



## Sick Leave Policy

---

- 1.0 POLICY STATEMENT:** Regular attendance of each employee is vital to the day to day operations of the City. However, the City recognizes that illness can affect each of us. For this reason the City provides paid sick leave to eligible employees.
- 2.0 PROCEDURES:** Eligible full-time employees will be eligible for sick leave and will accumulate sick leave at a rate set per month of employment. Part-time employees will accumulate sick leave pro-rated based on the number of hours hired to work. This accumulation is based on the most recent date of hire. Temporary and seasonal employees are not eligible for sick leave.
- 2.1 *Use of Sick Leave* - Sick leave is considered to be a privilege or benefit and should be used when illness or injury require, and not used at the discretion of the employee. A doctor's certificate describing the employee's ability to work or release to return to work during the period of absence may be required by the immediate supervisor or department head when there is reason to believe that sick leave privileges are being abused. When such proof of illness is requested and not presented, the absence will be treated as unexcused. An employee on authorized sick leave is not eligible for other leave benefits in addition to sick leave.
- 2.2 Employees will request FMLA for any absence greater than three days for one's own serious health condition or other reasons eligible under FMLA.
- 2.3 *Reporting of Sick Leave* - An employee who is absent from work because of illness is responsible for notifying his/her immediate supervisor or department head at least 15 minutes prior to the designated time for reporting to work on the day of absence. The employee will also be expected to keep his/her supervisor informed of his/her progress on a regular basis. Where a relief employee is required in a department which must provide 24 hour service, the employee must report absence at least one hour prior to the designated work time. In the event the employee fails to comply with these provisions, the employee may be charged with leave without pay.
- 2.4 *Accumulation of Sick Leave* - Starting with the first day of employment, sick leave will accumulate at the rate of eight (8) hours per month for regular full-time employees and on a pro-rata basis for regular part-time employees. For the purpose of this policy a day for Fire Department employees equals 24 hours and sick leave will accumulate at the rate of 24 hours a month unless Fire Department employees are assigned to an eight hour shift then they will accumulate at the rate of eight (8) hours per month. Sick leave may be accumulated with no maximum on number of days.

- 2.5 *Sick Leave for Family Illness* - In the event of a serious illness in the immediate family of an employee with six months continuous service, the city will allow an employee to use sick days at the individual's regular rate of pay for the purpose of attending to that family member during this period of serious illness. For the purposes of this section, "serious illness" shall be deemed to be limited to situations in which a family member is either; (1) hospitalized, or (2) bedridden at home under the direct orders of the treating physician(s), or (3) other verifiable medical conditions requiring assistance as a caregiver for which proof may be required. For the purpose of this section, "immediate family" is defined as the employee's spouse, child, mother, father, brother, sister, grandmother, grandfather, or a close blood relative living in the same residence with the employee. In the event the employee claims days off under this provision, time off allowed and approved will be charged against the sick leave accumulation of the employee. In the event any employee claims a sick leave allowance or an allowance due to serious illness in the immediate family and it is ascertained to be false, unsubstantiated by required proof, then the employee shall be subject to disciplinary procedures and the time off counted as an unexcused absence.
- 2.6 *Retirees* - Any employee who has completed 15 years of service with the city and is eligible to retire would be eligible to receive compensation as it relates to sick leave: Upon retirement notification, an employee may elect to receive compensation equivalent to two (2) days of sick leave at the employee's regular rate for every completed year of service not to exceed thirty years of service or sixty days of compensation. The number of sick leave days used to calculate compensation cannot exceed the number of sick leave days accumulated in the employee's account.
- 2.7 An employee retiring with TCRS may receive service credits for sick leave toward retirement based on the following formula. The formula for computing sick leave into creditable service allows each 20 days of accumulated sick leave to equal one month of creditable service. Once an employee has applied for retirement and has requested sick leave credit, the employee will not be allowed to use sick leave. In the event the employee needs to use sick leave after requesting sick leave credit. The employee will be required to present a doctor's statement.
- 2.8 The death of an active employee who is eligible for sick leave will be a qualifying event to pay 1/3 of the accumulated time to the employee's beneficiary.

**3.0 SICK LEAVE DONATIONS:** The portion of this policy pertains to employees who have experienced a personal catastrophic illness or injury and have exhausted all leave balances. Employees may request donated leave once all of their personal leave balances have been exhausted. Donations are governed as follows:

- 3.1 No full-time employee may donate more than 80 hours and no Fire Department employee may donate more than 240 hours in any one calendar year, nor shall any donation take place that would reduce an employee's accumulated sick leave below thirty (30) days.

### *3.2 Administration of Donated Leave*

Human Resources shall be responsible for the administration and implementation of the donated sick leave guidelines, and reasonable assessment rules to maintain impartiality of the program.

Human Resources shall provide staff support to keep records of sick leave days donated and taken, prepare reports if needed and other pertinent documentation.

Throughout this policy, referral to donated sick leave days shall be defined as eight (8) hour days, (24) twenty-four hour days for the Fire Department.

An employee receiving donated sick leave benefits will not be paid at more than 40 hours a week, regardless of their department or schedule.

An employee of the Fire Department who donates to an employee in another department will be assessed 24 hours (one day). The receiving employee will receive 8 hours (one day) of sick leave.

### *3.3 Eligibility/Application For Sick Leave Days*

Donated sick leave may only be granted to an employee as a result of a life-threatening or debilitating accident, illness or condition requiring an absence from work for thirty (30) or more consecutive calendar days or pregnancy, as verified by the licensed health care provider having primary responsibility for the employee's treatment for the accident, illness or condition causing the absence.

Except for leave granted for pregnancy, the Department Head may consider the manner in which the employee has utilized previous leave benefits, whether or not the absence was foreseeable, whether there are reasonable alternatives available to being absent from the job, and whether there are any other circumstances unique to the illness or injury, and may request Human Resources to obtain additional information from the employee or the employee's health care provider in support of the employee's request.

Donated sick leave days may not be granted for illness of any member of the individual's family or during any period the employee is receiving the following: disability benefits from social security, benefits from a retirement plan or workers' compensation benefits, or is eligible for long-term disability benefits from any source.

All personal accrued leave (sick, vacation, comp time, and floating holidays) must be used before receiving donated sick leave days (except for leave granted for pregnancy).

A written application to donate, or to request donated sick leave days is required on the appropriate form (HR 102-01 or HR 102-02) provided by and maintained in the Human Resources Department.

Additionally, all requests to receive donated leave must be accompanied by a statement from the employee's physician certifying that leave is medically required by the specified illness or disability. Applications will require approval of the

employee's Department Head before being forwarded to Human Resources, then to the City Manager or their designee for approval. If an employee is eligible, but unable to apply due to physical or mental condition, any family member or other agent may apply on behalf of that employee.

### 3.3 *Granting Sick Leave Days*

Human Resources shall act upon all applications for sick leave days from the bank as soon as possible upon receipt of the request and all necessary and required documentation.

Decisions of the City Manager shall be final. Matters relevant to the administration and enforcement of this Sick Leave Policy shall not be subject to employee grievance procedures under the City's grievance procedure as contained in Grievance policy #HR-149, or in the Civil Service Guidelines.

Each initial grant of donated sick leave days shall be limited to a minimum of five (5) days and a maximum of thirty (30) consecutively scheduled working days for each illness or injury and an extension (or extensions) may be considered by the City Manager or their designee.

The total sick leave granted to any one employee shall not exceed 180 days per medical occurrence. Once an employee has returned to work for a minimum of one year the policy would reset and an additional 180 day period would be in effect for a subsequent or new condition that may transpire. The total amount of donated time may not exceed three hundred sixty (360) days maximum per employee's course of employment. This includes total combined service time (both full and part-time).

If donated sick leave is granted to an employee, the employee is considered to be in active pay status during the use of that leave and all employment benefits apply, including the accrual of vacation and sick leave.

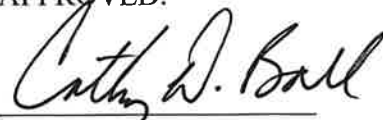
If any sick leave is granted but not used by the employee, the unused portion of the amount of sick leave transferred is returned to the donating employee. This would apply in the case of an employee's death or recovery from the illness or injury.

### 3.4 *Continuation of Health Insurance Benefits*

See Family Medical Leave Policy HR-100 for information regarding continuation of benefits.

**4.0 RESPONSIBILITY:** The Human Resources Director is responsible for the administration and communication of this policy.

APPROVED:



Cathy D. Ball  
City Manager

Original: 02/06/89

Revisions: 12/17/90, 02/20/91, 09/08/00, 08/01/02, 08/15/03, 07/16/04, 07/07/06, 03/01/12, 06/01/2024

## Request to Receive Sick Leave Donation

### Name of Employee Requesting to Receive Sick Leave Donation

Employee Name \_\_\_\_\_ Job Title \_\_\_\_\_

Department \_\_\_\_\_ Hire Date \_\_\_\_\_

I am requesting to receive sick leave donated by eligible city employees due to my own personal serious health condition, injury or illness or qualifying family illness as stated in the Sick Leave Policy, HR-102. As of \_\_\_\_\_, 20\_\_ my current leave balance for SICK is \_\_\_\_\_ hours; VACATION is \_\_\_\_\_ hours; FLOATING HOLIDAYS is \_\_\_\_\_ hours; and COMP is \_\_\_\_\_ hours.

I have attached supporting documentation from my physician. Further, I understand that approval of sick leave donation may be based on my past attendance record and use of leave privileges. Misuse or abuse of leave may result in denial or request. I've attached copies of my annual attendance records for the past three (3) years. Sign below and forward to your Department Head.

\_\_\_\_\_ Date \_\_\_\_\_

Signature of **Employee Requesting Sick Leave**

Recommendation to approve or to disapprove will be based on the employee's past attendance record and use of leave privileges. The Department Head shall review the employee's attendance record and consult with Human Resources prior to rendering a decision. The Department Head will indicate their recommendation decision, sign and date.

APPROVED

DISAPPROVED

\_\_\_\_\_ Date \_\_\_\_\_

Signature of **Department Head**

Human Resources review of request and concurrence with Department Head.

APPROVED

DISAPPROVED

\_\_\_\_\_ Date \_\_\_\_\_

Signature of **Human Resources Representative**

The City Manager has the authority to approve or disapprove request to receive sick leave donation and the decision shall be deemed final.

APPROVED

DISAPPROVED

\_\_\_\_\_ Date \_\_\_\_\_

Signature of **City Manager**

## Request to Donate Sick Leave

### Name of Employee Donating Sick Leave

Name \_\_\_\_\_ Employee ID# \_\_\_\_\_

Department \_\_\_\_\_

I wish to donate \_\_\_\_\_ hours of sick leave to the following employee.

### Name of Employee to Receive Donation

Name \_\_\_\_\_ Job Title \_\_\_\_\_

Department \_\_\_\_\_

I understand that this sick leave donation is voluntary and once this sick leave donation has been approved by the City Manager, my sick leave hours will be returned back to my sick leave account.

My signature authorizes the donation of sick leave as indicated above in accordance with Sick Leave Policy HR-102.

\_\_\_\_\_  
Signature of **Employee Donating Sick Leave** Date \_\_\_\_\_

\_\_\_\_\_  
Signature of **Department Head** Date \_\_\_\_\_

Approved  Disapproved

Human Resources has verified that the donating employee has sufficient leave in their sick leave account to satisfy this request without exceeding the allowable balance.

\_\_\_\_\_  
Signature of **Human Resources Representative** Date \_\_\_\_\_