



ORANGE  
PUBLIC SCHOOLS  
ORANGE, NEW JERSEY

Ronald C. Lee,  
Superintendent



SY2015 - 2016

## BULLETIN #39

### ORANGE BOARD OF EDUCATION VOLUNTARY SICK BANK PROGRAM GUIDELINES

**Purpose:**

To establish and implement a sick leave bank utilizing a voluntary donation program to assist employees who experience a “catastrophic health condition or injury” and have exhausted their paid leave benefits. The bank shall allow employees to voluntarily donate accrued sick days to an eligible employee. This bank shall be established pursuant to P.L. 2007, Chapter 223.

A catastrophic health condition or injury is a life threatening condition or combination of conditions or a period of disability required by his or her mental or physical health and requires the care of a physician who provides a medical verification of the need for the employee’s absence.

The Voluntary Sick Bank Donation Program must be annually approved by the Orange Board of Education from July 1<sup>st</sup> through June 30<sup>th</sup>.

**Committee:**

A Voluntary Sick Bank Program Committee will convene monthly, if necessary with representatives from the Orange Education Association, Orange Administrators and Supervisors Association, Non-affiliate employees and Management. The committee shall establish standards and procedures as it deems appropriate for the operation of the voluntary sick leave bank. These shall include, but not be limited to, eligibility requirements for participation in the voluntary sick leave bank and the conditions under which the sick leave time may be drawn. No voluntary sick day of leave which is donated to the bank by an employee shall be drawn by that employee or any employee from the sick leave bank unless authorized by the committee in order to provide sick leave.

1. A Committee will be established to review all requests by employees who are requesting to be on the lists of eligible employees to receive and donate personal illness days.
2. The Committee shall be made up of six members: one representative from the Orange Administrators and Supervisors Association, two representatives from the Orange Education Association, one representative from the Human Resources Department, one representative from the non-affiliate employees and the Chief School Administrator or his/her designee.
3. The Committee will meet on a monthly basis. The calendar will be determined at the beginning of the school year. No meeting will be held when there are no applications to be reviewed.

4. The Committee shall review the Voluntary Sick Donation guidelines annually in September.
5. A quorum is necessary for the purpose of conducting business and will consist of four members.
6. A Secretary will be selected from the Committee members.
7. An employee from the HR Department will assume the role of Chair and will maintain files and communicate the decisions of the Committee to applicants and employees whose donated illness days have been accepted.
8. Minutes of all Committee meetings will be taken by the Secretary. The Committee will take into consideration the following factors when approving an application:
  - a. Attendance history of the applicant
  - b. Previous applications and awards from the Voluntary Sick Donation Bank
  - c. Pre-existing conditions and the effect on absenteeism
  - d. Seriousness of condition and estimated length of illness
  - e. Any other meaningful factor for the Committee to make a determination
9. The Committee may request a second opinion from a District selected physician to review the employee's medical documentation and/or conduct an independent examination.
10. Any Committee member who feels unable to render an impartial decision should recuse him/herself from voting and an alternate person will be chosen by the OEA, OASA or Management.
11. The Committee may award up to a maximum 90 donated sick days per application. Two applications may be approved within one academic year for a maximum total of 180 donated sick days or no more than four applications for a total of 180 donated sick days within two consecutive academic years. An employee who receives the maximum (180 donated sick days) may reapply after a five year period.
12. The Committee will make judgments concerning the granting of donated sick days based upon the purpose of such leave. A majority vote will determine the outcome of the request. In the event of a tie vote of the Committee, the request will be approved.
13. The determination and decisions of the Committee will be final and not subject to the grievance procedure and arbitration. Any employee who invokes the provisions of this plan agrees to hold harmless the Associations and the Board of Education, and their respective members, and may not grieve or otherwise challenge the implementation of the Voluntary Sick Bank guidelines.
14. The donation of any sick days will be on a *voluntary basis* and the employee may be able to identify to whom they would like their sick days donated after the employee has been approved to receive the donated days.

***ELIGIBILITY REQUIREMENTS TO RECEIVE DONATED PERSONAL ILLNESS DAYS:***

1. Employee (not family members) must be suffering from a catastrophic illness or injury which is life threatening which may leave a significant residual disability. No exceptions!
2. Maternity/Pregnancy requests are excluded, as well as, applications resulting from elective or cosmetic procedures and work-related injuries compensated through Workers Compensation Insurance.
3. No sick bank days will awarded unless the employee has exhausted all personal sick days, vacation days and/or personal business days available to them prior to submitting an application.
4. Applications must be accompanied by a physician's statement on the physician's letterhead stating the following:
  - a) Applicant's name
  - b) A full diagnosis of the illness and how it meets the definition of a catastrophic illness or injury
  - c) Estimated length of absence/return to work
  - d) Any additional medical documentation to support the application
5. Any applicant who contacts members of the Sick Bank Committee other than the "Committee Secretary" will forfeit their right to the Voluntary Sick Bank time requested. This process is an attempt to make the granting or denial of the request as impartial as possible.
6. Once sick days are donated and approved an employee will:
  - a) Receive their full compensated daily rate based upon their computed annual salary or
  - b) Receive a flat rate of \$250.00 per day if their daily rate is ***more than \$250.00.***
7. An employee may submit an application for a maximum of 90 donated sick days per application. Two applications may be approved within one academic year (July 1<sup>st</sup>- June 30<sup>th</sup>) for a maximum total of 180 donated sick days or no more than four applications for a total of 180 donated sick days within two consecutive academic years. An employee who receives the maximum (180 donated sick days) may reapply after a five year period.

***GUIDELINES FOR EMPLOYEES WHO DONATE PERSONAL ILLNESS DAYS:***

1. Only personal sick days may be donated.
2. All donated sick days are voluntary.
3. An employee must have a balance of twenty days remaining in their personal attendance bank after donating any sick days to another employee.
4. Employees will inform the HR Department *via email or fax only*, indicating the number of sick days to be donated and stating the name of the employee who has been identified and approved to receive such donated sick days. Employees may donate sick days to the Sick Bank under the general sick bank category where the employees receiving such days will not know the donor.
5. Once a donation is accepted and approved by the Voluntary Sick Bank Committee, they cannot be rescinded/returned.
6. Donated sick days will be used in the order that they are donated one day at a time in a chronological order, first come basis.
7. Only full day increments will be donated.
8. If an employee's leave is terminated prior to the end date of the approved leave, any unused sick

days may be returned to the employee(s) who donated them on a pro-rated basis.

9. Employees may donate only to those employees they have identified to receive sick days, pursuant to the employee's eligibility to received such donated sick days; unless, specified that the donated sick days be deposited into the general sick bank.

***PROCEDURAL GUIDELINES:***

1. The employee requesting sick bank days must file a written application to the HR Department on a form available from the HR Department and/or Building Association representatives. The application must be accompanied by the requested physician's medical documentation in order to determine their eligibility.
2. The Voluntary Sick Bank Committee will convene upon receipt of an application in order to determine approval and eligibility of the employee to receive donated days, as well as the number of days to be approved.
- 3 Upon approval from the Voluntary Sick Bank Committee, the employee may commence to solicit donations or request the HR Department to send out a general email to solicit donations. An employee donation form will be attached to an email to district staff.
4. A time period of two weeks will be granted to receive the donations from employees *via email or fax only*.
5. Once the maximum amount of donated days has been received, all other forms will be returned to the employee(s) indicating the amount donated approved has been received.
6. On a first come, first accepted basis, personal sick days will be deducted from the employee who receives a form indicating how sick days will be taken from their personal bank and the number sick days they have remaining for the year.
7. The Voluntary Sick Bank Committee Secretary will inform the eligible employee of the number of sick days granted to them from the Voluntary Sick Bank Program and any deviation in the daily pay rate, if applicable.
8. The HR Department will provide a Payroll Notice to the Payroll Department if any employee is eligible for the \$250.00 flat rate.

ORANGE PUBLIC SCHOOL DISTRICT  
VOLUNTARY SICK LEAVE BANK REQUEST FORM



Please complete and return the sick leave form to the Human Resources Department.

NAME: \_\_\_\_\_  
(Please Print)

SCHOOL: \_\_\_\_\_ POSITION: \_\_\_\_\_

DATE OF HIRE: \_\_\_\_\_

Briefly describe the nature of your disability and how it meets the definition of a catastrophic illness:

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Number of sick leave bank days being requested \_\_\_\_\_

If sick bank days are granted, what is the effective date you wish to apply these days?

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**ELIGIBILITY REQUIREMENTS TO RECEIVE DONATED PERSONAL ILLNESS DAYS:**

1. Employee (not family members) must be suffering from a catastrophic illness or injury which is life threatening which may leave a significant residual disability. No exceptions!
2. Maternity/Pregnancy requests are excluded, as well as, applications resulting from elective or cosmetic procedures and work-related injuries compensated through Workers Compensation Insurance.
3. The employee must be employed in the District for no less than three years and one day.
4. No sick bank days will be awarded unless the employee has exhausted all sick days, vacation days and/or personal business days available to them prior to submitting an application.
5. **Applications must be accompanied by a physician's statement on the physician's letterhead stating the following:**
  - a) **Applicant's name**
  - b) **A full diagnosis of the illness and how it meets the definition of a catastrophic illness or iniurv**

**Authorization for Release of Health Information**

I authorize the use or disclosure of my health information to authorized members of the Orange Public Schools Voluntary Sick Bank Committee. This information will be used to determine my eligibility to receive days from the sick bank.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

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*Committee Use Only:*

*Date Considered:* \_\_\_\_\_

*Other Requests/Documentation*

\_\_\_\_\_ *Approved*    \_\_\_\_\_ *Not Approved*

- *Attendance Calendars*

*Number of days Approved:* \_\_\_\_\_

- *Daily Rate: \$* \_\_\_\_\_

\_\_\_\_\_  
*Committee Chairperson*