



Town of Proctor

Communicable Disease Exposure Control Plan

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SECTION I: PURPOSE OF THE PLAN

One of the major goals of the Occupational Safety and Health Administration (OSHA) is to regulate facilities where work is carried out to promote safe work practices in an effort to minimize the incidence of illness and injury experience by Employees. Relative to this goal, OSHA has enacted the Bloodborne Pathogens Standard, coded as 29 CFE 1910.1030. The propose of the Bloodborne Pathogens Standard is to "reduce occupational exposure to Hepatitis B Virus (HBV), Human Immunodeficiency Virus (HIV) and other bloodborne pathogens" those Employees may encounter in their work places.

The Town of Proctor believes that there are a number of "good general principles" that should be followed when working with bloodborne pathogens. These include that:

1. It is prudent *to minimize* all exposure *to* pathogens.
2. Risk of exposure to bloodborne pathogens should never be underestimated.
3. Our Employees should institute as many work practices and engineering controls as possible to eliminate or minimize employee exposure to bloodborne pathogens.

We have implemented this Exposure Control Plan to meet the letter and intent of the OSHA Bloodborne Pathogens Standard. The objective of this plan is twofold:

1. To protect our Employees from the health hazards associated with bloodborne pathogens;
2. To provide appropriate treatment and counseling should an employee be exposed to bloodborne pathogens.

SECTION II: GENERAL PROGRAM MANAGEMENT

A. Responsible Persons

There are four major "Categories of Responsibility" that are central to the effective implementation of this Exposure Control Plan. These are:

1. The employee's supervisor
2. A Physician designated by the Town
3. Town Officers
4. Our Employees

The following sections define the roles played by each of these groups in carrying out this plan. (Throughout this written plan, Employees with specific responsibilities are identified. If, because of change in assignments or rank, a change is necessitated, the Exposure Control Plan should be updated accordingly).

Supervisors

The "Supervisor" will be responsible for overall management and support of the Town's Bloodborne Pathogens Compliance Program. Activities which are delegated to the Supervisor typically include, but are not limited to:

- Overall responsibility for implementing the Exposure Control Plan for the Town.
- Working with the Town and other employees to develop and administer any additional bloodborne pathogens-related policies and practices needed to support the effective implementation of this plan.
- Looking for ways to improve the Exposure Control Plan, as well as to revise and update the plan when necessary.
- Familiarization with current requirements concerning bloodborne pathogens.
- Providing for, and documenting, both initial bloodborne pathogen training and annual refresher training for all employees under their supervision and control.
- Acting as this Town's liaison during OSHA inspections.
- Conducting an annual review to maintain an up-to-date Exposure Control Policy.

The Town Designated Physician

The Town physician, as designated by the Town will be asked to:

- Review and comment, if necessary, on the adoption and implementation of the Exposure Control Plan.
- Serve as a consultant and advisor to the Town in area's requiring medical knowledge and expertise beyond that commonly possessed by lay persons.
- Be retained when necessary to provide for vaccinations of Town employees.
- Be retained as necessary to carry out post-exposure evaluations, follow-up, and referrals to employees' personal family physicians as necessary.

Town Officers

All Town Officers shall be familiar with the Exposure Control Plan. As Town Officers they shall carry out high standards of performance and compliance with the plan. Town Officers shall be prepared to assist any employee of the Town, or exposed person, with carrying out safety practices/procedures as set forth in the plan.

Employees

As with all of the Town's activities, the employees have the most important role in this bloodborne pathogens compliance program, for the ultimate execution of much of this Exposure Control Plan rests in their hands. In this role they must do things such as:

- Know what tasks they perform that have occupational exposure.
- Attend the initial and annual refresher bloodborne pathogens training sessions.
- Plan and conduct all operations in accordance with our practice controls.
- Promptly identify and report all exposures pursuant to policy.
- Develop good personal hygiene habits.

B. Availability of the Exposure Control Plan to Employees

To help them with their efforts, the Town's Exposure Control Plan is available to our employees at any time. Employees are advised of this availability during their training sessions. Copies of the plan are kept in the following locations:

- Each Town facility
- Town Offices

C. Review and Update of the Plan

It is recognized that it is important to keep this Exposure Control Plan up-to-date. To ensure this, the plan will be reviewed and updated under the following circumstances:

- Annually, on or before December 31st of each year.
- Whenever new or modified tasks and procedures are implemented which affect occupational exposure of our employees.
- Whenever our employees' tasks and/or duties are revised such that new instances of occupational exposure may occur.
- Whenever a new functional task is established within the Town that may involve exposure to bloodborne pathogens.
- Whenever in the opinion of the Town's designated physician, based on his/her medical knowledge and expertise, a change is necessary.

SECTION III: DEFINITIONS

BLOOD: means human's blood, human blood components, and products made from human blood.

BLOODBORNE PATHOGENS: means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (I-IBV) and human Immunodeficiency virus (HIV).

OCCUPATIONAL EXPOSURE INCIDENT: means a specific eye, mouth, other mucous membrane, non-intact skin, or contact with blood or other potentially infectious materials that result from the performance of an employee's duties.

OTHER POTENTIALLY INFECTIOUS MATERIALS: means the following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids. Also any unfixed tissue or organ (other than intact skin) from a human (living or dead); and human immunodeficiency virus (HIV)-containing cell or tissue cultures, organ cultures and HIV or hepatitis B (I-IBV) containing culture medium or other solutions; and blood, organs or other tissues from experimental animals infected with HIV or HBV.

PERSONAL PROTECTIVE EQUIPMENT: is specialized clothing or equipment worn by an employee for protection against a hazard such as gloves, gowns, face shields or masks, eye protection, mouthpieces, resuscitation bags, pocket masks, etc.

SOURCE INDIVIDUAL: means any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee. Examples include, but are not limited to, hospital and clinic patients; clients in institutions for the developmentally disabled; trauma victims; clients of drug and alcohol *treatment* facilities; residents of hospices and nursing homes; human remains; and individuals who donate or sell blood or blood components.

UNIVERSAL PRECAUTIONS: is a method of infection control that requires employees to assume that all human blood and specified human body fluids are infectious for HIV and other bloodborne pathogens. Where differentiation of types of body fluids is difficult or impossible, all body fluids are to be considered potentially infectious.

SECTION IV: EXPOSURE DETERMINATION

One of the keys to implementing a successful Exposure Control Plan is to identify exposure situations employees may encounter. To facilitate this in our Town, we have prepared the following lists:

- Job classifications in which all employees have occupational exposure to bloodborne pathogens.
- Tasks and procedures in which occupational exposure to bloodborne pathogens occur (these tasks and procedures are performed by employees in the job classifications shown on the following lists).

The initial lists were compiled on June 30, 2010. The Supervisors will work with Town to revise and update these lines as our tasks, procedures and classifications change.

List 1: Job Classifications in which All Employees Have Exposure to Bloodborne Pathogens

Below are listed the job classifications in our Town where employees may come into contact with human blood or other potentially infectious materials, which may result in possible exposure to bloodborne pathogens:

Job Title	Assignment
A. Highway Department	
Road Commissioner	All Areas
Road Crew	All Areas
B. Water and Wastewater Departments	
Chief Operator	All Areas
Assistant Operator	All Areas
C. Transfer Station	
Foreman	All Areas
Assistant	All Areas
D. Olympus Pool and Skating Rink	
Pool Director(s)	All Areas
Lifeguard(s)	All Areas
Rink Director(s)	All Areas
E. Fire Department	
Chief	All Areas
Assistant Chief	All Areas
Captain	All Areas
Lieutenant	All Areas
Firefighter	All Areas

All of these employees are eligible for Hepatitis B vaccinations.

List 2: Work Activities Involving Potential Exposure to Bloodborne Pathogens

Below are listed the tasks and procedures in our operation where employees may come into contact with human blood or other potentially infectious materials that may result in exposure to bloodborne pathogens.

A. Highway Department

1. Picking up roadside trash – may include needles along roadside and pull-offs.
2. Plunging toilets.
3. Provision of first aid to injured and/or ill co-workers or employees.

B. Water and Wastewater Departments

1. Routine work in the Wastewater Department – at the lagoons and within the collection system.
2. Provision of first aid to injured and/or ill co-workers or employees.

C. Transfer Station

1. Provision of first aid to injured and/or ill individuals at the Transfer Station.

D. Olympus Pool and Skating Rink

1. Provision of first aid to injured and/or ill individual(s) at the Pool or Rink.

E. Fire Department

1. Response to and performance at the scene of automobile crashes.
2. Extrication of injured persons from buildings, vehicles, etc. (fire scenes, explosions, etc).
3. Assists to police or other fire Towns.
4. Medical assists.
5. Immediate care of Employees injured in the line of duty.

SECTION V: METHODS OF COMPLIANCE

It is understood that there are a number of areas that must be addressed in order to effectively eliminate or minimize exposure to bloodborne pathogens in our Town. They are:

- Using Universal Precautions.
- Establishing appropriate Engineering Controls.
- Implementing appropriate Work Practice Controls.
- Using necessary Personal Protective Equipment.
- Implementing appropriate Housekeeping Procedures.
- Using appropriate warning labels.

Each of these areas is reviewed with employees during their bloodborne pathogens related training (see the "Information and Training" section of this plan for additional information). By rigorously following the requirements of OSHA's Bloodborne Pathogens Standard in these six areas, we feel that we will eliminate or minimize our Employees' occupational exposure to bloodborne pathogens as much as possible.

A. Universal Precautions

In our Town we have begun the practice of taking "Universal Precautions" in May of 2010. As a result, we treat all human blood and body fluids as if they are known to be infectious for HBV, HIV and other bloodborne pathogens. In circumstances where it is difficult or impossible to differentiate between body fluid types, we assume all body fluids to be potentially infectious. The Supervisors are responsible for overseeing our Universal Precautions Program.

B. Engineering Controls

One of the key aspects to our Exposure Control Plan is the use of engineering controls to eliminate or minimize employees' exposure to bloodborne pathogens. As a result, employees use cleaning, maintenance, and other equipment that is designed to prevent contact with blood or other potentially infectious materials.

The Supervisors will annually review tasks and procedures performed in our Town where engineering controls can be implemented or updated. Any existing engineering control equipment is also reviewed for proper function and needed repair or replacement every twelve (12) months.

The following engineering controls are used throughout the Town:

- Hand washing facilities (or antiseptic hand cleansers and towels or antiseptic towelettes) which are readily accessible to all employees.
- Containers for contaminated sharps having the following characteristics:
 - Puncture-resistant
 - Color-coded or labeled with a biohazard warning label
 - Leak-proof on the sides and bottom

C. Work Practice Controls

In addition to engineering controls, our Town uses a number of work practice controls to help eliminate or minimize employees' exposure to bloodborne pathogens. These work practice controls were begun in May of 2010.

The Town has adopted the following work practice controls as part of this Bloodborne Pathogens Compliance program:

- Employees wash their hands immediately or as soon as feasible, after removal of potentially contaminated gloves or other personal protective equipment.
- Following any contact of body areas with blood or any other infectious materials, employees wash their hands and any other exposed skin with soap and water as soon as possible. They also flush exposed mucous membranes with water.
- Eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses is prohibited in work areas where there is potential for exposure to bloodborne pathogens.
- All procedures involving blood or other infectious materials minimize splashing, spraying or other actions generating droplets of these materials.
- Equipment that becomes contaminated is examined prior to servicing or shipping, and decontaminated as necessary (unless it can be demonstrated that decontamination is not feasible).
- An appropriate biohazard warning label is attached to any contaminated equipment, identifying the contaminated portions.
- Information regarding the remaining contamination is conveyed to all affected employees, the equipment manufacturer, and the equipment service representative prior to handling, servicing or shipping.
- When a new employee is hired by the Town or an employee changes positions within the Town, the following process takes place to ensure that they are trained in the appropriate work practice controls:
 - The employee's job classification and the tasks and procedures that they will perform are checked against the Job Classification and Task Lists, which we have identified in this Exposure Control Plan as those in which occupational exposure occurs.
 - The Supervisor then trains the employee regarding any work practice controls that the employee is not experienced with.

D. Personal Protective Equipment

Personal Protective Equipment is our employees' "first line of defense" against bloodborne pathogens. Because of this, our Town provides (at no cost to our employees) the personal protective equipment that they need to protect themselves against such exposure. The Supervisor is responsible for ensuring that all vehicles and work areas have appropriate personal protective equipment available to employees.

Our Employees are trained regarding the use of the appropriate personal protective equipment for their job classifications and tasks/procedures they perform. Initial training about personal protective equipment was completed in our facilities during May, 2010. Additional training is provided, when necessary, if an employee takes a new position or new job functions are added to their current position.

To ensure that personal protective equipment is not contaminated and is in the appropriate condition to protect employees from potential exposure, we adhere to the following practices:

- All personal protective equipment maintained in the Town vehicles will be inspected as part of the pre-operation checklist and repaired or replaced as needed to maintain its effectiveness.
- Reusable personal protective equipment is cleaned, laundered and decontaminated as needed.
- Single-use personal protective equipment (or equipment that cannot, for whatever reasons, be decontaminated) is disposed of by the person using the equipment, in the manner described in this Exposure Control Plan.
- To make sure that this equipment is used as effectively as possible, our employees adhere to the following practices when using their personal protective equipment:
 - Any garments penetrated by blood or other infectious materials are removed immediately, or as soon as is feasible.
 - All potentially contaminated personal protective equipment is removed prior to leaving a work area or accident/incident site, if possible (or as soon as is feasible).
- Gloves are worn in the following circumstances:
 - Whenever employees anticipate hand contact with potentially infectious materials.
 - When handling or touching contaminated items or surfaces.
- Disposable gloves are replaced as soon as practical after contamination or if they are torn, punctured or otherwise lose their ability to function as an exposure barrier.
- Utility gloves are decontaminated for reuse unless they are cracked, peeling, torn or exhibit other signs of deterioration, at which time they are disposed of.
- Masks and eye protection are used whenever splashes or sprays may generate droplets of infectious materials.
- Protective clothing (such as disposable, garments, shoe covers, or hair covers) are worn whenever potential exposure to the body are anticipated.

E. Housekeeping

- All equipment and surfaces are to be cleaned and decontaminated after contacting blood or other potentially infectious materials.
- All trash containers, pails, bins, and other receptacles intended for routine uses are inspected, cleaned and decontaminated as soon as possible if visibly contaminated.
- Potentially contaminated broken glassware is picked up using mechanical means (such as dustpan and brush, tongs, forceps, etc).

- A cleaning solution of one (1) part bleach to ten-(10) parts water shall be freshly prepared. These materials are located in Town facility.

We are also very careful in handling regulated waste (including used bandages, disposed of personal protective equipment and other potentially infectious materials). Starting on or before May, 2010, the following procedures are used with all of these types of waste:

- They are discarded or "bagged" in containers that are:
 - Closable
 - Puncture-resistant if the discarded materials have the potential to penetrate the container
 - Leak-proof if the potential for fluid spill or leakage exists
 - Red in color or labeled with the appropriate biohazard warning label
 - Waste containers are maintained upright, routinely replaced, and cleaned appropriately.

F. Labels and Signs

For our Employees, one of the warnings of possible exposure to bloodborne pathogens is a biohazard label. Because of this, we have implemented a comprehensive biohazard warning labeling program in our Town using labels, or when appropriate, using red "color-coded" containers. The Supervisors are responsible for setting up and maintaining this program.

SECTION VI: HEPATITIS B VACCINATIONS

The Town recognizes that even with good adherence to all of our exposure prevention practices, exposure incidents can occur. As a result, we have implemented a Hepatitis B Vaccination Program. We have set up procedures for post-exposure evaluations and follow-up should exposure to bloodborne pathogens occur.

A. Vaccination Program

To protect our employees as much as possible from the possibility of Hepatitis B infection, our Town has initiated a vaccination program. This program is available, at no cost, to all employees who have occupational exposure to bloodborne pathogens.

The vaccination program consists of a series of three inoculations over a six-month period. As part of the bloodborne pathogens training, our employees have received information regarding Hepatitis vaccination, including its safety and effectiveness.

The employee's supervisor is responsible for setting up and operating our vaccination program, which will be effective on or before July 1, 2010.

Vaccinations are performed under the supervision of a licensed physician or other health care professional. Employees joining Town employment after July 1, 2010 may have their personal physician administer the vaccine, paid for by the Town.

Employees who have declined to take part in the program or have received the vaccinations from another outside source have signed the "Vaccination Declination Form" (A sample of which is attached).

To ensure that all Employees are aware of our vaccination program it is thoroughly discussed upon appointment.

B. Location of Hepatitis B Vaccination records

The Town will maintain records of the vaccinations given to employees in the employee's file. S/he will maintain vaccination records and declination forms. These will be kept for the term of the employee's appointment plus 30 years.

SECTION VII: POST EXPOSURE EVALUATION AND FOLLOW UP

A. Post-Exposure Evaluation and Follow-up

If one of our Employees is involved in an incident where exposure to bloodborne pathogens may have occurred, there are two things that we immediately focus our efforts on:

1. Investigating the circumstances surrounding the exposure incident.
2. Making sure that our employees receive medical consultation and treatment (if required) as expeditiously as possible.

The employee's supervisor investigates every reported exposure incident that occurs. This investigation is initiated as soon as possible after the incident occurs and involves gathering the following information:

- When the incident occurred. (Date and time).
- Where the incident occurred.
- What potentially infectious materials were involved in the incident. Type of material (blood, etc.)
- Source of the material.
- Under what circumstances the incident occurred. Type of work being performed.
- How the incident was caused.
- Personal protective equipment that was being used at the time of the incident.
- Actions taken as a result of the incident. Employee's decontamination, cleanup, notifications made.

After this information is gathered it is evaluated. A written summary of the incident and its causes is prepared, and recommendations are made, for avoiding similar incidents in the future (to help with this, we use the "First Report of Injury Online Form", located on the Vermont League of Cities and Towns website).

In order to make sure that our Employees receive the best and most timely treatment if an exposure to bloodborne pathogens should occur, the Town has set up a comprehensive post exposure evaluation and follow-up process. We use the "checklist" at the end of this section to verify that all the steps in the process have been taken correctly.

We recognize that much of the information involved in this process must remain confidential, and will do everything possible to protect the privacy of the people involved. As the first step in this process, we provide an exposed employee with the following confidential information:

- Documentation regarding the routes of exposure and circumstances under which the exposure incident occurred.
- Identification of the source individual (unless infeasible or prohibited by law).

Next, we collect and test the blood of the exposed employee for HBV and HIV status. Finally, if possible, we test the source individual's blood to determine I-IBV and HIV infection. This information will also be made available to the exposed employees, if it is obtained. At that time, the employee will be made aware of any applicable laws and regulations concerning disclosure of the identity and infectious status of a source individual.

Once these procedures have been completed, an appointment is arranged for the exposed employee with

the Town Physician to discuss the employee's medical status. This includes an evaluation of any reported illnesses, as well as any recommended treatment.

B. Information provided to the Health Care Professional

To assist the health care professional we forward a number of documents to them, including the following:

- A copy of the Bloodborne Pathogens Standards.
- A description of the exposure incident.
- The exposed employee's relevant medical records.
- Other pertinent information.

C. Health Care Professional's Written Opinion

After the consultation, the Town Physician provides the Town with a written opinion evaluating the exposed employee's situation. The Town, in turn, will furnish a copy of this opinion to the exposed employee. In keeping with the emphasis on confidentiality, the written opinion will contain only the following information:

- Whether Hepatitis B Vaccination is indicated for the employee.
- Whether the employee has received the Hepatitis B Vaccination.
- Confirmation that the employee has been informed of the results of the evaluation.
- Confirmation that the employee has been told about any medical conditions resulting from the exposure incident, which require further evaluation or treatment.
- All other findings or diagnoses will remain confidential and will not be included in the written report.

D. Medical Record Keeping

To make sure that we have as much medical information available to the Town Physician as possible, our Town maintains comprehensive medical records on our employees. The employee's supervisor is responsible for setting up and maintaining these records, which include the following information:

- Name of Employee
- Social Security number of the employee
- A copy of the employee's Hepatitis B Vaccination status. Dates of any vaccinations and medical records relative to the employee's ability to receive vaccination.
- Copies of the results of the examinations, medical testing and follow-up procedures that took place as a result of an employee's exposure to bloodborne pathogens.
- A copy of the information to the Town Physician as a result of any exposure to bloodborne pathogens.

As with all information in these areas, we recognize that it is important to keep the information in these medical records confidential. We will not disclose or report this information to anyone without our employee's written consent (except as required by law).

SECTION VIII: INFORMATION AND TRAINING

Having well informed and educated employees is extremely important when attempting to eliminate or minimize our employee's exposure to bloodborne pathogens. Because of this, all employees who have the potential for exposure to bloodborne pathogens are put through a comprehensive training program and familiarized with as much information as possible on this issue.

This program was set up so that employees would receive the required training as soon as possible. Employees will be retrained at least annually to keep their knowledge current. Additionally, all new employees, as well as employees changing positions or rank will be given any additional training their new position requires at the time of their new job assignment..

The employee's supervisor is responsible for seeing that all employees who have potential exposure to bloodborne pathogens receive this training.

A. Training Topics

The topics covered in our training program include, but are not limited to, the following:

- The Bloodborne Pathogens standard itself
- The epidemiology and symptoms of bloodborne pathogens
- The modes of transmission of bloodborne pathogens
- The Town's Exposure Control Plan (and where employees can obtain a copy).
- Appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials.
- A review of the use and limitations of methods that will prevent or reduce exposure, including:
 - Engineering controls
 - Work practice controls
 - Personal protective equipment
- Selection and use of personal protective equipment including:
 - Types available Proper use
 - Location
 - Removal Handling
 - Decontamination
 - Disposal
- Visual warnings of biohazards within our Town, including labels, signs and "color-coded" containers.
- Information on the Hepatitis B Vaccine, including its:
 - Efficacy Safety
 - Method of administration
 - Benefits of vaccination
 - Our Town's free vaccination program
- Actions to take and persons to contact in an emergency involving blood or other potentially infectious materials.
- The procedure to follow if an exposure incident occurs, including incident reporting.
- Information on the post-exposure evaluation and follow-up, including medical consultation, and referral to the Town physician provided by our Town.

B. Training Methods

Our Town's training presentations make use of several training techniques including, but not limited to:

- Classroom-type atmosphere with personal instruction
- Distribution of the updated/current communicable disease/bloodborne pathogens policy
- Annual employees' refresher training sessions

Because we feel that Employees need an opportunity to ask questions and interact with the instructors, time is specifically allotted for these activities in each training session.

C. Record Keeping

To facilitate the training of our employees, as well as to document the training process, we maintain training records that contain the following information:

- Dates of all training sessions,
- Contents/summary of the training sessions
- Names and qualifications of the instructors
- Names and job titles of employees attending the training sessions.
- We have used the forms on the following pages and/or our computer systems to facilitate this record keeping.
- These training records are available for examination and copying by our employees, as well as OSHA and/or their representatives.

SECTION IX: FORMS

Bloodborne Pathogens Training Session Log

Hepatitis B Vaccine-Declination Form

First Report of Injury Online Form can be found at:

www.vlct.org/insuranceriskservices/customerserviceforms/

Town of Proctor

45 Main Street
Proctor, VT 05765



Hepatitis-B Vaccination Declination Form

I understand that due to my occupational exposure to blood and other potentially infectious materials, I may be at risk of acquiring the Hepatitis-B (HBV) infection. I have been given the opportunity to be immunized with the Hepatitis-B vaccine, at no charge to myself.

However, I **decline** Hepatitis-B vaccination at this time because I have already received this vaccine from another employer or through another organization to which I belong. If, in the future, I continue to have occupational exposure to blood and other potentially infectious materials and there is a need for further shots or boosters and I have ended my relationship with the agency/organization, who originally provided for the vaccination, I understand that the Town will provide the additional shots and/or boosters at no charge to me.

However, I **decline** Hepatitis-B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis-B, a serious disease. If, in the future, I continue to have occupational exposure to blood and other potentially infectious materials and I want to be vaccinated with Hepatitis-B vaccine, I can receive the vaccination series at no charge to me.

Employee Signature: _____

Employee Name (Printed): _____

Date: _____

SECTION X: SUPPLEMENTS

Federal Register: 29 CFR Part 1910.i030