HOUSTON COUNTY SCHOOLS

SICK LEAVE BANK AND CATASTROPHIC LEAVE GUIDELINES

Board Approved November 18, 2024

SICK LEAVE BANK

A "Sick Leave Bank" (SLB) plan for full-time employees (20 hours per week or more) and bus drivers is hereby established according to the provisions contained in Title 16, Chapter 22, Section 16-22-9 of the Code of Alabama (last amended by Act no. 99-581).

1. In order to become a member of the sick leave bank, each participating employee must deposit 5 days into the sick leave bank and sign a request form authorizing the removal of days from the participant's account. **(Attachment I)** Employee membership in the sick leave bank is voluntary.

These days shall be available for loan to any other participating employee whose leave days have been exhausted.

2. A new employee can join the sick leave bank at the beginning of employment. If the new employee does not have the 5 required days to join the sick leave bank, the sick leave days will be credited (advanced) to the new employee as the deposit to join the sick leave bank. (The credit balance will be reduced by one day each month as the sick leave days are earned by the employee. After the credit balance is reduced to zero, sick leave days earned by the employee will be used to repay any outstanding loan to the Sick Leave Bank.) Advanced days must be approved by the SLB committee.

3. Employees who have previously failed or refused to join the sick leave bank can have the option to join the SLB during the months of **August and January** only, and after depositing the 5 required days. If the employee does not have the 5 required days to join the sick leave bank, the sick leave days will be credited (advanced) to the employee as the deposit to join the sick leave bank. (The credit balance will be reduced by one day each month as the sick leave days are earned by the employee. After the credit balance is reduced to zero, sick leave days earned by the employee will be used to repay any outstanding loan to the Sick Leave Bank.) Advanced days must be approved by the SLB committee.

4. Enrollment in the sick leave bank will be during the months of **August and January**. A participating employee who chooses to no longer participate in the sick leave bank shall be eligible to withdraw during the months of **August and January**. An employee must repay any borrowed days prior to withdrawing membership from the sick leave bank. **(Attachment II)**

A. SICK LEAVE BANK COMMITTEE

1. Each sick leave bank will have a sick leave bank committee consisting of five employees.
2. The superintendent will appoint an employee (to be approved by the local board of education) to serve as one sick leave bank committee member.
3. The members of the sick leave bank will elect (by secret ballot at the beginning of each scholastic year) four of its members to serve a one-year term on the sick leave bank committee. No member can serve on the committee for longer than 5 years. Terms shall begin September 1st and end August 31st of the next school year.
4. The sick leave bank committee will write the guidelines for the operation of the sick leave bank.
5. The sick leave bank committee may adopt appropriate and beneficial guidelines in addition to the regulations contained in Section 16-22-9, if the additional guidelines do not conflict with this section of the law.
6. The guidelines developed by the sick leave bank committee are to be approved by a secret ballot vote of the participating members of the sick leave bank.
7. The sick leave bank committee will develop the forms and administrative procedures for the sick leave bank.
8. The sick leave bank committee will investigate any alleged abuse of the sick leave bank.
9. Sick leave days can only be used for the reasons stated in Section 16-1-18.1.
10. Meetings of the SLB committee shall be scheduled on an as needed basis as determined by the committee. Additionally, meetings may be called by the chairperson or by a majority of the committee members. Decisions may be made by telephone polls or by way of e-mail.

B. EMPLOYEE PARTICIPATION

Participation in the sick leave bank is voluntary and open to all full-time employees. The following conditions must be met to withdraw days from the SLB:

1. A participating member of a sick leave bank whose sick leave has been exhausted may borrow days from the sick leave bank.
2. An employee cannot owe more than 15 days to the sick leave bank, unless over 50 percent of the members of the sick leave bank vote to extend the limit.
3. Days are to be repaid to the sick leave bank by the borrowing member monthly, as the sick leave day is earned each month by the employee.

4. Upon the resignation or termination of an employee who owes days to the sick leave bank, the value for each of the owed days will be deducted from the final paycheck at the employee's current daily rate of pay.
5. Upon the transfer of a sick leave bank member to another eligible employer, the days the employee has on deposit in the sick leave bank are withdrawn from the bank and transferred with the employee.
6. Upon the retirement of a sick leave bank member, the days the employee has on deposit in the sick leave bank are withdrawn from the bank and made accessible for retirement credit.
7. A request for the loan of days from the SLB must be received in the payroll office on or before the ending payroll date for the month. All requests for the SLB withdrawals must be in ½ day increments.
8. It is the sole responsibility of the employee to make application for any loan from the sick leave bank. Employees may authorize the principal to apply for a loan from the sick leave bank on their behalf under extenuating circumstances. (**Attachment III**, Sick Leave Bank Application), (**Attachment IV**, Catastrophic Sick Leave Bank Application)

The Superintendent shall authorize the SLB Committee to notify the payroll office for SLB withdrawals.

Any grievance arising from the administration of the sick leave bank must be addressed first to the Sick Leave Bank Committee. If the problem is not resolved at the committee level, the grievance may be presented to the Board of Education.

C. CATASTROPHIC SICK LEAVE

State laws for catastrophic sick leave for employees of local boards of education are contained in Title 16, Chapter 22, Section 16-22-9 of the Code of Alabama (last amended by Act No. 99-581). A catastrophic illness is defined as *"Any illness, injury, or pregnancy or medical condition related to childbirth, certified by a licensed physician, which causes the employee to be absent from work for an extended period of time."* Catastrophic sick leave will only be considered after an absence of 10 days. (**Attachment IV**)

Each sick leave bank committee is responsible for writing guidelines and administrative procedures for catastrophic sick leave.

The sick leave bank committee will adopt guidelines for reverting unused donated days to the employees who donated the days.

Eligibility: In order for an employee to participate in the catastrophic plan he/she must meet the following eligibility criteria:

1. Must be a full-time employee
2. Must be a member of the system's sick leave bank to receive catastrophic sick leave days.
3. Must have exhausted all sick and personal leave days before using catastrophic sick

leave days.

4. Must borrow and utilize days from the sick leave bank (up to a maximum of 15 days) before being eligible to use catastrophic sick leave days.
    a. Donated catastrophic sick leave may be used to repay days owed to a sick leave bank.
    b. Sick and personal leave days earned while the employee is utilizing catastrophic sick leave days must be exhausted before continuing the use of catastrophic sick leave days.
    c. An employee may use catastrophic sick leave days for a catastrophic illness for himself or herself or for the following covered persons: *parent, spouse, child, sibling, or an individual with a close personal tie per employee leave laws.*
    d. The employee donating sick leave for catastrophic illness does <u>not</u> have to be a member of the <u>same</u> sick leave bank as the recipient employee. Both the donating and recipient catastrophic sick leave employee must be a member of the sick leave banks in these specific Alabama agencies: Each city and county board of education; the board of Trustees of the Alabama Institute for Deaf and Blind; the Alabama Youth Services Board in its capacity as the Board of Education for the Department of Youth Services School District; the Board of Directors of the Alabama School of Fine Arts; the Board of Directors of the Alabama High School of Mathematics and Science; the State Board of Education as applied to two-year postsecondary institutions; and the Board of Trustees of Alabama Agricultural and Mechanical University.
    e. The employee donating sick leave for a catastrophic illness cannot be required to donate a minimum number of days.
    f. The donated catastrophic sick leave days revert to the donating employee only if the recipient employee does not use all of the donated days. Days reverted back will be based on the last days donated by the employee. First days in will be the first days used. Once the beneficiary employee has been completely released from a physician's care, he or she will have **15** days to receive donated days. Donated days will not be accepted beyond the **15** day period.
    g. A signed statement from the beneficiary employee or the chairperson of the sick leave bank committee stating that the beneficiary employee agrees to use the donated days must be presented to the payroll office together with a certified statement from a licensed physician stating that the beneficiary employee has a catastrophic illness. **(Attachment IV)**
    h. A completed catastrophic sick leave transfer form must be presented by the donor to the sick leave bank committee for approval. Only members of the sick leave bank may participate. An employee must be a member of an eligible sick leave bank to donate or receive donated sick leave for catastrophic sick leave. **(Attachment V)**
    i. **No limit is established on the number of days a beneficiary employee may receive from donors; as long as Catastrophic Leave is granted. The maximum number of sick leave days any one employee may donate is 30 days "per" catastrophic illness/leave/event.** When a request is submitted, a beginning and estimated ending date must be written on the form.

j. Any sick leave bank member may donate sick leave days to any other leave bank established under this statute for use by a particular employee for catastrophic sick leave purposes.
k. If an employee needs an extension of days, it must be approved by the SLB committee.
l. Complete attachment request for extension/intermittent catastrophic leave. **(Attachment VI) *This request must be completed every 90 days if catastrophic status continues.***
m. Catastrophic sick leave will not be routinely granted for elective cosmetic surgery.

D. INTERMITTENT LEAVE

After receiving a physician's statement, Intermittent Leave will be considered for approval by the SLB committee. **(Attachment VI)**

ATTACHMENT I

HOUSTON COUNTY SCHOOLS

AUTHORIZATION FOR SICK LEAVE BANK PARTICIPATION

OPEN ENROLLMENT – MONTHS OF AUGUST and JANUARY ONLY

EMPLOYEE'S NAME

LAST 4 OF SS NUMBER

SCHOOL OR CENTER

___ I wish to be a member of the Houston County Sick Leave Bank and hereby authorize that five (5) days from my sick leave account be placed on deposit in the sick leave bank.

___ I wish to be a member of the Houston County Sick Leave Bank, but do not have five (5) days in my account at this time. I hereby request that five (5) sick leave days be credited (advanced) as the deposit to join the sick leave bank.

___ I do not wish to participate in the Sick Leave Bank.

EMPLOYEE'S SIGNATURE DATE

ATTACHMENT II

HOUSTON COUNTY SCHOOLS

NOTICE OF RESIGNATION FROM THE SICK LEAVE BANK

EMPLOYEE'S NAME

LAST 4 OF SS NUMBER

SCHOOL OR CENTER

I hereby terminate my participation in the Houston County Sick Leave Bank and request that days on deposit in the Sick Leave Bank be returned to my sick leave account.

EMPLOYEE'S SIGNATURE DATE

(Please send one copy of this request to the Chairperson of the Sick Leave Bank Committee and one copy to the Houston County Board of Education Payroll Office)

ATTACHMENT III

SICK LEAVE BANK

APPLICATION FOR LOAN

Days from the Sick Leave Bank shall not be awarded until all accumulated sick leave days in the account have been exhausted. All loans are subject to the approval of the Sick Leave Bank Committee.

EMPLOYEE'S NAME PRINTED EMPLOYEE'S SIGNATURE

SCHOOL OR CENTER LAST 4 OF SS NUMBER

NAME OF IMMEDIATE SUPERVISOR

Effective Date of Request: Starting Date:

Reason for leave:

.....

(FOR USE BY SICK LEAVE BANK COMMITTEE ONLY)

___ Approved by SLB committee

___ Not approved by SLB committee

SIGNATURE OF SICK LEAVE BANK COMMITTEE CHAIRPERSON DATE

(Application will be sent to SLB Committee and upon approval copies will be sent to the Payroll Office and to Applicant)

ATTACHMENT IV

CATASTROPHIC LEAVE

APPLICATION FOR LOAN

Days from the Sick Leave Bank shall not be awarded until all accumulated sick or personal leave days in the account have been exhausted. All loans are subject to the approval of the Sick Leave Bank Committee.

EMPLOYEE'S NAME PRINTED EMPLOYEE'S SIGNATURE

SCHOOL OR CENTER LAST 4 OF SS NUMBER

NAME OF IMMEDIATE SUPERVISOR

Effective Date of Request: Starting Date: Estimated Ending Date:

Reason for leave:

Application must have certified physician's signed statement attached.

……..

(FOR USE BY SICK LEAVE BANK COMMITTEE ONLY)

___ Approved by SLB committee

___ Not approved by SLB committee

SIGNATURE OF SICK LEAVE BANK COMMITTEE CHAIRPERSON DATE

(Application will be sent to SLB Committee and upon approval copies will be sent to the Payroll Office and to Applicant)

ATTACHMENT V

CATASTROPHIC LEAVE TRANSFER FORM

Section 16-22-9 of the Code of Alabama 1975 contains the following provisions for donation of sick leave days by members of sick leave banks:

(a)(1) CATASTROPHIC ILLNESS. Any illness, injury, or pregnancy or medical condition related to childbirth, certified by a licensed physician which causes the employee to be absent from work for an extended period of time.

(h) Catastrophic sick leave. Employees, at their discretion, may donate a specific number of days to the sick leave bank to be designated for a specific employee for use against a catastrophic illness as defined by this section. A donating employee shall not be required to donate a minimum number of catastrophic days to the sick leave bank. The recipient employee may use catastrophic sick leave days for himself or herself or for other covered persons as provided in Section 16-1-18.1. Before sick leave days for a catastrophic illness may be used by a recipient employee, the recipient employee shall have first exhausted all sick and personal leave. Donated days shall become available for use by the particular employee who shall not be required to repay the days. Any employee who donates sick leave days to the sick leave bank for a particular employee suffering from a catastrophic illness shall be clearly informed that the donated days are not to be recovered or returned to the donor. If the particular employee does not require all the days donated to the credit of the employee, the days shall revert to the credit of those employees who donated the days in accordance with the guidelines adopted by the sick leave bank committee. No employee may donate more than 30 sick leave days, exclusive of the provisions of subsection (e), to the sick leave bank for the catastrophic sick leave of any one employee. A sick leave bank is authorized to donate sick leave days to another sick leave bank for use by a particular employee who is suffering a catastrophic illness. An employee must be a member of the sick leave bank to donate or receive catastrophic sick leave days.

DONATING EMPLOYEE MUST COMPLETE THIS SECTION

Donating Employee's Name: **Social Security #:**

Donating Employee's Agency:

Recipient Employee's Name: **Social Security #:**

Recipient Employee's Agency:

I certify that I have read and understand the above catastrophic sick leave provisions. I further certify that I am donating ___ sick leave days to the above recipient employee and authorize the transfer of my sick leave days by deduction from my current sick leave balance.

Signature of Donating Employee: **Date:**

Signature of Witness: **Date:**

AUTHORIZATION OF SICK LEAVE TRANSFER BY THE DONATING EMPLOYEE'S AGENCY

I certify that the donating employee is a member of the sick leave bank and that the donating employee's current sick leave balance contains a sufficient number of days for transfer to the recipient employee by deduction from the donating employee's sick leave balance.

Signature of Authorized Representative of the Donating Employee's Agency **Date**

[SEND COMPLETED FORM TO THE RECIPIENT EMPLOYEE'S AGENCY]

ATTACHMENT VI

CATASTROPHIC LEAVE

REQUEST FOR EXTENSION and/or INTERMITTENT LEAVE

EMPLOYEE'S NAME PRINTED EMPLOYEE'S SIGNATURE

SCHOOL OR CENTER LAST 4 OF SS NUMBER

NAME OF IMMEDIATE SUPERVISOR

DATE OF REQUEST ESTIMATED ENDING DATE

This request must include a <u>certified statement from a licensed physician</u> stating that the member needs extension of days.

……

(FOR USE BY SICK LEAVE BANK COMMITTEE ONLY)

___ Request for extension APPROVED by SLB committee.

___ Request for extension NOT APPROVED by SLB committee.

SIGNATURE OF SICK LEAVE BANK COMMITTEE CHAIRPERSON DATE

(Application will be sent to SLB Committee and upon approval copies will be sent to the Payroll Office and to Applicant)