, (although occupational risk or exposure is quite limited), vaginal secretions, and to cerebrospinal, synovial, pleural, peritoneal, pericardial and amniotic fluids. Universal precautions do not apply to feces, nasal secretions, human breast milk, sputum, saliva, sweat, tears, urine, and vomitus unless these substances contain visible blood. (1980 Code, § 1-1002(1))

4-306. General guidelines. General guidelines which shall be used by everyone include:

(1) Think when responding to emergency calls and exercise common sense when there is potential exposure to blood or body fluids which require universal precautions.

(2) Keep all open cuts and abrasions covered with adhesive bandages which repel liquids.

(3) Soap and water kill many bacteria and viruses on contact. If hands are contaminated with blood or body fluids to which universal precautions apply, then wash immediately and thoroughly. Hands shall also be washed after gloves are removed even if the gloves appear to be intact. When soap and water or handwashing facilities are not available, then use a waterless antiseptic hand cleaner according to the manufacturers recommendation for the product.

(4) All workers shall take precautions to prevent injuries caused by needles, scalpel blades, and other sharp instruments. To prevent needle stick

injuries, needles shall not be recapped, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand. After they are used, disposable syringes and needles, scalpel blades and other sharp items shall be placed in puncture resistant containers for disposal. The puncture resistant container shall be located as close as practical to the use area.

(5) The town will provide gloves of appropriate material, quality and size for each affected employee. The gloves are to be worn when there is contact (or when there is a potential contact) with blood or body fluids to which universal precautions apply:

- (a) While handling an individual where exposure is possible;
- (b) While cleaning or handling contaminated items or equipment;
- (c) While cleaning up an area that has been contaminated with one of the above;

Gloves shall not be used if they are peeling, cracked, or discolored, or if they have punctures, tears, or other evidence of deterioration. Employees shall not wash or disinfect surgical or examination gloves for reuse.

(6) Resuscitation equipment shall be used when necessary. (No transmission of HBV or HIV infection during mouth-to-mouth resuscitation has been documented.) However, because of the risk of salivary transmission of other infectious diseases and the theoretical risk of HIV or HBV transmission during artificial resuscitation, bags shall be used. Pocket mouth-to-mouth resuscitation masks designed to isolate emergency response personnel from contact with a victims' blood and blood contaminated saliva, respiratory secretion, and vomitus, are available to all personnel to provide or potentially provide emergency treatment.

(7) Masks or protective eyewear or face shields shall be worn during procedures that are likely to generate droplets of blood or body fluids to prevent exposure to mucous membranes of the mouth, nose, and eyes. They are not required for routine care.

(8) Gowns, aprons, or lab coats shall be worn during procedures that are likely to generate splashes of blood or other body fluids.

(9) Areas and equipment contaminated with blood shall be cleaned as soon as possible. A household (chlorine) bleach solution (1 part chlorine to 10 parts water) shall be applied to the contaminated surface as a disinfectant leaving it on for a least 30 seconds. A solution must be changed and re-mixed every 24 hours to be effective.

(10) Contaminated clothing (or other articles) shall be handled carefully and washed as soon as possible. Laundry and dish washing cycles at 120° are adequate for decontamination.

(11) Place all disposable equipment (gloves, masks, gowns, etc...) in a clearly marked plastic bag. Place the bag in a second clearly marked bag (double bag). Seal and dispose of by placing in a designated "hazardous"

dumpster. **NOTE:** Sharp objects must be placed in an impervious container and then taken to a hospital for disposal.

(12) Tags shall be used as a means of preventing accidental injury or illness to employees who are exposed to hazardous or potentially hazardous conditions, equipment or operations which are out of the ordinary, unexpected or not readily apparent. Tags shall be used until such time as the identified hazard is eliminated or the hazardous operation is completed.

All required tags shall meet the following criteria:

(a) Tags shall contain a signal word and a major message. The signal word shall be "BIOHAZARD", or the biological hazard symbol. The major message shall indicate the specific hazardous condition or the instruction to be communicated to employees.

(b) The signal word shall be readable at a minimum distance of five (5) feet or such greater distance as warranted by the hazard.

(c) All employees shall be informed of the meaning of the various tags used throughout the workplace and what special precautions are necessary.

(13) Linen soiled with body fluids shall be handled as little as possible and with minimum agitation to prevent contamination of the person handling the linen. All soiled linen shall be bagged at the location where it was used. It shall not be sorted or rinsed in the area. Soiled linen shall be placed and transported in bags that prevent leakage.

The employee responsible for transported soiled linen should always wear protective gloves to prevent possible contamination. After removing the gloves, hands or other skin surfaces shall be washed thoroughly and immediately after contact with body fluids.

(14) Whenever possible, disposable equipment shall be used to minimize and contain clean-up. (1980 Code, § 1-1002(2))

4-307. Specific guidelines for town departments. (1) **Fire and emergency medical services.** These guidelines apply to fire and emergency medical services. This includes structural fire fighters, paramedics, emergency medical technicians, and advanced life support personnel. Fire and emergency medical services personnel are engaged in the delivery of medical care in the prehospital setting. The following guidelines are intended to assist these personnel in making decisions concerning use of personal protective equipment and resuscitation equipment, as well as for decontamination, disinfection, and disposal procedures.

(a) Appropriate personal protective equipment shall be made available routinely by the town to reduce the risk of exposure as defined above. For many situations, the chance that the rescuer will be exposed to blood and other body fluids can be determined in advance. Therefore, if the chances of being exposed to blood is high (e.g. CPR, IV insertion,

trauma, delivering babies, etc...), the employee shall put on protective attire before beginning patient care.

(b) Disposable gloves shall be a standard component of emergency response equipment, and shall be donned by all personnel prior to initiating any emergency patient care tasks involving exposure to blood or other body fluids. Extra pairs shall always be available. For situations where large amounts of blood are likely to be encountered, it is important that gloves fit tightly at the wrist to prevent blood contamination of hands around the cuff. For multiple trauma victims, gloves should be changed between patient contacts, if the emergency situation allows.

Greater personal protective equipment measures are indicated for situations where broken glass and sharp edges are likely to be encountered, such as extricating a person from an automobile wreck. Structural fire-fighting gloves that meet the Federal OSHA requirements for fire-fighters' gloves shall be worn in any situation where sharp or rough surfaces are likely to be encountered.

While wearing gloves, avoid handling personal items, such as combs and pens, that could become soiled or contaminated. Gloves that have become contaminated with blood or other body fluids should be removed as soon as possible, taking care to avoid skin contact with the exterior surface. Contaminated gloves shall be placed and transported in bags that prevent leakage and shall be disposed of properly. Reusable gloves shall be cleaned and disinfected immediately.

(c) Masks, eyewear, and gowns shall be present on all emergency vehicles that respond or potentially respond to medical emergencies or victim rescues. These protective barriers shall be used in accordance with the level of exposure encountered. Minor lacerations or small amounts of blood do not merit the same extent of barrier use as required for exsanguinating victims or massive arterial bleeding.

Management of the patient who is not bleeding, and who has no bloody body fluids present, should not routinely require use of barrier precautions. Masks and eyewear shall be worn together, or a faceshield shall be used by all personnel prior to any situation where splashes of blood or other body fluids are likely to occur. Gowns or aprons shall be worn to protect clothing from splashes with blood. If large splashes or quantities of blood are present or anticipated, impervious gowns or aprons shall be worn. An extra change of work clothing should also be available at all times.

(d) Disposable resuscitation equipment and devices shall be used once and disposed of or, if reusable, thoroughly cleaned and disinfected after each use. Mechanical respiratory assist devices such as bag-valve masks or oxygen demand valve resuscitators shall be available on all emergency vehicles and to all emergency response personnel who

respond or potentially respond to medical emergencies of victim rescues. Pocket mouth-to-mouth resuscitation masks designed to isolate emergency response personnel from contact with a victims' blood and blood contaminated saliva, respiratory secretions, and vomitus shall be provided to all personnel who provide or potentially provide emergency treatment.

(2) Law enforcement and security officers. Law enforcement officers and security personnel may face the risk of exposure to blood during the conduct of their duties. There is an extremely diverse range of potential situations which may occur in the control of persons with unpredictable, violent, or psychotic behaviors. Therefore, informed judgment of the individual officer is paramount when unusual circumstance or events arise.

The following guidelines are intended to serve as an adjunct to rational decision making in those situations where specific guideline do not exist, particularly where immediate action is required to preserve life or prevent significant injury.

(a) Law-enforcement and security personnel are exposed to a range of assaultive and disruptive behavior through which they may potentially become exposed to blood or other body fluids containing blood. Behaviors of particular concern are biting, attacks resulting in blood exposure, and attacks with sharp objects. Such behavior may occur in a range of law enforcement situations including arrests, routine interrogations, domestic disputes, and lockup operations. Hand-to-hand combat may result in bleeding and may thus incur a greater chance for blood-to-blood exposure.

In all cases, extreme caution must be used in dealing with suspects if there is any indication of assaultive or combative behavior. When blood is present and a suspect is combative or threatening to staff, gloves should always be put on as soon as conditions permit. In case of blood contamination of clothing, an extra change of clothing should be available at all times.

(b) Law enforcement personnel should also be concerned about infection through the administration of cardiopulmonary resuscitation. Protective masks or airways shall also be available to officers and provided with the proper training in their use.

(c) An officer should use great caution in searching the clothing of suspects. Individual discretion, based on the circumstances at hand, should determine if a suspect or prisoner should empty his/her own pockets or if the officer should use his own skills in determining the contents of a suspect's clothing. When a search is warranted the following guidelines shall be used:

(i) A safe distance should always be maintained between the officer and the suspect.

(ii) Protective gloves should be worn if exposure to blood is likely to be encountered.

(iii) Protective gloves should be used for all body cavity searches.

(iv) If cotton gloves are to be worn when working with evidence of potential latent fingerprints value at the crime scene, they can be worn over protective disposable gloves when exposure to blood may occur.

(v) Always carry a flashlight, even during the daylight shifts, to search hidden areas. Whenever possible, use long-handled mirrors and flashlights to search under car seats.

(vi) If searching a purse, carefully empty contents directly from the purse, by turning it upside down over a table.

(vii) Use puncture-proof containers to store sharp instruments and clearly mark plastic bags to store other possibly contaminated items.

(viii) To avoid tearing gloves, use evidence tape instead of metal staples to seal evidence.

(ix) When possible evidence items should be air dried before sealing in plastic.

(d) Officers and crime scene technicians may confront unusual hazards, especially when the crime scene involves violent behavior, such as a homicide where large amounts of blood are present. Protective gloves shall be available and worn in this setting. In addition, for very large spills, consideration should be given to other protective clothing, such as overalls, aprons, boots, or protective shoe covers. They should be changed if torn or soiled, and always remove prior to leaving the scene. While wearing gloves, avoid handling personal items, such as combs and pens, that could become soiled or contaminated.

(e) Face masks and eye protection or a face shield are required for laboratory and evidence technicians whose jobs entail potential exposure to blood via a splash to the face, mouth, nose, or eyes. Airborne particles of dried blood may be generated when a stain is scraped.

(f) While processing the crime scene, personnel should be alert for the presence of sharp objects such as hypodermic needles, knives, razors, broken glass, nails, or other sharp objects.

(g) For detectives, investigators, evidence technicians, and others who may have to touch or remove a body, the response should be the same as for situations requiring CPR or first aid;

(i) Wear gloves and cover all cuts and abrasions to create a barrier and carefully wash all exposed areas after any contact with blood.

(ii) The precautions to be used with blood and deceased persons should also be used when handling amputated limbs, hands, or other body parts.

(h) Protective masks and eyewear, laboratory coats, gloves, and waterproof aprons should be worn when performing or attending all autopsies. All autopsy materials should be considered infectious for both HIV and HBV. Onlookers with an opportunity for exposure to blood splashes should be similarly protected.

(3) Housekeeping and sanitation. All places of employment, passageways, storerooms, and service rooms shall be kept clean and orderly and in a sanitary condition. When a blood or body fluid spill occurs, one of the following disinfecting techniques shall be used:

(a) A chemical germicide that is approved for use as a hospital disinfectant shall be used.

(b) A product registered by the Environmental Protection Agency as being effective against HIV shall be used.

(c) A solution of 5.25% sodium hypochlorite (household bleach) diluted between 1:10 and 1:100 with water.

Any receptacle used for decaying or rotten solids or liquid waste or refuse shall be so constructed that it does not leak and may be thoroughly cleaned and maintained in a sanitary condition. Such a receptacle shall be equipped with a solid, tight-fitting cover, unless it can be maintained in a sanitary condition with a cover.

All sweeping, solid or liquid wastes, refuse, and garbage shall be removed in such a manner to avoid creating a menace to health and as often as necessary or appropriate to maintain the place of employment in a sanitary condition. (1980 Code, § 1-1003)

4-308. Hepatitis B vaccinations. The Town of Burns shall offer the appropriate Hepatitis B vaccination to employees at risk of exposure free of charge and in amounts and at times prescribed by standard medical practices. The vaccination shall be voluntarily administered. High risk employees who wish to take the HBV vaccination should notify their department head who shall make the appropriate arrangements through the Infectious Disease Control Coordinator. (1980 Code, § 1-1004(1))

4-309. Reporting potential exposure. Town employees shall observe the following procedures for reporting a job exposure incident that may put them at risk for HIV or HBV infections (i.e., needle sticks, blood contact on broken skin, body fluid contact with eyes or mouth, etc...):

(1) Notify the Infectious Disease Control Coordinator of the contact incident and details thereof.

(2) Complete the appropriate accident reports and any other specific form required.

(3) Arrangements will be made for the person to be seen by a physician as with any job-related injury.

Once an exposure has occurred, a blood sample should be drawn after consent is obtained from the individual from whom exposure occurred and tested for Hepatitis B surface antigen (HBsAg) and/or antibody to human immunodeficiency virus (HIV antibody). Testing of the source individual should be done at a location where appropriate pretest counseling is available. Post-test counseling and referral for treatment should also be provided. (1980 Code, § 1-1004(2))

4-310. Hepatitis B virus post-exposure management. For an exposure to a source individual found to be positive for HBsAg, the worker who has not previously been given the hepatitis B vaccine should receive the vaccine series. A single dose of hepatitis B immune globulin (HBIG) is also recommended, if it can be given within seven (7) days of exposure.

For exposure from an HBsAg-positive source to workers who have previously received the vaccine, the exposed worker should be tested for antibodies to hepatitis B surface antigen (anti-HBs), and given one dose of vaccine and one dose of HBIG if the antibody level in the worker's blood sample is inadequate (ie., 10 SRU by RIA, negative by EIA).

If the source individual is negative for HBsAg and the worker has not been vaccinated, this opportunity should be taken to provide the hepatitis B vaccine series. HBIG administration should be considered on an individual basis when the source individual is known or suspected to be at high risk of HBV infection. Management and treatment, if any, of previously vaccinated workers who receive an exposure from a source who refuses testing or is not identifiable should be individualized. (1980 Code, § 1-1004(3))

4-311. Human immunodeficiency virus post-exposure management. For any exposure to a source individual who has AIDS, who is found to be positive for HIV infection, or who refuses testing, the worker should be counseled regarding the risk of infection and evaluated clinically and serologically for evidence of HIV infection as soon as possible after the exposure. The worker should be advised to report and seek medical evaluation for any acute febrile illness that occurs within 12 weeks after the exposure. Such an illness, particularly one characterized by fever, rash, or lymphadenopathy, may be indicative of recent HIV infection.

Following the initial test at the time of exposure, seronegative workers should be retested 6 weeks, 12 weeks, and 6 months after exposure to determine whether transmission has occurred. During this follow-up period (especially the first 6 - 12 weeks after exposure) exposed workers should follow the U.S. Public Health service recommendation for preventing transmission of HIV. These include refraining from blood donations and using appropriate protection during

sexual intercourse. During all phases of follow-up, it is vital that worker confidentiality be protected.

If the source individual was tested and found to be seronegative, baseline testing of the exposed worker with follow-up testing 12 weeks later may be performed if desired by the worker or recommended by the health care provider. If the source individual cannot be identified, decisions regarding appropriate follow-up should be individualized. Serologic testing should be made available by the town to all workers who may be concerned they have been infected with HIV through an occupational exposure. (1980 Code, § 1-1004(4))

4-312. Disability benefits. Entitlement to disability benefits and any other benefits available for employees who suffer from on-the-job injuries will be determined by the Tennessee Worker's Compensations Bureau in accordance with the provisions of T.C.A. 50-6-303. (1980 Code, § 1-1004(5))

4-313. Training regular employees. On an annual basis all employees shall receive training and education on precautionary measures, epidemiology, modes of transmission and prevention of HIV/HBV infection and procedures to be used if they are exposed to needle sticks or body fluids. They shall also be counseled regarding possible risks to the fetus from HIV/HBV and other associated infectious agents. (1980 Code, § 1-1005(1))

4-314. Training high risk employees. In addition to the above, high risk employees shall also receive training regarding the location and proper use of personal protective equipment. They shall be trained concerning proper work practices and understand the concept of "universal precautions" as it applies to their work situation. They shall also be trained about the meaning of color coding and other methods used to designate contaminated material. Where tags are used, training shall cover precautions to be used in handling contaminated material as per this policy. (1980 Code, § 1-1005(2))

4-315. Training new employees. During the new employee's orientation to his/her job, all new employee will be trained on the effects of infectious disease prior to putting them to work. (1980 Code, § 1-1005(3))

4-316. Records and reports. (1) Reports. Occupational injury and illness records shall be maintained by the infectious disease control coordinator. Statistics shall be maintained on the OSHA-200 report. Only those work-related injuries that involve loss of consciousness, transfer to another job, restriction of work or motion, or medical treatment are required to be put on the OSHA-200.

(2) Needle sticks. Needle sticks, like any other puncture wound, are considered injuries for recordkeeping purposes due to the instantaneous nature of the event. Therefore, any needle stick requiring medical treatment (i.e.

gamma globulin, hepatitis B immune globulin, hepatitis B vaccine, etc...) shall be recorded.

(3) Prescription medication. Likewise, the use of prescription medication (beyond a single dose for minor injury or discomfort) is considered medical treatment. Since these types of treatment are considered necessary, and must be administered by physician or licensed medical personnel, such injuries cannot be considered minor and must be reported.

(4) Employee interviews. Should the town be inspected by the U.S. Department of Labor Office of Health Compliance, the compliance safety and health officer may wish to interview employees. Employees are expected to cooperate fully with the compliance officers. (1980 Code, § 1-1006)

4-317. Legal rights of victims of communicable diseases. Victims of communicable diseases have the legal right to expect, and municipal employees, including police and emergency service officers are duty bound to provide, the same level of service and enforcement as any other individual would receive.

(1) Officers assume that a certain degree of risk exists in law enforcement and emergency service work and accept those risks with their individual appointments. This holds true with any potential risks of contacting a communicable disease as surely as it does with the risks of confronting an armed criminal.

(2) Any officer who refuses to take proper action in regard to victims of a communicable disease, when appropriate protective equipment is available, shall be subject to disciplinary measures along with civil and, or criminal prosecution.

(3) Whenever an officer mentions in a report that an individual has or may have a communicable disease, he shall write "contains confidential medical information" across the top margin of the first page of the report.

(4) The officer's supervisor shall ensure that the above statement is on all reports requiring that statement at the time the report is reviewed and initiated by the supervisor.

(5) The supervisor disseminating newspaper releases shall make certain the confidential information is not given out to the news media.

(6) All requests (including subpoenas) for copies of reports marked "contains confidential medical information" shall be referred to the town attorney when the incident involves an indictable or juvenile offense.

(7) Prior approval shall be obtained from the town attorney before advising a victim of sexual assault that the suspect has, or is suspected of having a communicable disease.

(8) All circumstances, not covered in this policy, that may arise concerning releasing confidential information regarding a victim, or suspected victim, of a communicable disease shall be referred directly to the appropriate department head or town attorney.

(9) Victims of a communicable disease and their families have a right to conduct their lives without fear of discrimination. An employee shall not make public, directly or indirectly, the identity of a victim or suspected victim of a communicable disease.

(10) Whenever an employee finds it necessary to notify another employee, police officer, firefighter, emergency service officer, or health care provider that a victim has or is suspected of having a communicable disease, that information shall be conveyed in a dignified, discrete and confidential manner. The person to whom the information is being conveyed should be reminded that the information is confidential and that it should not be treated as public information.

(11) Any employee who disseminates confidential information in regard to a victim, or suspected victim of a communicable disease in violation of this policy shall be subject to serious disciplinary action and/or civil/and/or criminal prosecution. (1980 Code, § 1-1007)

CHAPTER 4

TRAVEL REIMBURSEMENT REGULATIONS

SECTION

- 4-401. Enforcement.
- 4-402. Travel policy.
- 4-403. Travel reimbursement rate schedule.
- 4-404. Administrative procedures.

4-401. Enforcement. The chief administrative officer (CAO) of the town or his or her designee shall be responsible for the enforcement of these travel regulations. (Ord. #84, Nov. 1993)

4-402. Travel policy. (1) In the interpretation and application of this chapter, the term "traveler" or "authorized travel" means any elected or appointed municipal officer or employee, including members of municipal boards and committees appointed by the mayor or the municipal governing body, and the employees of such boards and committees who are traveling on official municipal business and whose travel was authorized in accordance with this chapter. "Authorized traveler" shall not include the spouse, children, other relatives, friends, or companions accompanying the authorized traveler on town business, unless the person(s) otherwise qualifies as an authorized traveler under this chapter.

(2) Authorized travelers are entitled to reimbursement of certain expenditures incurred while traveling on official business for the town. Reimbursable expenses shall include expenses for transportation; lodging; meals; registration fees for conferences, conventions, and seminars; and other actual and necessary expenses related to official business as determined by the CAO. Under certain conditions, entertainment expenses may be eligible for reimbursement.

(3) Authorized travelers can request either a travel advance for the projected cost of authorized travel, or advance billing directly to the town for registration fees, air fares, meals, lodging, conferences, and similar expenses.

Travel advance requests aren't considered documentation of travel expenses. If travel advances exceed documented expenses, the traveler must immediately reimburse the town. It will be the responsibility of the CAO to initiate action to recover any undocumented travel advances.

(4) Travel advances are available only for special travel and only after completion and approval of the travel authorization form.

(5) The travel expense reimbursement form will be used to document all expense claims.

(6) To qualify for reimbursement, travel expenses must be:

(a) Directly related to the conduct of the town business for which travel was authorized, and

(b) Actual, reasonable, and necessary under the circumstances. The CAO may make exceptions for unusual circumstances.

Expenses considered excessive won't be allowed.

(7) Claims of \$5 or more for travel expense reimbursement must be supported by the original paid receipt for lodging, vehicle rental, phone call, public carrier travel, conference fee, and other reimbursable costs.

(8) Any person attempting to defraud the town or misuse town travel funds is subject to legal action for recovery of fraudulent travel claims and/or advances.

(9) Mileage and motel expenses incurred within the town aren't ordinarily considered eligible expenses for reimbursement. (Ord. #84, Nov. 1993)

4-403. Travel reimbursement rate schedules. Authorized travelers shall be reimbursed according to the state travel regulation rates. The town's travel reimbursement rates will automatically change when the state rates are adjusted.

The municipality may pay directly to the provider for expenses such as meals, lodging, and registration fees for conferences, conventions, seminars, and other education programs. (Ord. #84, Nov. 1993)

4-404. Administrative procedures. The town adopts and incorporates by reference--as if fully set out herein--the administrative procedures submitted by MTAS to, and approved by letter by, the Comptroller of the Treasury, State of Tennessee, in June 1993. A copy of the administrative procedures is on file in the office of the city recorder.

This chapter shall take effect upon its final reading by the municipal governing body. It shall cover all travel and expenses occurring on or after July 1, 1993. (Ord. #84, Nov. 1993)