

## MICHAEL G. LUTZ LODGE #5 PHILADELPHIA FRATERNAL ORDER OF POLICE

1336 Spring Garden Street, Philadelphia PA 19123-3213 215-629-3600 website: www.fop5.org 215-592-9390 (fax)

John J. McNesby, President

Robert B. Ballentine Jr., Recording Secretary

### Catastrophic Leave Policy Package

- I. Catastrophic Leave Bank Policy
- II. General Teletype Message dated 3-19-10
- III. Donation Form for Employees Donating time
- IV. Request for Grant of Leave for Employees in need of sick time
- V. Medical Records Release for employee seeking donated time

I. Catastrophic Leave Bank Policy

#### CATASTROPHIC LEAVE BANK POLICY

### Authority

The Agreement establishes a program that permits FOP represented employees to donate vacation time to a catastrophic leave bank. The authority is derived from the ACT 111 Arbitration Award.

### Administration

The City and the Union shall jointly maintain administration of the program. The committee will consist of three (3) representatives of the Union and three (3) representatives of the City. The President of the FOP will serve as the chief spokesperson to the City for issues arising under this program.

#### Donation Period

January 1 through March  $31^{st}$  of each year, employees may contribute accrued vacation leave to the leave bank. (For calendar year 2010, this period shall be extended until April 30, 2010).

#### Donation, Grant Procedure

Employees donating accrued vacation leave must indicate this voluntary, irrevocable transfer in writing. Employees may contribute from one (1) to five (5) days in whole increments only. Donations must be verified by the Police Department.

- I. Employee Responsibilities- Each participating employee must submit a signed, dated authorization form (Authorization to Transfer Vacation Leave) to the Police Department's Personnel Unit, who then submits them to the Finance Unit. All requests must be received between January 1 and March 31<sup>st</sup> of each calendar year. Employees will receive the authorization form from the FOP.
- II. Fiscal Officer's Responsibility- On receipt of an authorization form, the Fiscal Officer will:
- a. Verify that each donor employee has a vacation balance of at least equal to the number of days being donated. Anticipated vacation days cannot be donated.
- b. Forward signed and dated approval disapproval to the employee and the Central Leave Bank in the Department of Human Resources within ten days of the determination.
- c. Teduct donated leave from donor employee's leave balance no later than the next pay period from the date of verification of available leave balance or during the period provided by the payroll system after March  $31^{\rm st}$ , (or April  $31^{\rm st}$  for calendar year 2010), whichever comes first.

### III. Central Leave Bank Responsibilities-Department of Human Resources

- 1. Maintain a central listing of employees who have contributed to the leave bank, along with number of days donated and the total balance of days available.
- 2. On receipt of an approved authorization form, notify the President of the FOP, the Police Department's Personnel Unit and Leave Transfer Committee Members monthly of the names of donor employees, payroll number, number of days donated, and the total number of days in the catastrophic leave bank.
- 3. Verify, upon receipt of approved leave request from the President of the FOP that the Central Bank has sufficient leave to honor a request.
- 4. Notify the President of the FOP and the Police Department's Personnel Unit of the approval of each submitted request within ten working days of the request.
- 5. Notify the President of the FOP and the Leave Transfer Committee members prior to each committee meeting of the total leave donated, the total leave granted to donor employees, and the amount of leave available.
- IV. Leave Transfer Committee Responsibilities The committee has the sole authority to determine eligibility for a grant of leave.
  - Review written requests from eligible employees at the appropriate intervals or when needed. Eligible employees are limited to current FOF represented employees who:
  - a) Have contributed to the bank in the current year.
  - b' Have presented acceptable documentation of a catastrophic or life threatening non-service connected illness or injury as part of their leave transfer request.
  - c) Have not been placed on the Excessive Use of Sick Leave List in the past year.

- 2. Approve/disapprove each request in a timely manner.
- 3. Determine the appropriate amount of leave to transfer to each approved applicant. Grants of leave shall be limited to a maximum of thirty (30) leave days. Employees may apply for a maximum of two (2) grants during the calendar year.
- 4. Notify the Central Leave Bank of action taken affecting leave bank balances and approve/authorize leave amounts to transfer.
- V. Applicant Employee Responsibilities
  - 1. Submit to the President of the FOP a written request for transfer of leave from the Central Leave Bank. Employees may apply under the following conditions:
  - a) Current employee who is represented by the FOP
  - b) Has contributed to the bank a minimum of one (1) vacation day in the last contribution period. The contribution period is in the same year in which the donation was made.
  - c) Present documentation of a catastrophic life threatening illness or injury which is not service connected and approaching exhaustion of all paid leave. The documentation snall include certification from a recognized medical practitioner detailing:
    - 1. date treatment began
    - 2. diagnosis
    - 3. prognesis
    - 4. expected length of absence from work
  - d) Has not been placed on the Excessive Use of Sick Leave List in the past year.

### Use of Transferred Leave

Leave granted to individual employees is subject to the following limitations and rules:

- 1. Leave may only be granted for absences related to the catastrophic illness or injury detailed in the employee's application;
- 2. Employee's must comply with the City-Wide Sick Leave Policy;
- 3. Employees who separate from City Service for any reason shall receive no cash compensation or payment for unused transferred leave;
- 4. Any unused transferred leave shall be restored to the leave bank upon an employee's separation from City service, or upon cessation of the catastrophic illness or injury.

For the Union

For the Cit;

II. General Teletype Message dated 3-19-10

To : All personnel

From : D/C organizational Support Services

Subject: CATASTROPHIC LEAVE BANK

In accordance with the latest collective bargaining agreement between the City of Philadelphia And the Fraternal Order of Police, a catastrophic leave bank has been established. Each year During the period of January 1<sup>st</sup> to March 31<sup>st</sup>, employees may contribute up to five accrued Vacation leave days to the leave bank.

For the calendar year 2010, this period shall be extended until April 30, 2010

Employees donating accrued vacation leave must indicate this voluntary, irrevocable transfer in writing. Employees may contribute one to five days in whole increments only. Donations will be Verified by the police department.

Employees who wish to donate accrued vacation time must submit a signed, dated

Authorization to transfer vacation leave form (available at the fop lodge 5) to the Personnel

Unit. All requests must be received between January 1st and March 31st. (request period extended to April 30 for calendar year 2010)

The leave transfer committee has the sole responsibility to grant the use of leave. In order to receive this benefit the employee must have contributed to the bank during the current year.

Grants of leave shall be limited to a maximum of thirty leave days with a maximum of two grants during the calendar year.

Individuals applying for a grant shall contact the FOP at 215 629 3600.

This message to be read at all roll calls for three consecutive days

John J. Gaittens

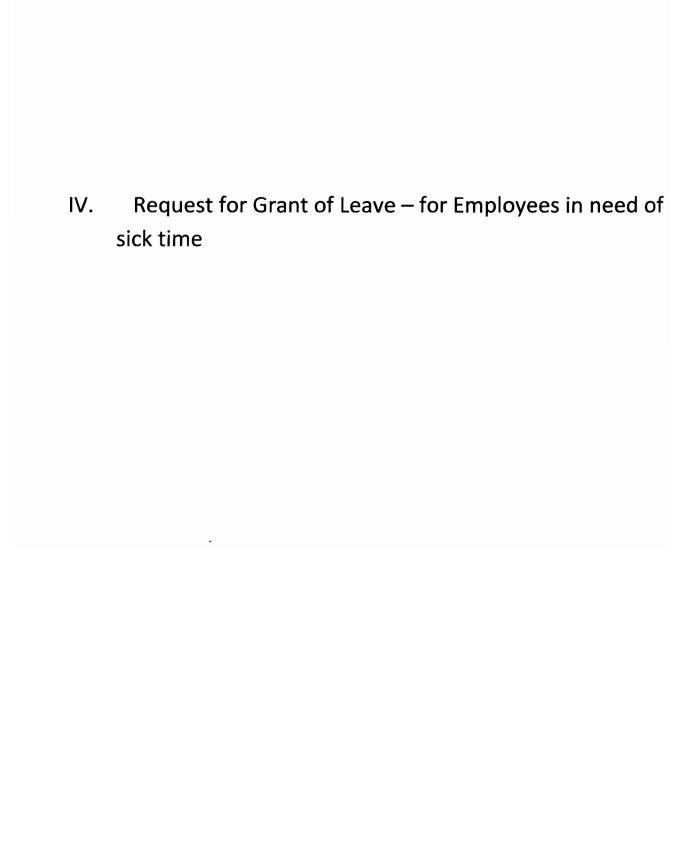
D/C Organizational Support Services

III. Donation Form – for Employees Donating time

### MEMORANDUM

### CITY OF PHILADELPHIA

DATE:		
TO: Police Departm	nent Personnel Unit	
FROM:(Please Pri		
(Please Pri	int)	(Payroll Number)
SUBJECT: AUTHORIZATION	ON TO TRANSFER VAC	ATION LEAVE
permits the transfer of up to by the FOP and the City of F	5 accrued vacation days Philadelphia. The leave be ness or injury who have ocable and must be in fu	·
Employee Signature:		
Leave Avallability Verified:	Human Resources	Manager
cc: Central Union Office Personnel Department Employee File		



## **MEMORANDUM**

# FRATERNAL ORDER OF POLICE LODGE 5 Catastrophic Leave Bank Request

		DATE:
TO : John J. McNesby, President		
FROM	:	
SUBJECT	': Req	ruest for Leave from Catastrophic Leave Bank
	1.	I respectfully request to be granted Leave from the Catastrophic Leave Bank because of an illness/injury that is catastrophic in nature.
	2.	I currently have hours of accrued sick leave and I am facing the exhaustion of all accrued leave with the Police Department.
	3.	Documentation regarding my illness/injury is attached herein.
		Name

V. Medical Records Release – for employee seeking donated time

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To: Transfer of Leave Committee

From: , Payroll #

Subject: AUTHORIZATION OF RELEASE - MEDICAL RECORDS

I, \_\_\_\_\_\_, hereby authorize the Transfer of Leave Committee (the "Committee") to review my medical records as part of the Committee's consideration of my request to be granted sick leave from the Central Leave Bank. I understand that these records will not be disclosed or communicated, either directly or indirectly, at any time during my employment, to any other employee, person, firm or corporation without my express

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authorization.

I further agree that I will indemnify and hold the Committee harmless from any and all claims, demands, suits, causes of actions or other liabilities which I may have or that may arise out of or by reason of actions taken or not taken by the Committee for the purpose of reviewing these medical records and/or considering my request for sick leave from the Central Leave Bank.

Employee Signature