



Crisis Leave Program

EFFECTIVE DATE: 4-05-18
LAST REVISION:

DEPARTMENT: Human Resources

I. Scope and Background:

The Crisis Leave Program is a way of providing paid leave to an eligible employee who is experiencing a catastrophic illness or injury. The intent of the program is to assist an employee who has insufficient paid leave to cover the crisis leave period.

Crisis Leave Terms

Within the context of crisis leave, terms have the meanings indicated below:

1. **Eligible employee** is a classified or unclassified employee of the Central Louisiana Technical Community College (CLTCC) who is eligible to earn annual leave in accordance with the LCTCS Policy # 6.003 and state Civil Service Rules. A classified employee must have attained permanent status to donate or use crisis leave.
2. **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 includes licensed physicians (a doctor of medicine) or M.D., doctor of osteopathy or D.O., or licensed chiropractor, counselor, or therapist as recognized and licensed by appropriate state boards or authorities.
3. **Catastrophic Injury or Illness** is a severe condition or combination of conditions that:
 - a. affects the physical or mental health of the eligible employee;
 - b. requires the services of a licensed medical service provider for a prolonged period of time — at least a minimum of 10 working days; and
 - c. prevents the employee from performing his/her duties for a period of more than ten consecutive days and forces the employee to exhaust all appropriate leave described in other parts of this policy.
4. **Crisis Leave Pool** is a pool of donated annual leave that is managed on an hour for hour basis, regardless of the giving or receiving employee's rate of pay.
5. **Leave Pool Manager** is the Director of Human Resources or his/her designee.

6. Crisis Leave Committee is a committee comprised of two staff members appointed by the CLTCC Chancellor plus the Leave Pool Manager or designee. The Committee acts to support the administration of the Crisis Leave Program, review the pool and program management practices by the Leave Pool Manager.

7. Eligibility Requirements

An employee is not required to contribute to the Crisis Leave Pool to be eligible to receive crisis leave. An eligible employee may apply to receive crisis leave if the following requirements are met:

1. the employee suffers from a catastrophic illness or injury;
2. the employee has exhausted all appropriate leave in accordance with this policy;
3. the employee has exhibited satisfactory attendance (with no history of leave abuse), and is not absent from work due to disciplinary reasons;
4. 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
5. the appropriate documentation from a LMSP is provided to the Leave Pool Manager.

Amount of Crisis Leave that May Be Approved

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

- A maximum of 240 hours may be granted to an eligible employee during one calendar year.
- Crisis leave may not be granted to any individual to extend paid leave status beyond a total time in leave status of 12 weeks.
- The total amount of leave granted will not exceed the balance of hours in the leave pool at the time of the employee's request.
- The employee will not accrue leave while using crisis leave.

Donation Procedures

Contributions to the Crisis 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 donated time. The donor must complete a Donation to Crisis leave form and submit it to the Office of Human Resources who forwards the form to the Leave Pool Manager. 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 hours of annual leave; donations beyond four hours must be made in whole hour increments.
- The donor must have a balance of at least 120 hours of annual leave remaining after the contribution.
- Donations are limited to a maximum of 240 hours of annual leave per employee per calendar year.
- Donations are limited to a maximum of 240 hours of annual leave upon separation or retirement.
- Leave will not be restored or returned to the donor once the leave has been transferred to the pool.

Request Procedures

An employee may request leave from the Crisis Leave Pool by completing a Crisis Leave Request form. The request must be submitted to the Leave Pool manager with a copy of the employee's Certification of Health Care Provider for Employee's Serious Health Condition (FMLA form). The Leave Pool Manager is to review the request to make sure that the employee is eligible to receive crisis leave. The employee requesting crisis leave must provide all requested information necessary for the Leave Pool Manager to make a final determination of eligibility.

Confidentiality of Requests

All requests for crisis leave will be treated as confidential. All requests and documentation for crisis leave are to be submitted in envelopes marked "confidential" to the Leave Pool Manager.

Adjudication of Requests

Each request will be stamped with date and time received by the Leave Pool Manager, and handled on a first—come, first-served basis. When possible, a request is to be submitted at least 10 days before the crisis leave is needed. The Leave Pool Manager is allowed five working days from the date a request is received (with all required documentation) to approve all or part of the request, or deny the request, and communicate such approval or denial to the employee.

If the request is approved, the Leave Pool Manager will credit the approved time to the employee's leave record.

If the request is made by an employee under the direct supervision of the Leave Pool Manager, the Leave Pool Manager may refer the request to the Leave Pool Committee to approve or reject. Also, if the Leave Pool Manager has difficulty making a determination, the Leave Pool Manager may consult with or refer the decision to the Leave Pool Committee.

Use of Crisis Leave

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 (base pay) he or she would receive in a regularly scheduled workweek and is documented in accordance with the same procedures as regular paid leave taken by the employee.

Changes in Status Affecting Crisis Leave

Crisis 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 Leave Pool Manager. The employee may request additional crisis leave subject to the limits outlined above. Extensions of crisis leave are not automatic. Each request for extension will be addressed on a first-come, first served basis.

Use of leave from the Crisis Leave pool for reasons other than those stipulated and approved by the Leave Pool Manager and/or failure to abide by procedures and requirements outlined in this policy may constitute payroll fraud and will be addressed accordingly.

Employees who are able to return to work before using all crisis leave granted must return the unused crisis 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 in crisis leave status will continue to receive his/her benefits as appropriate. However, an employee on crisis leave will not accrue paid annual or sick leave. This also applies to classified employees per Civil Service Rule 11.5(a).

Appeals

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

Approved:


Chancellor

Date:

APRIL 5, 2018

Central Louisiana Community College is an Equal Opportunity Employer in compliance with Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, and Section 504 of the Rehabilitation Act of 1973, this Educational Agency upholds the following policy: Central Louisiana Community College campuses assure equal opportunity for all qualified persons without regard to race, color, national origin, gender, religion, age, disability, marital status, veteran status or sexual orientation in admission to participation in, or employment in the program and activities of this system. Each campus welcomes handicapped individuals and has made buildings accessible to them.

**Title IX Coordinator/ADA/Section 504 Coordinator:
Human Resources Director (318) 487-5443 ext. 1154
4311 South MacArthur Drive
Alexandria, LA 71302**



**Crisis Leave Pool
Donor Application Form**

Employee Name:	Banner ID No.:
Department:	Work Phone:

My signature below certifies that I am electing to donate _____ hours of ANNUAL LEAVE to the CLTCC 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 a sealed 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 Accrued Annual Leave:	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:	



Crisis Leave Pool Crisis Leave Request Form

Employee Name:	Banner ID No.:
Department:	Contact Phone Number:
Number of Hours Requested:	Email address:
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 before this request can be processed.

Employee's Signature

Date

Application should be submitted to the Crisis Leave Pool Manager in an envelope marked "Confidential".

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