

State of Louisiana
Department of Culture, Recreation and Tourism

Policy Name: *Crisis Leave Pool*
Policy Number: *HR Policy #2F-0108*
Effective Date: *November 10, 2010*
Revised Date:

Authorization:


Pam Breaux, Secretary

PURPOSE

The purpose of the Crisis Leave Policy is to establish and administer a pool of annual leave that may be used by eligible employees who cannot work because of a catastrophic illness or injury to himself or herself or an eligible family member. The intent of the program is to assist employees who have insufficient appropriate paid leave to use during the crisis leave period.

APPLICABILITY

This policy shall be applicable to all sections of the Office of Lieutenant Governor (OLG) and the Department of Culture, Recreation and Tourism (DCRT).

DEFINITIONS

- A. *Catastrophic Illness or Injury* – A severe condition or combination of conditions that:
- (1.) Affect the physical or mental health of the eligible employee or the eligible employee's eligible family member; and
 - (2.) Require treatment by a licensed medical services provider for a prolonged period of time; and
 - (3.) Prevent the eligible employee from reporting to work for a period of ten (10) or more consecutive days and force the eligible employee to exhaust all appropriate paid leave in accordance with Chapter 11 of the Civil Service Rules.
- B. *Crisis Leave Committee* – A committee comprised of one representative from each OLG/DCRT agency and the Leave Pool Manager or his/her designee.
- C. *Crisis Leave Pool* – A pool of donated annual leave, which is managed on an hour-for-hour basis, regardless of the giving or receiving employee's rate of pay.
- D. *Crisis Leave Pool Policy Year* – Calendar year beginning January 1 and ending December 31.

State of Louisiana
Department of Culture, Recreation and Tourism

- E. *Eligible Employee* – A classified or unclassified employee of OLG/DCRT who is eligible to earn annual leave. Employees must have attained permanent status or ongoing unclassified status in accordance with Civil Service Rule 4.1(d)(2).
- F. *Eligible Family Member* – An individual living in the same household who is related to the eligible employee by kinship, adoption, or marriage, or a foster child so certified by the Louisiana Department of Children and Family Services; or an individual not living in the same household who is related to the eligible employee by kinship, adoption or marriage, and is totally dependent upon the eligible employee for personal care or services on a continuing basis.
- G. *Leave Pool Manager* – The Human Resources Director or designee.
- H. *Licensed Medical Service Provider (LMSP)* – 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 includes licensed physicians (M.D.), or doctor of osteopathy (D.O.), or licensed chiropractors, counselors or therapists, as recognized and licensed by appropriate State boards or authorities.

DONATIONS OF LEAVE

A. General Information/Requirements

Contributions to the Crisis Leave Pool are strictly voluntary. No employee shall be coerced or pressured to donate leave. Employees donating to the pool may not designate a particular employee to receive the donated time. Donations are accumulated in the pool and are awarded on a first-come, first-served basis to eligible employees.

Donations may be made at any time during the Crisis Leave Pool Policy Year, but are limited to the following terms:

- (1.) Only classified employees with permanent status or ongoing unclassified authority status in accordance with Civil Service Rule 4.1(d)(2) may donate to the pool.
- (2.) An employee may donate a minimum of 4 hours and a maximum of 240 hours of annual leave to the Crisis Leave Pool per crisis leave policy year. The donor must have a minimum of 120 hours of annual leave remaining after the donation. Sick and compensatory leave are not eligible for donation.
- (3.) Leave will not be restored or returned to the donor once the leave has been transferred to the pool.

B. Donation Procedures

The procedures for donating leave are as follows:

- (1.) The employee must complete the Donor Application Form indicating the number of hours of annual leave to be transferred to the Crisis Leave Pool and forward it to the Leave Pool Manager for review and approval.
- (2.) The Leave Pool Manager ensures that the form has been properly completed and signed, and that the employee will have a sufficient remaining annual leave balance after the donation is made. If these conditions are met, the Leave Pool Manager approves the application.
- (3.) The Leave Pool Manager forwards the approved application to the HR Specialist to process the deduction of the authorized hours of annual leave from the employee's balance and to transfer the leave to the Crisis Leave Pool. A copy of the approved application is then forwarded to the donating employee to verify that the transfer of leave has been processed.

CRISIS LEAVE REQUESTS

A. Eligibility Requirements

An eligible employee may apply to receive crisis leave if all of the following requirements are met:

- (1.) The eligible employee or employee's eligible family member suffers from a catastrophic illness or injury;
- (2.) The eligible employee has exhausted all appropriate paid leave;
- (3.) The eligible employee has exhibited regular attendance as determined on a case-by-case basis by review of attendance records and absence reasons;
- (4.) The eligible employee is not currently absent from work due to disciplinary reasons;
- (5.) The appropriate documentation from a LMSP is provided to the Leave Pool Manager.

NOTE: An employee is not required to contribute to the Crisis Leave Pool to be eligible to receive crisis leave.

B. Crisis Leave Request Procedures

An eligible employee may request up to 240 hours of leave from the Crisis Leave Pool for any Crisis Leave Pool Policy Year. When possible, requests should be submitted at least ten (10) days before the Crisis Leave is needed. The procedures for requesting crisis leave from the Crisis Leave Pool are as follows:

- (1.) The eligible employee completes a Crisis Leave Request Form, which must include:
 - (a.) Beginning date of illness or injury;
 - (b.) Detailed description of the illness or injury, including any requested information needed to determine eligibility;
 - (c.) Attached documentation from the LMSP verifying the catastrophic illness or injury (a copy of a completed Family and Medical Leave Act Certification is acceptable);
 - (d.) Prognosis for recovery, if the request is for an eligible employee;
 - (e.) Anticipated return to work date;
 - (f.) Attached documentation requested by the Leave Pool Manager necessary to determine eligibility of a family member (birth certificate, marriage license, adoption papers, etc.).
- (2.) The completed Crisis Leave Request Form with the necessary documentation is submitted to the Leave Pool Manager in an envelope marked "confidential." Each request is stamped with the date and time of receipt and handled on a first-come, first-served basis. The Leave Pool Manager reviews the request to ensure the employee's eligibility. All requests for Crisis Leave are treated as confidential.
- (3.) Upon verification of eligibility, the Leave Pool Manager schedules a meeting of the Crisis Leave Committee. The committee reviews the request and either approve all or part of the request or deny the request. A letter of approval or denial is issued to the employee.
- (4.) If the request is approved, the Leave Pool Manager notifies the Human Resources Specialist to transfer the approved amount of crisis leave to the appropriate employee's leave balance. Any approved crisis leave is used and documented in accordance with the same procedures used for regular paid leave taken by the employee.

C. Wage Replacement Limitation

In accordance with Civil Service Rule 11.34, an employee using leave from a crisis leave pool shall receive leave in sufficient quantity to ensure his wage replacement is 75% of the pay he or she would receive in a regularly scheduled workweek (base pay).

CHANGES IN STATUS AFFECTING CRISIS LEAVE

The granting of crisis leave is to cover only the circumstances for which it was requested and approved. If any change occurs in the nature or severity of the illness or injury, or any other factor on which the approval was based, the employee must immediately provide documentation describing the change to the Leave Pool Manager.

The employee may request additional leave from the Crisis Leave Pool, subject to the limited outlined above; however, extensions are not automatic and are approved on a first-come, first-served basis.

The hours granted from the Crisis Leave Pool may only be used for the reasons stated in the approved request. The use of leave from the Crisis Leave Pool for reasons other than those stated, or not in accordance with the procedures and requirements outlined in this policy, may constitute payroll fraud and may result in disciplinary action.

Employees who are able to return to work before using all of their granted crisis leave must return the unused leave to the Crisis Leave Pool.

COMPENSATION AND BENEFITS

Crisis leave will be awarded hour-for-hour, regardless of the giving or receiving employee's rate of pay.

An employee on crisis leave will continue to receive his/her benefits. However, paid leave will not accrue to the employee while on crisis leave pursuant to Civil Service Rule 11.5(a).

APPEALS

The decision to approve or deny crisis leave by the Crisis Leave Committee is final and not subject to appeal.

FORMS

Specific forms related to this policy can be found on **Channel Z**
<http://www.crt.state.la.us/HR> under the link for "Forms."

Office of the Lieutenant Governor (OLG)
Department of Culture, Recreation & Tourism (DCRT)
Crisis Leave Pool
Donor Application Form

Employee Name:	Personnel No.:
Division:	Work Phone:

My signature below certifies that I am electing to donate _____ hours of annual leave to the OLG/DCRT Crisis Leave Pool. I also certify that this donation is being made voluntarily and that I have not been directly or indirectly intimidated, threatened or coerced or promised any benefit by any employee. I further certify that my leave donation does not cause my balance to fall below 120 hours and I understand that this leave cannot be restored to me once it has been transferred to the Crisis Leave Pool.

Signature

Date

**Application should be submitted to the Human Resources
Director in an envelope marked "Confidential".**

For Leave Pool Manager Use Only		
I certify that the above listed employee has an annual leave balance sufficient to accommodate this donation request.		
Number of Hours of Annual Leave Donated:	Date Deducted:	Remaining Annual Leave Balance:
If denied, reason for denial:		
Leave Pool Manager Name:	Leave Pool Manager Title:	
Leave Pool Manager Signature:	Date:	

Office of Lieutenant Governor (OLG)
Department of Culture, Recreation & Tourism (DCRT)
Crisis Leave Pool
Crisis Leave Request Form

Employee Name:	Personnel No.:
Division:	Contact Number:
Number of Hours Requested:	Name/Relationship of Eligible Family Member (if applicable):
Reason for Request (Attach appropriate documentation from LMSP including description of injury or illness, date of onset or initial diagnosis, prognosis and anticipated date of return to duty):	

I certify that I have read the Crisis Leave Policy and understand my rights as outlined in the policy. I agree to abide by the procedures and conditions outlined in this policy. I understand that I must submit this form with the required medical documentation and documentation to verify relationship to eligible family member if applicable, before this request can be processed.

Employee's Signature

Date

Application should be submitted to the Human Resources Director in an envelope marked "Confidential".

Crisis Leave Pool Committee Action		
Approved:	Denied:	If approved, number of hours granted:
If denied, reason for denial:		
Crisis Leave Committee Chairperson Name:		Crisis Leave Committee Chairperson Title:
Crisis Leave Committee Chairperson Signature:		Effective Date of Action: