

Administrative Procedure Alachua County, Florida

Procedure No.: 7-4

Effective: 07/01/2018

Revision No.: 0

Date Reviewed: 06/25/2018

Sick Leave Bank Procedures

Scope: This Procedure applies to all Board of County Commissioners employees entitled to earn sick leave.

Overview: This Procedure describes the process for a Sick Leave Bank in order to provide sick leave to employee contributors after the employee's own leave has been exhausted.

1. Definitions

- a. *Medical Emergency* is defined as a medical condition of the employee that will require the prolonged and extended absence of the employee from duty and will result in a substantial loss of income to the employee due to the exhaustion of all paid leave available, as provided by this procedure.
 - i. The medical condition must be a catastrophic (life threatening) illness, accident or injury, and must be continuous in nature.
- b. *Leave* is defined as leave already earned, to include annual leave, sick leave, comp. time, floating holidays, and managerial leave.
- c. *Contribution* is defined as two times the employee's sick leave accrual rate per pay period.
- d. *Benefit* is defined as sick leave that has been donated to the Sick Leave Bank and transferred to an Eligible Participating Employee.
- e. *Eligible Participating Employee* is defined as an employee that meets the eligibility requirements to share in the Sick Leave Bank as established in these Procedures.
- f. *Requestor* is defined as a verified Eligible Participating Employee in the Sick Leave Bank who is in need of a withdrawal of benefits from the Sick Leave Bank.
- g. *Sick Leave Bank Donation Form* is defined as the document that employees complete to become an Eligible Participating Employee and donate leave to the Sick Leave Bank in accordance with this Procedure.
- h. *Sick Leave Bank Benefits Request Form* is defined as the document that Eligible Participating Employees use to request benefits from the Sick Leave Bank.
- i. *Administering Official* is defined as County Manager and/or County Attorney.

2. General Rule

- a. Employees may have a medical emergency as defined in this procedure resulting in a need for additional time off in excess of their available leave. All eligible employees will be allowed to donate sick leave to the Sick Leave Bank from their unused sick leave balance over 48 hours. Participation in the Sick Leave Bank is strictly voluntary.

3. Eligibility, Participation, and Creation of the Employee Sick Leave Bank

- a. In the event of a medical emergency, employees may receive benefits from the Sick Leave Bank based upon the following:
 - i. To become eligible to participate in the Sick Leave Bank, employees will be required to contribute two times their regular sick leave accrual rate to the Sick Leave Bank, on an annual basis.
 - ii. Employees will have two opportunities to join the Sick Leave Bank. First time contributions can be made during two Sick Leave Bank Open Enrollment Periods:
 1. January 1-31
 2. July 1-31
 - iii. Subsequent contributions to the Sick Leave Bank will be made annually during July 1-31.
 - iv. Eligible Participating Employees must be entitled to earn sick leave as a benefit under County Policy and have a sick leave balance of at least 48 hours, after donating to the Sick Leave Bank.
 - v. Employees returning from medical leave, if otherwise eligible, would be eligible to enroll in the Sick Leave Bank outside of the open enrollment period, but would not be entitled to withdrawal from the Sick Leave Bank until after the Eligible Participating Employee has worked 30 consecutive calendar days.
 - vi. Membership in the Sick Leave Bank is voluntary.
 - vii. Employees may discontinue participation in the Sick Leave Bank effective immediately upon receipt by Human Resources of written notification of the member's intent to discontinue participation in the Sick Leave Bank.
 1. The employee shall not be eligible to withdraw benefits already contributed to the Sick Leave Bank.
 2. The employee will not be eligible to participate in the Sick Leave Bank for 12 months.

- viii. The donation of sick leave time is on an hourly basis, without regard to the dollar value of the donated or used leave.

4. Eligible Participating Employee Requests for Sick Leave Benefits

- a. Eligible Participating Employees may request a transfer of benefits from the Sick Leave Bank as provided in this Procedure:
 - i. Requests for the transfer of benefits will be submitted on the Sick Leave Bank Requests Form with accompany medical certification to the Human Resource Department with a copy to the Eligible Participating Employee's department director. The Sick Leave Bank Request Form must include a signed statement from a licensed medical doctor, physician's assistant, or nurse practitioner (ARNP) certifying that the Eligible Participating Employee has a medical emergency as defined in these Procedures. The applicant will bear the cost of obtaining the medical statement.
- b. The HR Director or the HR designee shall review the Sick Leave Bank Request Form for compliance with this Procedure, if in a determination of compliance and initiate the transfer of benefit.
- c. If an Eligible Participating Employee's request is approved, they may be granted a maximum of 160 hours (or 224 hours for 56 hour Firefighters) from the Sick Leave Bank for any one request during any rolling forward calendar year. The maximum withdrawal from the Sick Leave Bank is 12 weeks for any rolling forward calendar year.
- d. A part time employee, as defined by County Policy, may participate in the Sick Leave Bank and, if approved for Sick Leave Bank benefits, shall receive benefits on a pro-rated share computed on a base rate of four hours per pay period.
- e. Benefits are awarded in lump sum amounts. Eligible Participating Employee's will not be asked to replace any hours used as a result of the approved benefits. However, any unused benefits (due to the employee returning to work or separating their employment from the County or otherwise) shall be returned to the Sick Leave Bank.
- f. Eligible Participating Employees will be allowed to retain a maximum of 48 hours of Annual leave and remain eligible to request and receive benefits. During the use of the transferred Sick leave the employee's accrued Sick and Annual leave (other than the maximum allowable 48 hours of Annual leave) will be exhausted prior to utilization of the transferred Sick leave.
- g. Eligible Participating Employees must indicate on the Sick Leave Bank Request Form if the Eligible Participating Employees wishes to retain the maximum 48 hours of Annual leave during the medical emergency.

- h. Benefits provided to an Eligible Participating Employee will be retroactive to the date the Eligible Participating Employee's leave was exhausted.
- i. Eligible Participating Employees must make a request for benefits no later than 30 days after they have exhausted all of their leave time unless prevented from doing so because of the medical emergency.
- j. Intermittent use of previously approved Sick Leave Bank benefits may be permitted under certain circumstances i.e., chemotherapy treatments that require frequent routine medical services.

5. Prohibitions – Limitations – Misrepresentations

- a. Any attempt to obtain benefits from the Sick Leave Bank through misrepresentation may result in permanent termination from the Sick Leave Bank and employee corrective action.
- b. An Eligible Participating Employees shall not be eligible for use of the benefits from the Sick Leave Bank if the member is on workers' compensation for the same condition.
- c. An employee in the employee's initial employment probationary period may not participate in the Sick Leave Bank.
- d. No vesting of benefits provided under this Procedure.
- e. Eligible Participating Employees cannot borrow against future sick leave time.
- f. Employees who are currently on an approved leave of absence cannot donate Sick leave. Participation in the Sick Leave Bank will not guarantee that the employee can withdraw hours from the Sick Leave Bank.
- g. All benefits not used by an Eligible Participating Employees for the certified medical emergency will be returned to the Sick Leave Bank once the receiving employee returns to work and begins accruing leave of his/her own or the Eligible Participating Employees does not return to work.
- h. Eligible Participating Employees will not receive payment for any benefits if they separated from the County.
- i. Eligible Participating Employees are responsible for informing the Human Resource's Department that benefits are no longer needed. The Human Resource Department will initiate the appropriate action to discontinue the benefits.

6. Reviewing Benefit Decisions under this Procedure


- a. This Procedure shall have a strict interpretation by the HR Director when implementing this Procedure and approving benefits. As a result, a Fact-Finding


Review Committee is established to hear reviews arising from matters under this Procedure for submission to the Administrating Official for final determination. The Fact-Finding Review Committee is not a decision-making committee.

- b. Challenges to decisions under this Procedure will be submitted in writing to the Human Resources Department for processing by the Fact-Finding Review Committee and the Administrating Official.
- c. Three randomly selected Eligible Participating Employees from the Sick Leave Bank will serve as the Fact-Finding Review Committee for each matter under review.
- d. The Fact-Finding Review Committee will review all material submitted to it including presentations and make written findings of fact regarding the matter for final decision by the Administrating Official.
- e. The decision of the Administrating Official is the final decision.

7. Maintenance

- a. In the event that available hours in the Sick Leave Bank are below 800 hours, Eligible Participating Employees will be notified by the Human Resources Department that an additional contribution will be deducted from their accrued Sick leave balance. Eligible Participating Employees will have seven (7) calendar days to inform the Human Resources Director, in writing, if they do not wish for contribution to be deducted from their leave Bank and as a result membership in the Sick Leave Bank by the employee will be discontinued.
- b. In the event that available hours in the Sick Leave Bank exceed 3,000 hours, the Administrating Official has the authority to waive contributions for that calendar year.
- c. A Fact Finding Review Committee will be established to conduct quarterly audits regarding all elements under this procedure beginning January 1, 2019.


Michele L. Lieberman
Interim County Manager


Sylvia E. Torres
Interim County Attorney



Sick Leave Bank Donation Form

Date: _____

To: Risk Management for Processing

I _____ have read, understand and agree to the terms of Administrative Procedure 10-4 Sick Leave Bank and wish to participate in the Sick Leave Bank.

I agree to donate _____ hours to Sick Leave Bank from my sick leave balance, which is twice the accrual rate of sick leave per pay period.

Subsequent donations to the Sick Leave Bank will be made annually during July 1-31.

I acknowledge the granting of Sick Leave Bank Benefits in no way limits the County's right to proceed with any employment or corrective action.

I understand that should I retire, resign or be terminated from the County's employment my participation in the Sick Leave Bank will be terminated, effective on the date of the personnel action, and any unused hours will be returned to the Sick Leave Bank, and that I will not receive any payment for unused hours.

Name: _____

Department: _____

Contact Telephone Number: _____

Signature: _____

Date: _____



Sick Leave Bank Request Form
CONFIDENTIAL MEDICAL INFORMATION

Date: _____

To: Human Resources for Processing

I _____ have read, understand and agree to the terms of Administrative Procedure 10-4 Sick Leave Bank and wish to request leave from the Sick Leave Bank. I am requesting the following _____ hours from the Sick Leave Bank based upon the attached medical documentation of my catastrophic medical condition as required under Administrative Procedure 10-4 Sick Leave Bank. I acknowledge the receipt of leave from the Sick Leave Bank Benefits in no way limits the County's right to proceed with any employment or corrective action. I understand that should I retire, resign or be terminated from the County's employment my participation in the Sick Leave Bank will be terminated, effective on the date of the personnel action, and any unused hours will be returned to the Sick Leave Bank, and that I will not receive any payment for unused hours.

I do ___ do not ___ wish to retain ___ hours of annual leave (max of 48 hours of annual leave).

Name: _____

Department: _____

Contact Telephone Number: _____

Signature: _____

Date: _____

Human Resource Director Review:

This request is approved _____ not approved _____