### SECTION 4.12 DONATION OF SICK LEAVE

In accordance with ORC 124.391(C), Section 5.14

## Purpose

The purpose of the Jefferson County Board of Developmental Disabilities (JCBDD) Voluntary Sick Leave Pool is to provide additional sick leave to JCBDD employees in the event of a Family Medical Leave illness or injury to the employee or the employee's immediate family member as documented by a physician's statement and when all sick, vacation, and personal leave have been exhausted.

Employees are prohibited from seeking donations from co-workers.

## Eligibility

Full time employees who qualify for Family and Medical Leave and have exhausted all accrued sick, vacation, and personal leave may be eligible to participate in the Voluntary Sick Leave Pool. Employees must have an acceptable attendance record. An acceptable attendance record means that the employee has not shown a pattern of abuse or received counseling/discipline or chronic absenteeism in the past year. Employees are prohibited from seeking donations from co-workers. Employees found to have solicited donations for themselves or others will be disciplined and will no longer be eligible to participate in the Pool.

#### **Donations**

In order to maintain a balance in the Voluntary Sick Leave Pool, donations will be accepted each January and on an as-needed basis as requested by the Human Resources Coordinator. Employees may donate the number of hours they choose with a minimum of 8 hours via the Voluntary Sick Leave Pool Donation Form. Employees must maintain a sick leave balance of at least 80 hours after donation. Donations may not be stipulated to specific staff and become the property of JCBDD.

Employees leaving employment with the JCBDD can donate part or all of their accrued sick leave to the Voluntary Sick Leave Pool. However, employees who are later rehired by JCBDD or become employed with the state or a county agency will not have any donated time restored to their sick leave balance. This donation must be at time of separation and does not apply to retirement situations.

# **Application**

An eligible employee must submit a Voluntary Sick Leave Pool Application to the Human Resources Coordinator. If the eligible employee is critically ill and unable to fill out an application for sick leave from the Pool, his/her supervisor may submit an application at the request of the employee's family. The Human Resources Coordinator shall present the application to the Voluntary Sick Leave Pool Administrative Committee which shall be responsible for considering all requests and determining eligibility. The Voluntary Sick Leave Pool Administrative Committee shall be comprised of the Superintendent, the Human Resources Coordinator, and the Department Supervisor of the employee applying for sick leave hours.

Time will be granted only for Family Medical Leave illnesses or injuries to the employee or the employee's immediate family member as documented by a physician's statement and when all sick, vacation, and personal leave have been exhausted. Time will not be granted when an employee is receiving workers' compensation or long-term disability benefits.

The maximum number of hours granted to an employee shall not exceed one-third of the total amount of time in the Pool at the time of the request or 90 days, whichever is less.

If the employee is determined to be eligible, the Human Resources Coordinator shall approve the transfer of sick leave from the Pool to the employee's sick leave balance. If an employee returns to work prior to using the total number of hours they received, the balance of all remaining hours will be returned to the Voluntary Sick Leave Pool.

Applications to the Voluntary Sick Leave Pool may be submitted for consideration no more than twice by the same employee in a twelve-month period.

#### **Forms**

The Voluntary Sick Leave Pool Donation Form and the Voluntary Sick Leave Pool Applications may be obtained from the Human Resources Coordinator.