COURT ORDER 2015-0381



Updated Policies-Leave of Absence and Utilization of Sick Leave and Reasons for Granting **Policies**

On a motion made by Commissioner John Wiley Price, District 3, and seconded by Commissioner Dr. Elba Garcia, District 4, the following order was passed and adopted by the Commissioners Court of Dallas County, State of Texas:

BRIEFING DATE:

3/17/2015

FUNDING SOURCE:

N/A

Be it resolved and ordered that the Dallas County Commissioners Court does hereby approve the following updated policies to the Dallas County Code: Leave of Absence (Section 82-493), Utilization of Sick Leave and Reasons for Granting (Section 82-473), and Department's Response to Request (Section 82-477) for inclusion in chapter 86 of the Dallas County Code.

Done in open court March 24, 2015, by the following vote:

IN FAVOR:

Honorable Clay Lewis Jenkins, County Judge

Commissioner Dr. Theresa M, Daniel, District 1

Commissioner Mike Cantrell, District 2 Commissioner John Wiley Price, District 3 Commissioner Dr. Elba Garcia, District 4

OPPOSED:

None

ABSTAINED: None

ABSENT:

None

Recommended by: Stephanie Lang

Originating Department: Human Resources

COMMISSIONERS COURT BRIEFING

DATE: 3/17/2015

SUBMITTING DEPARTMENT: Human Resources

THROUGH:

SUBJECT: Updated Policies-Leave of Absence and Utilization of Sick Leave and Reasons for

Granting Policies



BACKGROUND:

The Human Resources/Civil Service Department presented updated proposed policies (Leave of Absence, Section 82-493 of the Dallas County Code and Utilization of Sick Leave and Reasons for Granting, Section 82-473 of the Dallas County Code) to Dallas County Commissioners Court. The Commission approved the above updated policies for a 30-day distribution to the departments and offices in Dallas County. Comments were received (see below) and final proposed policy updates (including an addition to Dallas County Code, Section 82-477, Department's response to request, for the completion of a new form to request leave of absence for a designated care recipient) are attached for the review and approval of Commissioners Court.

Comments Received:

Comment 1: "We do not see any problem with the proposed changes to the policies but have the following questions: 1.) To make a determination if any employee is the "actual" primary caregiver, is documentation required?

Human Resources/Civil Service Response: Subdivision III Leave of Absence of the Dallas County Code will apply as guidelines in granting the Leave of Absence. A Leave of Absence is subject to administrative discretion and may be granted to provide necessary care for a family member who is ill or incapacitated as defined in the county's sick leave policy (including a designated care recipient) Further, Section 82-475 of the Dallas County Code, states, "Employees must provide all required documentation." There will be a Leave of Absence Request and Caregiver – Medical Certification form required for the employee to complete and for the physician of the care recipient to complete. Therefore, the employee will be required to submit sufficient documentation supporting reason why the Leave of Absence should be granted.

Comment 1a: "Is there a limit of how much Sick Leave this individual can utilize?"

Human Resources/Civil Service Response: Provided an employee has accrued sick leave in his or her bank and is authorized pursuant to Section 82-493 of the Dallas County Code to utilize sick leave, the employee can utilize accrued sick leave. However, the utilization of that

RECOMMENDED BY:	Human Resources	PREPARED BY:	Stephanie Lang
		APPROVED BY	Stephanie Lang
		DEPT HEAD:]

time will be subject to County Time and Attendance policies (e.g. Dallas County Code, Section 86-392 Excessive absences).

Comment 1b: "How often can an employee request/use this policy?"

Human Resources/Civil Service Response: Pursuant to Section 82-474 of the Dallas County Code, the leave would not exceed ninety (90) continuous calendar days and can only be granted every 24 months from the date the last leave ended.

Comment 1c: "Who is considered a Designated Care Recipient?"

Human Resources/Civil Service Response: It could be any person the employee chooses (e.g., boyfriend, close friend, neighbor, etc.) provided the person is ill or incapacitated and is in need of care. The person designated by the employee would not have to reside in the same household or be a relative. There will be a Leave of Absence Request and Caregiver – Medical Certification form required for the employee to complete and for the physician of the care recipient to complete.

Comment 2: "Are we going to limit the amount of people an employee may declare to be a primary caregiver for? For, example, I am the primary care giver for my sister and she has two children. If she is incapacitated, would I be allowed to use sick time to care for her children's daily needs?

Human Resources/Civil Service Response: No. The care shall be provided for the individual designated as the designated care recipient (who is ill or incapacitated). In the example given, the designated care recipient would be the sister and not her children. The employee would only be allowed to have one (1) person designated as his/her designated care recipient and that would be the sister to care directly for the sister.

Comment 3: "Are we going to use this option for significant others (i.e. boyfriends/girlfriends, biological parents of children). How will we be able to identify a common law relationship/versus a same sex partner? Will there be any parameters to qualify?"

Human Resources/Civil Service Response: This option can be used for any person who is ill or incapacitated provided there is Leave of Absence Request and Caregiver- Medical Certification has been completed and submitted.

Comment 4: "Will there be a limit in the amount of sick time that can be utilized. For example, an employee may have accrued 700 sick hours. Could they use all their sick time without it being a chargeable occurrence?"

Human Resources/Civil Service Response: Each sick time utilization occurrence will be chargeable or counted against the employee's time and attendance record. Therefore, the County policies pertaining to Time and Attendance and Excessive Absences would govern. See comments to Comment 1a.

Comment 5: "Will the sick time for designated care be included in the 48 hours for the purpose of progressive discipline?"

Human Resources/Civil Service Response: Yes. Also, see the response to Comment 1a and to

Comment 4.

OPERATIONAL IMPACT:

The policies provide clarification and guidance to supervisors, managers, and employees when addressing the subject of internship in Dallas County.

FINANCIAL IMPACT:

Adoption of the policies will not impose any additional financial impact to the County.

LEGAL IMPACT:

The Civil Section of the District Attorney's office has reviewed these policies.

PROJECT SCHEDULE:

N/A

M/WBE PARTICIPATION:

N/A

STRATEGIC PLAN COMPLIANCE:

Recommendations in this briefing support Dallas County's Strategic Plan Vision 1: Dallas County is a model interagency partner.

RECOMMENDATION:

The Human Resources/Civil Service Department recommends Commissioners Court approve the updated policies and its submission to Commissioners Court for final approval and inclusion in chapter 86 of the Dallas County Code.

Sec. 82-493. Utilization of Sick Leave.

Sick leave must be accrued before it can be taken and may be authorized when:

- (1) An employee is physically unable to perform job duties because of an illness or injury.
- An employee is the primary caregiver for a member of the immediate family who is ill or incapacitated. For purposes of this policy, immediate family members are defined as husband, wife, child, stepchild, brother, sister, nephew, niece, stepbrother, stepsister, parent, stepparent, grandparent, grandchild, uncle, aunt, or any person serving as parent/guardian; or any relative living in the same household or a designated care recipient. A "designated care recipient" for this section is defined as one individual designated by the employee who is ill or incapacitated, unable to provide self-care, and is recommended by a physician to have a primary caregiver. Employee must complete and submit a Leave of Absence Request and Primary Caregiver-Medical Certification Form to his or her supervisor.
- (3) Medical, dental, and optical appointments cannot be scheduled outside of normal work hours. Employees are encouraged to schedule planned medical appointments outside normal work hours, if possible, or in a manner that minimizes disruption of work operations such as early morning or late afternoon.
- (4) An employee who is not eligible for salary continuation under the workers' compensation program, may use sick leave to supplement workers' compensation. In no instance shall the combination of sick leave and workers' compensation benefits exceed the employee's gross pay.
- (5) An employee has exhausted all salary continuation under the workers' compensation program; sick leave may be used in an amount to supplement workers' compensation. In no instance shall the combination of sick leave and workers' compensation benefits exceed the employee's gross pay.
- (6) An employee who has completed six months or more service from effective date of employment and who is sick, injured or has a major operation may, with the approval of the employee's elected official/department head, borrow sick leave not to exceed three days. Upon termination (except in the case of death) a deduction for unearned sick leave will be made from the employee's paycheck(s).

(Admin. Policy Manual, § B(3.10--3.18); Ord. No. 2001-1506, 8-14-2001; Ord. No. 2015-0381, 03-24-2015)

Sec. 82-473. Reasons for granting.

An employee may be granted a leave of absence for the following reasons:

- (1) For the recovery from an illness or disability not believed to be of a permanent or disqualifying nature, after the exhaustion of family and medical leave;
- (2) When return to work would threaten the health of others;
- (3) When the service to be performed would contribute to the public welfare;
- (4) To provide necessary care for a family member or designated care recipient as defined in the county's sick leave policy under Section 82-493; or
- (5) To participate in a training program or obtain educational achievement that will increase job ability or qualify an employee for advancement within the county.

(Ord. No. 2004-2097, 11-16-2004; Ord. No. 2015-0381, 03-24-2015)

Sec. 82-477. Department's response to request.

The elected official/department head shall:

- (1) Respond in writing to the employee via the Request for Leave of Absence Form (HR/CS #30) or Leave of Absence Request and Primary Caregiver Medical Certification form indicating whether the leave request is granted or denied.
- (2) Complete and submit a personnel court order to the Auditor's Office for processing to human resources/civil service and commissioners court if the employee's request for leave of absence is approved. Leave of absence is not authorized until a personnel court order has been submitted to and approved by commissioners court. Requests to commissioners court for a leave of absence of 90 days will be processed as routine county business.
- (3) Place the employee on leave effective the first day of the absence if the leave request is approved.
- (4) If a leave request is denied by the elected official/department head, a copy of the request and the proposed response to the employee indicating why the leave request is being denied must be forwarded to the director of human resources/civil service for review to ensure compliance and consistency with county policies and procedures.

(Ord. No. 2015-0381, 03-24-2015)

LEAVE OF ABSENCE REQUEST AND PRIMARY CAREGIVER-MEDICAL CERTIFICATION FORM

This form is to be completed by a physician (medical doctor).

I hereby certify that	[name
of care recipient] has a disability or is incapacitated	d, is unable to care for
herself or himself, and requires a primary caregiver	starting from
[date] and ending	[date].
Patient's full name:	(Please print)
Patient's date of birth:	· -
Physician Information	
Office Information:	
Number / Street / PO Box #:	
City, State and Zip Code:	
Signature of physician for care recipient:	
Phone number:	

Requested Leave Period:				
Start Date (or expected start date):				
NOTE: Employees assigned to the Dallamust forward this form to the Executive his/her immediate supervisor.				
LEAVE APPROVED	LEAVE DENIED			
Comments:				
SIGNATURE OF ELECTED OFFICIAL/	DEPARTMENT HEAD:			
DATE.				