



DEPARTMENTAL POLICY AND PROCEDURE

TITLE: Shared Sick Leave Program

EFFECTIVE DATE: January 4, 2021

CANCELLATION: None

CATEGORY: Administrative

RESPONSIBLE

DEPARTMENTS: Human Resources, Payroll

PROCEDURES & SPECIFIC INFORMATION

1. Purpose

In accordance with Louisiana Community and Technical College System (LCTCS) [Policy #6.003 Leave for Unclassified Employees](#) Shared Sick Leave is a means of providing paid leave to an eligible employee who has experienced a catastrophic illness or injury to themselves or eligible family member. The intent of the program is to assist employees who have insufficient paid leave to cover the Shared Sick Leave period.

2. Scope and Authority

This policy applies to all eligible unclassified employees of Delgado Community College.

3. Definitions

Within the context of Shared Sick Leave, the following terms have the meanings defined below:

- A. **Eligible employee** is an unclassified employee of Delgado Community College who is eligible to earn leave in accordance with [LCTCS Policy #6.003 Leave for Unclassified Employees](#).
- B. **Eligible family member** is a spouse, parent or child of an employee.
- C. **Licensed Medical Service Provider (LMSP)** is a practitioner, as defined in the Louisiana State Licensing Law (relative to that LMSP’s field of service), who is practicing within the scope of his or her license. This is to include licensed Physicians (a doctor of medicine) or M.D., doctor of osteopathy or D.O., or licensed Chiropractors, Counselors, or Therapists as recognized and licensed by appropriate state boards or authorities.

- D. **Catastrophic Injury or Illness** is a severe condition or combination of conditions that:
- 1) Affects the physical or mental health of the employee or the employee's eligible family member; and
 - 2) Requires the services of a licensed medical service provider (LMSP) or a prolonged period of time; and
 - 3) Prevents the employee from performing his/her duties for a period of more than ten (10) consecutive days and forces the employee to exhaust all available leave described in Section 4, *Eligibility Requirements* and to lose compensation from the state.
- E. **Shared Sick Leave Pool** is a pool of donated sick leave that is managed on an hour for hour basis, regardless of the giving or receiving employee's rate of pay.
- F. **Leave Pool Manager** is the Assistant Vice Chancellor for Human Resource or his/her designee.
- G. **Shared Sick Leave Pool Committee** is a committee comprised of five members, the Leave Pool Manager or designee, the Budget Manager or designee, and the three remaining committee members' are faculty and/or staff as designated by the Chancellor. The Committee's role is to make a determination on each Shared Sick Leave request.

4. **Eligibility Requirements**

An employee is not required to contribute to the Shared Sick Leave Pool to be eligible to receive Shared Sick Leave. An eligible employee may apply to receive Shared Sick Leave if ***all*** of the following requirements are met:

- A. The employee or employee's eligible family member suffers from a catastrophic illness or injury; *and*
- B. The employee has exhausted all available leave in accordance with this policy; *and*
- C. The employee is not absent from work due to disciplinary reasons; *and*
- D. The catastrophic injury or illness is not occupationally related (therefore making that employee eligible for workers' compensation) or was not attained in the commission of an assault or felony; *and*
- E. The appropriate documentation from a LMSP is provided to the Shared Leave Pool Manager for review by the Shared Sick Leave Pool Committee.

5. **Amount of Shared Sick Leave That May Be Approved**

The amount of Shared Sick Leave granted for each catastrophic illness or injury is determined by the Shared Sick Leave Pool Committee. The amount of Shared Sick Leave granted to an employee will generally reflect the recommendations of the LMSP, subject to the following limits:

- A. A maximum of 240 hours of Shared Sick Leave may be granted to an eligible employee during one calendar year.
- B. Shared Sick Leave may not be granted to any individual to extend paid leave status beyond a total time in leave status of 12 weeks for the catastrophic event.
- C. The total amount of Shared Sick Leave granted will not exceed the balance of hours in the Shared Sick Leave Pool at the time of the employee's request.
- D. The value of the Shared Sick Leave granted may not exceed 75% of the employee's pay received in a regular workweek.
- E. The employee will not accrue sick leave while using Shared Sick Leave.

6. **Donation Procedures**

Contributions to the Shared Sick Leave Pool are strictly voluntary; no employee shall be coerced or pressured to donate leave. An employee donating to the pool may not designate a particular employee to receive the donated leave. The donor must complete a [Shared Sick Leave Pool Donor Application Form \(Form AD-007-01\)](#) and submit it to Human Resources. Donations are accumulated in the pool and awarded on a first-come, first-served basis to eligible employees. Donations are restricted as follows:

- An employee may donate a minimum of four (4) hours of sick leave. All donations must be made in whole hour increments;
- The donor must have a balance of at least 120 hours of sick leave remaining after the contribution;
- Donations are limited to 240 hours of sick leave per employee per calendar year;
- Donations are limited to 240 hours of sick leave upon separation or retirement.

7. **Confidentiality of Requests**

All requests for Shared Sick Leave must be treated as confidential. All requests and documentation for Shared Sick Leave are to be submitted in envelopes or via email marked "confidential."

8. Request Procedures

- A. An employee may request leave from the Shared Sick Leave Pool by completing a [Shared Sick Leave Request Form \(Form AD-007/02\)](#). The request must be submitted to the Shared Sick Leave Pool Manager with a copy of the employee's [Certification of Health Care Provider for Employee's Serious Health Condition](#) or [Certification of Health Care Provider for Family Member's Serious Health Condition](#), as appropriate.
- B. The employee requesting Shared Sick Leave must provide all requested information necessary to make a final determination of eligibility. The Shared Sick Leave Pool Committee reviews the request and renders a decision.

9. Adjudication of Requests

- A. Each Shared Sick Leave Request Form will be recorded with date and time received by the Office of Human Resources, and handled on a first-come, first-served basis. When possible, a request is to be submitted at least ten (10) days before the Shared Sick Leave is needed. Once the Shared Sick Leave Pool Committee reviews the request and renders a decision, the Shared Sick Leave Pool Manager is allowed five (5) working days to communicate such approval or denial to the employee.
- B. If the Committee approves the request, the Shared Sick Leave Pool Manager will submit the approved Shared Sick Leave Request Form to the Payroll Manager to credit the approved time to the employee's leave record.

10. Use of Shared Sick Leave

Approved Shared Sick leave is documented in accordance with the same procedures as regular paid leave taken by the employee.

11. Changes in Status Affecting Shared Sick Leave

- A. Shared Sick Leave may be used only for the circumstances for which it was requested. If any change occurs in the nature or severity of an illness or injury, or of any other factor on which the approval was based, the employee must provide documentation describing the change to the Shared Sick Leave Pool Manager subject to the approval of the Shared Sick Leave Pool Committee.
- B. The employee may request additional Shared Sick Leave subject to the limits outlined above subject to the approval of the Shared Sick Leave Pool Committee. Extensions of Shared Sick Leave are not automatic. Each request for extension will be addressed on a first-come, first served basis.
- C. Use of leave from the Shared Sick Leave Pool for reasons other than those stipulated and approved by the Shared Sick Leave Pool Committee and/or failure to abide by procedures and requirements outlined in this policy may constitute payroll fraud and will be addressed accordingly.
- D. Employees who are able to return to work before using all Shared Sick Leave granted must return the unused leave to the Shared Sick Leave Pool.

12. **Compensation and Benefits**

- A. The value of the sick leave granted as Shared Sick Leave may not exceed the employee's pay received in a regular workweek.
- B. Shared Sick Leave will be paid at the receiving employee's rate of pay.
- C. An employee in Shared Sick Leave status will continue to receive benefits as appropriate.
- D. The employee will not accrue sick or annual leave while using Shared Sick Leave.

13. **Financial Impact**

- A. The cost of the Shared Sick Leave period will be borne by the recipient's employing unit.
- B. Human Resources and Payroll will maintain records on Shared Sick Leave donated on a dollar value basis.

14. **Appeals**

The decision to approve or deny Shared Sick Leave requests by the Shared Leave Committee is final and not subject to appeal.

15. **Shared Sick Leave Payroll Procedures**

LCTCS Payroll will create an employee in the Banner payroll system. This employee will have a unique name and Banner ID number. This is done in order to monitor the sick leave balances in the shared leave pool. LCTCS Payroll will also create the earn codes used to donate sick leave as well as the earn codes to allow the recipient to use hours from the Shared Sick Leave pool.

- A. Procedures to Donate Sick Leave
 - 1) Once an employee has completed a Shared Sick Leave Pool Donor Application Form and it has been approved the Shared Sick Leave Pool Committee, Delgado Human Resources will send a copy to both Delgado Payroll and LCTCS Payroll.
 - 2) Both Delgado Payroll and LCTCS Payroll will verify the employee has enough sick leave to donate the number of donated hours as well as having at least 120 hours remaining after the donation on Banner PEALEAV.
 - 3) Delgado Payroll will enter the donated hours on the donor's PHAHOUR.
- B. Procedures to Use Donated Sick Leave:
 - 1) Once an employee has completed a Shared Sick Leave Request Form and it has been approved by the Shared Sick Leave Pool Committee, Human

Resources will send a copy to both Delgado Payroll and LCTCS Payroll.

- 2) Both Delgado Payroll and LCTCS Payroll will verify the employee has exhausted all available leave on PEALEAV.
- 3) Delgado Community College Payroll will enter the hours needed on the recipient's PHAHOUR.

C. Procedures for Changes in Status Affecting Shared Sick Leave:

- 1) The Shared Leave Pool Manager will notify the Delgado Payroll Manager when an employee on Shared Sick Leave has been found not to abide by procedure and requirements outlines in this policy.
- 2) The Shared Leave Pool Manager will notify the Delgado Payroll Manager when the employee on Shared Sick Leave has returned back to work.
- 3) Delgado Payroll Manager will notify LCTCS Payroll to perform the reconciliation for amount of leave hours transferred back to the Shared Sick Leave Pool, if any, and to verify available leave for the employee on Shared Sick Leave.
- 4) LCTCS Payroll will remove unused Shared Sick Leave hours from the PEALEAV sick leave balance and returned to the Shared Sick Leave Pool.

D. LCTCS is responsible for:

- 1) Reconciling all donated hours after each payroll.
- 2) Manually add the donated sick leave hours to the Delgado Shared Leave Pool employee's PEALEAV record.
- 3) Manually adding the requested sick leave hours to the recipient's PEALEAV.
- 4) Maintaining a running calculation of sick leave hours donated, and the employees using hours from the Shared Sick Leave Pool.

Review Process: Shared Sick Leave Pool Ad Hoc Committee 12/10/2020
Business and Administrative Affairs Council 12/16/2020
Academic Affairs Council 12j/16/2020

Approval: Assistant Vice Chancellor for Human Resources 12/17/2020
Vice Chancellor for Business and Administrative Affairs 12/17/2020

Attachments: [Shared Sick Leave Donor Application Form \(Form AD-007-01\)](#)
[Shared Sick Leave Request Form \(Form AD-007/02\)](#)