TITLE 4

MUNICIPAL PERSONNEL

CHAPTER

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CHAPTER 1

SOCIAL SECURITY

SECTION

4-101. Policy and purpose as to coverage. It is hereby declared to be the policy and purpose of the Town of Scotts Hill, Tennessee, to extend as of the date hereinafter set forth to the 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 of Scotts Hill shall take such action as may be required by applicable state and federal laws or regulations. (Ord. #SS, Sept. 1972)

4-102. Necessary agreements to be executed. The mayor of the Town of Scotts Hill, Tennessee, is hereby authorized and directed to execute all the necessary agreements and amendments thereto with the Director of Old Age and Survivors Insurance and Agency, State of Tennessee, as agent or agency, to secure coverage of employees and officials as provided in the preceding section. (Ord. #SS, Sept. 1972)

4-103. Withholdings from salaries or wages. Withholding from 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. (Ord. #SS, Sept. 1972)

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; which shall be paid over to the state or federal agency designated by said laws or regulations. (Ord. #SS, Sept. 1972)

4-105. Records and reports to be made. The said Town of Scotts Hill shall keep such records and make such reports as may be required by applicable state and federal laws or regulations. (Ord. #SS, Sept. 1972)

4-106. Exclusions. There is hereby excluded from this chapter any authority to make any agreement with respect to part-time positions which normally requires less than 20 hours of work each week; full-time employees, the compensation for which is on a fee basis and elective officials in executive, judicial and legislative positions. There is further excluded from this chapter any authority to make any agreement with respect to any employee or official not authorized to be covered by applicable federal or state laws or regulations. The mayor is hereby authorized and directed to execute an amendment to the social security agreement with the Director of Old Age and Survivors Insurance Agency, State of Tennessee, to extend the benefits of said federal system to elective officials engaged in rendering "executive" services, effective October 1, 1978. (Ord. #A-4, Sept. 1978)
CHAPTER 2

OCCUPATIONAL SAFETY AND HEALTH PROGRAM

SECTION
4-201. Title. This section shall provide authority for establishing and administering the Occupational Safety and Health Program for the employees of Scotts Hill, Tennessee. (Ord. #A-3, March 1977)

4-202. Purpose. The Town of Scotts Hill, in electing to establish and maintain an effective occupational safety and health program for its employees, shall:

(1) Provide a safe and healthful place and condition of employment.
(2) Acquire, maintain and require the use of safety equipment, personal protective equipment and devices reasonably necessary to protect employees.
(3) Make, keep, preserve and make available to the state commissioner of labor, his designated representative or persons within the agency to whom such responsibilities have been delegated, adequate records of all occupational accidents and personal injuries for proper evaluation and necessary corrective action as required.
(4) Consult with the state commissioner of labor or his designated representative, with regard to the adequacy of the form and content of records.
(5) Consult with the state commissioner of labor or the state commissioner of public health, as appropriate, regarding safety and health problems of the agency which are considered to be unusual or peculiar to the town and are such that they cannot be achieved under a standard promulgated by the state.
(6) Make an annual report to the state commissioner of labor to show accomplishments and progress of the total occupational safety and health program.

(7) Provide reasonable opportunity for the participation of employees in effectuation of the objectives of this program, including the opportunity to make anonymous complaints concerning conditions or practices injurious to employee safety and health.

(8) Provide for education and training of personnel for the fair and efficient administration of occupational safety and health standards, and provide for education and notification of all employees of the existence of this program. (Ord. #A-3, March 1977)

4-203. Definitions. For the purpose of the program established pursuant to this chapter.

(1) "Commissioner of labor" means the chief executive officer of Tennessee Department of Labor. This includes any person appointed, designated, or deputized to perform the duties or to exercise the powers assigned to the commissioner of labor.

(2) "Commissioner of public health" means the chief executive officer of the Tennessee Department of Public Health. This includes any person appointed, designated, or deputized to perform the duties or to exercise the powers assigned to the commissioner of public health.

(3) "Employer" means the town, and shall include each administrative department, commission, board, division or other agency of the town.

(4) "Director of safety and health" means the chief executive officer designated by the town to perform duties or to exercise powers assigned so as to plan, develop, and administer the town's safety and health program.

(5) "Inspector(s)" means the individual(s) appointed and designated by the director of safety and health to conduct inspections provided for herein. If no such compliance inspector(s) is appointed, the inspections shall be conducted by the director of safety and health.

(6) "Appointing authority" means any town official or group of officials having legally designated powers of appointment, employment, or removal for a specific department, commission, board, division, or other agency of the town.

(7) "Employee" means any person performing services for the town and listed on town payrolls either as part time, seasonal, or permanent, full-time employees; provided, however, that such definition shall not include independent contractors, their agents, servants, and employees.

(8) "Person" means one or more individuals, partnerships, associations, corporations, business trusts, legal representatives or any organized group of persons.

(9) "Standard" means an occupational safety and health standard promulgated by the Tennessee State Commissioner of Labor or the state commissioner of public health which requires conditions or the adoption or the
use of one or more practices, means, methods, operations or processes necessary or appropriate to provide safe and healthful employment and places of employment.

(10) "Imminent danger" means any conditions or practices in any place of employment which are such that a danger exists which could reasonably be expected to cause death or serious physical harm immediately or before the imminence of such danger can be eliminated through normal enforcement procedures.

(11) "Establishment" or workplace means a single physical location where business is conducted or where services or industrial operations are performed. (Ord. #A-3, March 1977)

4-204. Coverage. The provisions of the program shall apply to employees of each administrative department, commission, board, division or other agency of the town. (Ord. #A-3, March 1977)

4-205. Employer's rights and duties. Rights and duties of the employer shall include, but are not limited to the following provisions:

(1) Employer shall furnish to each of his employees conditions of employment and a place of employment free from known and recognized hazards that are causing or are likely to cause death or serious injury or harm to employees.

(2) Employer shall comply with occupational safety and health standards or regulations promulgated pursuant to the State Occupational Safety and Health Act of 1972.

(3) Employer shall assist the state commissioner of labor and state commissioner of public health in the performance of their monitoring duties by supplying necessary information to the commissioners or to their respective assistants or deputies.

(4) Employer is entitled to participate in the development of standards by submission of comments on proposed standards, participation in hearings on proposed standards, or by requesting the development of standards on a given issue.

(5) Employer is entitled to request an order granting a variance from an occupational safety and health standard.

(6) Employer shall inspect all installations, departments, bureaus, and offices to insure the provision of this program are complied with and carried out.

(7) Employer shall notify and inform any employee, who has been or is being exposed in a biologically significant manner to harmful agents or material in excess of the applicable standard, of corrective action being taken by the town. (Ord. #A-3, March 1977)

4-206. Employee's rights and duties. Rights and duties of employees shall include, but are not limited to the following provisions:
Each employee shall comply with occupational safety and health standards and all rules, regulations, and orders issued pursuant to this program which are applicable to his or her own actions and conduct.

Each employee shall be notified by the placing upon bulletin boards, or other places of common passage, of any application for a temporary order granting a variance from any standard or regulation.

Each employee shall be given the opportunity to participate in any hearing which concerns an application for a variance from a standard.

Any employee may bring to the attention of the person in charge of the program any violation of the standards or other health or safety hazard.

Any employee who has been exposed or is being exposed to toxic materials or harmful physical agents in concentrations or at levels in excess of that provided for by an applicable standard shall be notified by the employer and informed of such exposure and the corrective action being taken.

Subject to regulations issued pursuant to this program, any employee or authorized representative of employees shall be given the right to request an inspection.

No employee shall be discharged or discriminated against because such employee has failed any complaint or instituted or caused to be instituted any proceedings or inspection under or relating to this program. Any such charges of discrimination are subject to investigation by the commissioner of labor.

Nothing in this section or any other provision of this program shall be deemed to authorize or require medical examination, immunization, or treatment for those who object thereto on religious grounds, except where such is necessary for the protection of the health or safety of others, and except when such medical examination is reasonable required for performance of a specified job. (Ord. #A-3, March 1977)

4-207. Standards authorized. The standards adopted by the Town of Scotts Hill are the State of Tennessee Safety and Health Standards developed under Section 6 of the State Occupational Safety and Health Act of 1972. (Ord. #A-3, March 1977)

4-208. Variances from standards authorized. The Town of Scotts Hill may, upon written application to the state commissioner of labor or the state commissioner of public health, request an order granting a temporary variance from any approved standards. Prior to requesting such temporary variance, the employer shall notify or serve notice to employees or interested parties and present them with an opportunity for a hearing. The posting of notice on the main bulletin board as designated by the town, shall be deemed sufficient notice to employees. (Ord. #A-3, March 1977)
4-209. **Abatement.** The program will provide for administrative procedures for abating hazard. (Ord. #A-3, March 1977)

4-210. **Inspection.** (1) In order to carry out the purposes of this program resolution, the safety and health inspectors are authorized:

   (a) To enter at any reasonable time any establishment, construction site, plant, or other area, work place, or environment where work is performed by an employee of the Town of Scotts Hill and,

   (b) To inspect and investigate during regular working hours and at other reasonable times, and within reasonable limits and in a reasonable manner, any such place of employment and all pertinent conditions, processes, structures, machines, apparatus, devices, equipment, and materials therein, and to question privately any supervisor, operator, agent or employee working therein.

(2) The Town of Scotts Hill shall establish and maintain a system for collecting, maintaining and reporting safety and health data.

(3) The program shall comply with the record keeping regulations pursuant to the Tennessee Occupational and Safety Act of 1972.

(4) After this chapter has been enacted, the Town of Scotts Hill, shall report within forty-eight (48) hours, either orally or in writing, to the commissioner of labor any accident which is fatal to one or more employees or which results in the hospitalization of five (5) or more employees. (Ord. #A-3, March 1977)

4-211. **Administration.** For the purpose of this chapter, the mayor/town manager has the authority to designate the director of safety and health program to perform duties or to exercise powers assigned so as to plan, develop, and administer the town's Occupational Safety and Health Program. (Ord. #A-3, March 1977)

4-212. **Funding the program.** Sufficient funds for administering the program pursuant to this chapter shall be made available as authorized by the budgeting authority. (Ord. #A-3, March 1977)

4-213. **Confidentiality of trade secrets or privileged information.** (1) Compliance with any other law, statute or town ordinance which regulates safety and health in employment and places of employment shall not excuse the town or any town employee, or any other person from compliance with the provisions of this program.

(2) Compliance with any provisions of the program pursuant to this resolution or any standard or regulation promulgated pursuant to this program shall not excuse the town or any town employee, or any other person from compliance with any state law or town ordinance regulating and promoting
safety and health unless such law or resolution is specifically repealed. (Ord. #A-3, March 1977)
CHAPTER 3

INFECTIOUS DISEASE CONTROL POLICY

SECTION

4-301. Purpose. It is the responsibility of the Town of Scotts Hill 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 Scotts Hill, 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). (Ord. #A-6, July 1992)

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 infectious material 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;
Police and security personnel;
Firefighters;
Sanitation and landfill workers; and
Any other employee deemed to be at high risk per this policy and an exposure determination. (Ord. #A-6, July 1992)

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 other potentially infectious materials;
(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 mayor and aldermen any amendments or changes to the infection control policy;
(7) Identify any and all housekeeping operations involving substantial risk of direct exposure to potentially infectious materials 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 mayor and aldermen. (Ord. #A-6, July 1992)

4-304. Definitions. (1) "Body fluids" - 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 potentially infectious materials 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 potentially infectious materials to be protected as though such body fluid were HBV or HIV infected. (Ord. #A-6, July 1992)

4-305. Policy statement. All blood and other potentially infectious materials are infectious for several blood-borne pathogens. 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 potentially infectious materials. 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. (Ord. #A-6, July 1992)

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 other potentially infectious materials 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 other potentially infectious materials 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 other potentially infectious materials 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 victim's blood and blood contaminated saliva, respiratory secretion, and vomitus, are available to all personnel who 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 other potentially infectious materials 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 potentially infectious materials.

(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 at 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 properly dispose of the objects.
(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 blood or other potentially infectious materials 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 potentially infectious materials.

(14) Whenever possible, disposable equipment shall be used to minimize and contain clean-up. (Ord. #A-6, July 1992)

4-307. Hepatitis B vaccinations. The Town of Scotts Hill 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.  (Ord. #A-6, July 1992)

4-308. 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. (Ord. #A-6, July 1992)

4-309. 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 (i.e., 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. (Ord. #A-6, July 1992)

4-310. 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. (Ord. #A-6, July 1992)

4-311. 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 Tennessee Code Annotated, § 50-6-303. (Ord. #A-6, July 1992)

4-312. 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 potentially infectious materials. They shall also be counseled regarding possible risks to the fetus from HIV/HBV and other associated infectious agents. (Ord. #A-6, July 1992)

4-313. 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. (Ord. #A-6, July 1992)

4-314. Training new employees. During the new employee's orientation to his/her job, all new employees will be trained on the effects of infectious disease prior to putting them to work. (Ord. #A-6, July 1992)

4-315. 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. (Ord. #A-6, July 1992)

4-316. **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 circumstance, 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. (Ord. #A-6, July 1992)
CHAPTER 4

TRAVEL REIMBURSEMENT REGULATIONS

SECTION
4-401. Purpose.
4-402. Enforcement.
4-403. Travel policy.
4-404. Travel reimbursement rate schedule.
4-405. Administrative procedures.

4-401. Purpose. The purpose of this chapter and referenced regulations is to bring the town into compliance with Public Acts 1993, Chapter 433. This act requires Tennessee municipalities to adopt travel and expense regulations covering expenses incurred by "any mayor and any member of the local governing body and any board or committee member elected or appointed by the mayor or local governing body, and any official or employee of the municipality whose salary is set by charter or general law."

To provide consistent travel regulations and reimbursement, this chapter is expanded to cover regular town employees. It's the intent of this policy to assure fair and equitable treatment to all individuals traveling on town business at town expense. (Ord. #A-7, Sept. 1993)

4-402. 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. #A-7, Sept. 1993)

4-403. 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. #A-7, Sept. 1993)

4-404. Travel reimbursement rate schedule. Authorized travelers shall be reimbursed according to the State of Tennessee 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. #A-7, Sept. 1993)

4-405. 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 town 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. #A-7, Sept. 1993)
CHAPTER 5

SEXUAL HARASSMENT POLICY

SECTION
4-501. General policy.
4-502. Definition.
4-503. Employee complaints.
4-504. Investigation.

4-501. General policy. The Town of Scotts Hill has a strict policy against sexual harassment. Sexual harassment by any employee will not be tolerated. (Ord. #A-8, _____)

4-502. Definition. Sexual harassment is unwanted sexual conduct, or conduct based upon sex, by an employee's supervisor(s) or fellow employees that adversely affects an employee's job or job performance.

Examples of conduct that may constitute sexual harassment are: sexual advances, requests for sexual favors, propositions, physical touching, sexually provocative language, sexual jokes, and display of sexually-oriented pictures or photographs. (Ord. #A-8, _____)

4-503. Employee complaints. Any employee who believes that he or she has been subjected to sexual harassment should immediately report this to the mayor, board of aldermen, or city recorder. The Town of Scotts Hill 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. (Ord. #A-8, _____)

4-504. Investigation. The Town of Scotts Hill will conduct an immediate investigation in an attempt to determine all the facts concerning the alleged harassment. In doing the investigation, the Town of Scotts Hill will try to be fair to all parties involved.

If the Town of Scotts Hill determines that sexual harassment has occurred, corrective action will be taken. This corrective action may include a reprimand, demotion, discharge, or other appropriate action. The Town of Scotts Hill will attempt to make the corrective action reflect the severity of the conduct.

If it is determined that no harassment has occurred or that there is not sufficient evidence that harassment occurred, this will be communicated to the employee who made the complaint, along with the reasons for this determination. (Ord. #A-8, _____)