

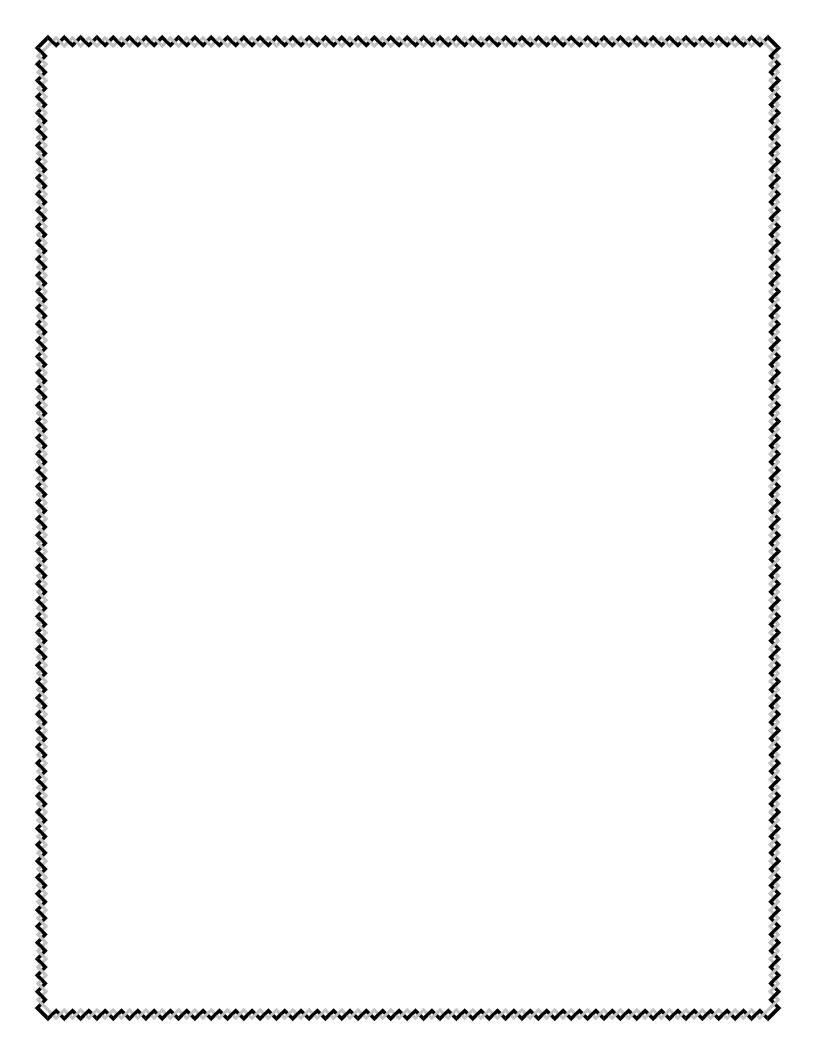
REPORTING ABSENCES CERTIFICATED STAFF

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REPORTING ABSENCES CERTIFICATED STAFF

Employee Benefits Department

Between collective bargaining agreements, Education Code, and state and federal regulations, reporting an employee's absence under the correct category can be confusing. Hopefully this document will make the process a little easier.

If there is any discrepancy between this document and the collective bargaining agreement, the collective bargaining agreement supersedes.

TIMELINE:

Employees should have their absences in ESS by the 5^{th} of the month, to allow time for supervisors to review and make any necessary adjustments. All absences need to be finalized and approved by the supervisor by the 11^{th} of each month, so that the balances will be reflected accurately on the employee's paycheck stub.

❖ If an employee is going to be on an extended leave or in the case of resignation/termination/death of an employee, please inform the Employee Benefits Department immediately and enter the absences in ESS for duration of leave ASAP to avoid the possibility of overpayment to the employee.

REPORTING ABSENCES:

To report absences:

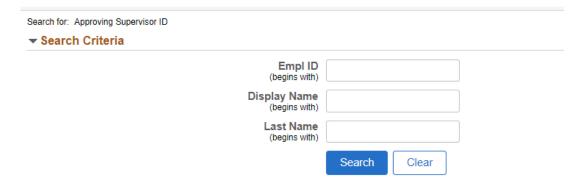
- 1. Log into Employee Self Service (ESS) and
- 2. Click the "Absence Reporting" tile. On the left side of the screen, click "Absence Management".
 - a. If you are authorized and are reporting absences for another employee, you will have an additional category: "Absence Administration".
 - i. "Absence Time History" allows an employee to review all absences submitted (this will be discussed later in the booklet).



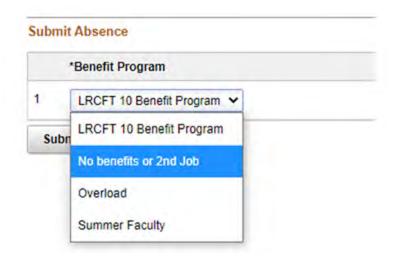
Enter the approving supervisor's Employee ID#.



If you do not know the supervisor's ID number, you can search by "Display Name" or "Last Name".



Report the time missed under "Submit Absence". If an employee has both a full time and overload assignment, two separate absence transactions must be submitted. It's important to make sure the absence transaction is marked with the correct "Benefit Program" or assignment (i.e. the full time assignment, adjunct/overload, summer). This is because there are different banks of sick leave for full time, adjunct/overload and summer assignments. Incorrectly marking the absence report will result in the time being deducted from the wrong bank of sick leave.



After selecting the appropriate Benefit Program, select the correct "Absence Code" for the time missed. Enter the dates of absence and the hours. Add comments for any absence requiring additional information. Click the "+" button to add additional lines for multiple absences. Once all absences are entered, click the "Submit Absence Button".



REVISED/ADDITIONAL ABSENCES:

An employee may delete an absence by using the "-" button, up to the point the absences are approved by the supervisor. Once an absence is approved, the absence can only be deleted by Benefits staff until the 12th of the month. Any corrections after the 12th will need to be submitted to Employee Benefits by emailing a revised absence report using the Cumulative Absence Report form located on our website (<u>bs-137.pdf (losrios.edu)</u>).

If an employee needs to report additional time missed for a prior month, this can be reported in ESS. Note that the "Reporting Month" is the month we are currently reporting, not necessarily the month of the absence. For example, if on July 31st an employee is submitting a June absence, the Reporting Month will show as July, since that would be the current reporting month. Under "Submit Absences," you can designate the exact date(s) of the absence. The same applies if you are reporting absences for a future month.

Reporting Month

From 07/01/2021

Through 07/31/2021

If a revised absence report is submitted and the original and revised leave types are not necessarily interchangeable, the employee will receive a memo from the Employee Benefits Department denying the revision. The employee may submit additional documentation to Employee Benefits Department to substantiate the change in leaves and Employee Benefits will re-evaluate the revision.

For example:

Hildigard submitted an absence transaction with 8 hours personal business. She only had 6 hours available to use, so 2 hours were changed to a loss of pay. Hildigard then submitted a revised absence report for 6 hours personal business and 2 hours sick leave. Sick leave and personal business are not interchangeable leaves, so the revision was denied. If Hildigard is able to supply a physician's note to substantiate her illness on that day, Employee Benefits would re-evaluate the denial of her revision.

ACCRUAL RATES

	Monthly Accrual Rate
Coordinators, Counselors, Nurses	6.25
Counselor	5.42
Librarians	7.00
FT Instructors	4.00
Adjunct/Overload/Summer	FTE X 15

SICK LEAVE:

Sick leave is for the **employee's** own illness, injury, and doctor or dentist appointment(s).

An employee absent due to their own illness or injury should report sick leave, even if all of their sick leave has been exhausted. It is possible that the employee is eligible for an advance of sick leave or for Five Month Law Benefits. If the absences are not reported as sick leave, the Employee Benefits Department will not be aware that the employee may be entitled to additional benefits.

The Employee Benefits Department will determine if the employee qualifies for Five Month Law and will then make the appropriate adjustments to the absences. The college will be advised of the changes made, and will then notify the employee of the changes.

Per all collective bargaining agreements, employees must provide a physician's note for any absence of 10 days or more. Due to FMLA regulations and the amount of time the Department of Labor provides employers to notify the employee of their rights under FMLA, it is imperative that these notes are obtained from the employees. Please email the notes to the Employee Benefits Department as soon as possible.

MATERNITY LEAVE:

The employee must complete Form P-111 (Request for Pregnancy/Childbirth Leave of Absence) and submit to their dean. This form may be obtained online - Request for Pregnancy Childbirth Leave of Absence P-111 (losrios.edu).

The employee must obtain medical verification (a note or form) from their physician. The medical verification must include the dates or duration (i.e. 6 weeks/8 weeks post-partum or a return to work date) that the physician authorizes the employee to be absent from work. The medical verification must also include a diagnosis (i.e. maternity, pregnancy). Copies of the medical verification should be provided to the College and to Employee Benefits, except that the note provided to the College does not need to include any diagnosis-related information.

Employees utilize accrued sick leave (including the advance, through June 30 for full-time employees) for maternity reasons, but only for the period of disability authorized by their physician. If the employee's sick leave is exhausted, the employee would be eligible for Five Month Law, provided they submit a qualifying Five Month Law medical verification. If approved, Five Month Law pays at 50% of the reported hours and the other 50% will be offset with 30 calendar days of Catastrophic Leave, for eligible employees, to keep the employee in full paid status. If the Catastrophic Leave is exhausted and the employee has banked Type C Leave, they may be able to apply to use Type C Leave to offset any loss of pay (contact Human Resources regarding the qualifications and process for Type C Leave). For more information on Five Month Law, see the Five Month Law section of this document.

Under the Collective Bargaining agreement, the employee gets five days of paid leave for the birth of the child. Please e-mail the Employee Benefits Department once you become aware of the date of birth of a newborn. This will allow the Employee Benefits Department to process the leave information in a timely manner as that information will allow the leave calculations to be finalized.

Please report absences as sick leave for the duration of disability specified by the doctor's note, and Employee Benefits will coordinate Five Month Law benefits with any other applicable leaves.

Faculty may take one semester off, unpaid, for baby bonding. During this time their health insurance will be fully paid (See Collective Bargaining Agreement for details).

Employees may qualify for the Family and Medical Leave Act (FMLA), Pregnancy Disability Leave (PDL) and the California Family Rights Act (CFRA) for a maximum of 28 weeks. These are all unpaid leaves, but they do provide job and benefit protection. For more information on these leaves, see the FMLA, CFRA and PDL section of this document.

If the employee does not return to work on the date designated on Form P-111, it is imperative that they inform their college and the Employee Benefits Department in order to avoid possible overpayment to the employee.

The new dependent must be enrolled in the District's medical or dental plan within 31 calendar days from the date of birth or adoption. If the dependent is not enrolled within the 31 calendar days, the next opportunity to enroll would be at open enrollment in April/May with a July 1^{st} effective date.

PARENTAL LEAVE LAW:

Parental Leave applies to the birth parent, the non-birth parent, and adoptions.

Parental Leave is a state law that provides eligible employees **paid leave** for the 12 weeks of baby bonding time. Employees are eligible if they have been employed for at least 30 days.

During the 12 weeks of Parental Leave, the employee must use all available and advanced sick leaves to receive pay. If the employee exhausts all available and advanced sick leaves, the employee will continue to receive pay for 50% of their reported hours. Parental Leave may be used with Type C Leave, if available, to achieve 100% pay (for more information on Type C Leave, see page 3).

Parental Leave begins once PDL expires. CFRA and Parental Leave may be taken immediately following the expiration of PDL or anytime within the first year the baby is born or adopted. If the employee elects to return to work and utilize these leaves at a later date, they must work with their supervisor to coordinate a mutually convenient time to take leave. A P-111 form must be completed each time the employee takes Parental Leave.

LOS RIOS COMMUNITY COLLEGE DISTRICT

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ob Title			De	ept	
ocation 🗆 ARC 🗆 CRC	□ DO □ Ethan I	□ FLC □ FM	□ SCC		
plan to use my sick leave elating to pregnancy / chi					orary disability
From		То			
am attaching a verification attending physician. If the senefits as soon as possible understand that if my sickection 88196) is not sufficiently accrued vacation to used.	length of this temper. k leave entitlement (ient to cover the ab	orary disability (including other sence due to p	changes, I will r sick leave pro regnancy / chil	provide additional ovided under Educ ldbirth disability, t	ation Code he District will
777	Ch	ild Care L	eave		
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FAMILY MEDICAL LEAVE ACT (FMLA), CALIFORNIA FAMILY RIGHTS ACT (CFRA) & PREGNANCY DISABILITY ACT (PDL):

FMLA/CFRA:

FMLA is a federal law and CFRA is a state law that provide eligible employees an **unpaid leave** of up to 12 weeks in a 12-month period for certain family and medical reasons. Employees are generally eligible if they have worked at Los Rios for at least one year.

FMLA and CFRA are unpaid; therefore employees must use the leave in conjunction with the appropriate paid leaves (sick leave, personal necessity, five month law and vacation) in order to receive all or part of their regular salary.

Since employees are only entitled to 12 weeks of leave in a 12-month period, Employee Benefits tracks the amount of FMLA time taken. It is important to indicate FMLA in the comments box in ESS, especially in instances when an employee is taking intermittent leave, so that Employee Benefits can accurately track FMLA usage.

FMLA will automatically be triggered based off of an absence report with absences of 10 days or more or by a doctor's note indicating continuous absences and/or treatment. In cases where absences are intermittent or are for an immediate family member, the employee will need to request FMLA by completing the *Family Medical Leave Request Form*-186 FMLA Request 2-2013 (losrios.edu) and the *Family Medical Leave Certification of Physician or Practitioner* -WH-380E (dol.gov).

PDL:

PDL is unpaid and valid while the employee is disabled by pregnancy, childbirth or a related medical condition. PDL does not need to be taken in one continuous period of time but can be taken on an as-needed basis.

FMLA/PDL/CFRA LEAVE INTERACTIONS

Below are a few possible scenarios to demonstrate how the combination of FMLA, PDL, and CFRA leaves would be coordinated.

Scenario 1:

Suzy works until her delivery date and has a normal delivery, without complications. Suzy's physician has released her from work for the standard 6 weeks. Suzy will return at the end of 6 weeks.

The following leaves are applicable: 6 weeks of the 16 week maximum PDL entitlement (her physician only authorized disability for 6 weeks) and 6 weeks of her maximum 12 week FMLA entitlement. She did not request any additional "bonding" time with the baby under CFRA.

Weeks:

1	2	3	4	5	6	7	8	9	10	11	12
		PI	DL								
		FM	LA								
I											

Scenario 2:

Suzy works until her delivery date and has a normal delivery, without complications. Suzy's physician has released her from work for the standard 6 weeks. She has requested an additional leave of absence for 12 weeks for a total of 18 weeks.

The following leaves are applicable: 6 weeks of the 16 week maximum PDL entitlement (her physician only authorized disability for 6 weeks). She will use 12 weeks of her maximum 12 week FMLA entitlement and 12 weeks of her maximum 12 week CFRA/Parental Leave entitlement.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
		PΙ)L								CFRA	/PLL					
					FM	LA											

Scenario 3:

Suzy is having a difficult pregnancy so her physician takes her off work 8 weeks prior to delivery. She has a cesarean delivery so her physician has released her from work for another 8 weeks. She has requested an additional leave of absence for 12 weeks for a total of 28 weeks.

The following leaves are applicable: 16 weeks of the 16 week maximum PDL. She will use 12 weeks of her maximum 12 week FMLA entitlement and 12 weeks of her maximum 12 week CFRA/Parental Leave entitlement.

Weeks:

1	2 3 4 5 6 7 8	9 10	11 12	13	14	15	16	17	18	19	20	21	22	23	24	25-28
		PDL									(CFR	A/PI	LL		
	FMLA															

Five Month Law:

When an employee **exhausts all accrued and advanced (if applicable) sick leave,** the employee may be eligible for Five Month Law, which pays at 50% of the reported hours. An employee is credited with 100 days of Five Month Law ("Other Sick Leave") each fiscal year, which includes the employee's accrued and advanced sick leave.

For example, if an employee has 50 sick days of accrued sick leave as of July 1st, the amount of sick leave that the employee could use for the remainder of the fiscal year would be the 50 days accrued plus 10 days advanced if the employee has more than six months of service. The employee would then have a total of 60 days of sick leave that will be included in the 100 days of Five Month Law/Other Sick Leave, leaving 40 days of Five Month Law leave. If the employee has less than six months of service, the employee would be advanced six (6) days of sick leave for the fiscal year. Please note that any portion of a day used counts as a day of Five Month Law.

An employee has a five month window from the first day of absence to use the benefit. Using the above example, the employee has two months of sick leave so Five Month Law would not take effect until the third month. Since the employee had already been out two months, that would leave three months in which to use the 40 days of Five Month Law.

The employee may be eligible for other benefits (e.g. Catastrophic Leave and Long Term Disability) to offset five month law.

- 1.) Employee will receive a **letter of notification/instruction** from the Los Rios Employee Benefits Department if he/she is eligible for Five Month Law.
- 2.) The letter will contain the employee's available leave balance and specific requirements that must be met in order for Five Month Law to take effect.
- 3.) The following verification criteria must be received by the Employee Benefits Department for Five Month Law to be applied:
 - The diagnosis supporting the absence.
 - The begin and end dates of the absence.
 - A physician's statement indicating the illness or injury that prohibits you from working.
 - The date you can return to work.
 - If there are any restrictions when you return to work. (e.g. no lifting over 25lbs)
 - Signed legibly by a medical physician or designee, nurse practitioner, surgeon, physician's assistant, psychiatrist, chiropractor, or dentist.

If acceptable medical verification is not received, the employee will be given a loss of pay for the absences.

Los Rios Community College District



FIVE MONTH LAW PHYSICIAN'S VERIFICATION OF INJURY/ILLNESS FORM California Education Code §87780 and §88196

For Completion by the <u>PHYSICIAN</u> - All Sections are REQUIRED

Medical Facts:	
for tracking purposes only as there	ness supporting the absence. (A <u>diagnosis</u> is required e are limits on the number of days available for <u>each</u> argaining contract.) Please list the diagnosis and <u>not</u>
	ury/illness prohibits the above-named patient from working
on the following begin date:	through:
	(Date range employee is off work.)
Data amployae is for is anticipated to	o be) released to return to work:
	o be) released to return to work: (Date employee will be back at work, i.e. first workday after "through date" above: rn to work (if yes please list below): YES NO
Restrictions associated with the return	(Date employee will be back at work, i.e. first workday after "through date" above:
*Physician's signature: *Signature by a physician or design psychiatrist, chiropractor or dentist	(Date employee will be back at work, i.e. first workday after "through date" above: rn to work (if yes please list below): YES NO
* Physician's signature: *Signature by a physician or design psychiatrist, chiropractor or dentist form will be accepted provided all to	(Date employee will be back at work, i.e. first workday after "through date" above. In to work (if yes please list below): YES NO Date: Dee, nurse practitioner, surgeon, physician's assistant, will be accepted. Documents submitted in lieu of this
* Physician's signature: *Signature by a physician or design psychiatrist, chiropractor or dentist form will be accepted provided all to	(Date employee will be back at work, i.e. first workday after "through date" above. In to work (if yes please list below): Date: Dee, nurse practitioner, surgeon, physician's assistant, will be accepted. Documents submitted in lieu of this the required information and signature is included.

Scenario 1:

Hilda (full time instructor) has **no sick leave remaining effective June 30, 2021 due to an illness**. She wants to know how many additional days of paid leave are available in the new fiscal year.

Sick Leave	Five Month Law
0 hours (0 days)	Up to 100 days maximum
	Computed Calculation:
10 days advanced from the upcoming fiscal year	100 days (Five Month Law) – 10 days (sick leave) = 90 days available after sick leave is exhausted
Total Sick Leave Available: 10 days	Total Approved Five Month Law Paid Leave: 90 days

Scenario 2:

Hilda has a balance of 24 hours of sick leave. Based on her doctor's recommendations, she will be off work for 6 months due to her illness, starting on July 1. She wants to know how much Five Month Law leave she will receive.

Sick Leave	Five Month Law
Accrued 24 hours/4 hours = 6 days	Up to 100 days maximum
	Computed Calculation:
6 days + 10 days advanced in the current fiscal year = 16 days	100 days (Five Month Law) – 16 days (sick leave) = 84 days available after sick leave is exhausted
Total Sick Leave Available: 16 days	Total Five Month Law Available: 84 days

Scenario 3:

Hilda has 1,200 hours of sick leave that will be exhausted on December 1, 2021. She needs surgery due to injury and will be out of work for six (6) months. She would like to know how many additional days of paid leave are available.

Sick Leave	Five Month Law
600 hours/4 hour work day = 150 days	Up to 100 days maximum
Employee is <i>ineligible</i> to receive Five	Month Law; sick leave exceeds 100 days maximum

CATASTROPHIC LEAVE:

Catastrophic illness or injury means an illness or injury that is expected to incapacitate an employee from work for an extended period of time. Employee must have exhausted <u>all</u> of his or her eligible sick leave and be in less than full pay status.

The Catastrophic Illness or Injury Leave Program provides eligible employees (permanent employees not receiving workers' compensation or long term disability benefits) who have exhausted all sick leave and are on Five Month Law full pay for up to 30 days.

Extended Catastrophic Leave extends the leave for eligible (permanent employees not receiving workers' compensation or long term disability benefits) employees who are unable to return to work fully or partially once all sick leave and Five Month Law benefits are exhausted.

Employees must apply for Extended Catastrophic Leave and be approved by the Paid Health Leave Committee. Employees may apply for up to 50% of their salary and full medical benefits for a period of no longer than 1 semester (82 days).

Catastrophic Leave Process:

- 1.) Eligible employees must submit the application for Extended Paid Catastrophic Leave to the Employee Benefits Department. The Release of Medical Information form must accompany the application.
- 2.) Applications will be reviewed by the Catastrophic Illness or Injury Committee.

LOS RIOS COMMUNITY COLLEGE DISTRICT APPLICATION FOR EXTENDED PAID CATASTROPHIC SICK LEAVE Los Rios Faculty

Instructions: Employee or representative is to complete this form and attach the Physician's Statement and the Authorization for Release of Medical Information form. All forms are to be returned to the Associate Vice Chancellor, Human Resources.

Employee Name	Job Title	_							
Work LocationARC	_CRCFLCSCCDO/FM								
Employee ID #	Home Phone	-							
I wish to apply for the Extended Paid Catastrophic Sick Leave available per Article 9.13 of the LRCFT Contract. I understand that I may apply for up to eighty-two (82) workdays of leave commencing the first day that I am in less than full pay status and ending no more than 82 days later. I understand that I must exhaust all my eligible leave balances and not be eligible for disability, workers' compensation, or other benefits, to be eligible for the Extended Paid Catastrophic Sick Leave. If I wish to apply for an extension, I understand I must submit a new application with supporting documentation.									
Leave for Personal Illness of Describe the nature of the incapacitated from work.	r Injury: injury/illness & the expected length of time you will be								
A Physician's Statement verifying your incapacitation must be attached to the application.									
A Physician's Stateme									
I hereby request approval fo	application. r the Extended Paid Catastrophic Sick Leave. I have attache fying my illness/injury. I have also attached the Authorizatio								
I hereby request approval fo a physician's statement veri for Release of Medical Inforr	application. r the Extended Paid Catastrophic Sick Leave. I have attache fying my illness/injury. I have also attached the Authorizatio								
I hereby request approval fo a physician's statement veri for Release of Medical Inform Employee Name (please print)	application. r the Extended Paid Catastrophic Sick Leave. I have attache fying my illness/injury. I have also attached the Authorizatio nation form.								
I hereby request approval fo a physician's statement veri for Release of Medical Inform Employee Name (please print)	application. r the Extended Paid Catastrophic Sick Leave. I have attache fying my illness/injury. I have also attached the Authorizatio nation form.								
I hereby request approval fo a physician's statement veri for Release of Medical Information Employee Name (please print) Employee Signature Committee Use Only:	application. r the Extended Paid Catastrophic Sick Leave. I have attache fying my illness/injury. I have also attached the Authorizatio nation form. Date Date								
I hereby request approval fo a physician's statement verifor Release of Medical Information Employee Name (please print) Employee Signature Committee Use Only: Leave: Approved for	r the Extended Paid Catastrophic Sick Leave. I have attache fying my illness/injury. I have also attached the Authorizatio nation form. Date								
I hereby request approval fo a physician's statement verifor Release of Medical Information Employee Name (please print) Employee Signature Committee Use Only: Leave: Approved for	r the Extended Paid Catastrophic Sick Leave. I have attache fying my illness/injury. I have also attached the Authorizatio nation form. Date days DeniedReason Reason								

Los Rios Community College District EXTENDED PAID CATASTROPHIC SICK LEAVE MEDICAL CERTIFICATION Los Rios Faculty

Instructions:

- · Complete Employee Information.
- · Submit to medical provider for certification.
- Attach original to Application for Extended Paid Catastrophic Sick Leave Form.
- · Please print using blue or black ink pen.

Employee Name:	Employee ID Number:	Employee Home Telephone:
Employee Address:	Employee City & Zip Code	5
Employee College Name and	Department:	
injury and provide the neces	ding physician to furnish certific ssary information to my employe aid Catastrophic Sick Leave.	ation of the medical illness or er for the purpose of verifying my
Employee Cignoture	Date	-
Employee Signature Physician's Statement		
Physician's Statement Please complete the followito access the Extended Pai		ployee. The employee is not abl
Physician's Statement Please complete the following to access the Extended Pain returned. (Note: Specific an	t ng information for the above em d Catastrophic Sick Leave until d detailed confidential patient in	ployee. The employee is not abl
Physician's Statement Please complete the followi to access the Extended Pai returned. (Note: Specific an Nature of injury/illness: Duration of illness/injury:	t ng information for the above em d Catastrophic Sick Leave until d detailed confidential patient in	ployee. The employee is not abl this form is completed and formation is not required.)
Physician's Statement Please complete the followi to access the Extended Pai returned. (Note: Specific an Nature of injury/illness: Duration of illness/injury:	ng information for the above em d Catastrophic Sick Leave until d detailed confidential patient in	ployee. The employee is not able this form is completed and formation is not required.)

Above information may be provided on Physician's own form

Distribution: White and Canary: Human Resources Pink: Employee BS# 201 4/2010

LOS RIOS COMMUNITY COLLEGE DISTRICT AUTHORIZATION FOR RELEASE OF MEDICAL INFORMATION Los Rios Faculty

, authorize the release of the

(Print employee's name)	
medical information described below to the Los Rios Community College Di Extended Paid Catastrophic Sick Leave Committee for the purpose determining my eligibility for Extended Paid Catastrophic Sick Leave. authorization applies to the following type of information:	e of
All medical information about me provided in response to the Physic Statement accompanying this Authorization for Release of Me Information describing the incapacitating nature and probable duration my medical condition.	dical
This authorization to release information is valid until I either return to customary duties as an employee of the Los Rios Community College District my employment as a Los Rios Community College District employee e However, regardless of whether I have returned to work or my employment ended, this Authorization for Release of Medical Information shall expire year from the date of this authorization.	ends. t has
(Employee's Initials) I understand that I have the right to receive a copy of this authorization. By placing my initials to the left of this clause or original authorization, I hereby acknowledge that a true copy of this authorization shall be as valid as the original because of the copy of this authorization shall be as valid as the original content.	n the ation
Dated: (Employee's Signature)	_

Distribution: White <u>and Canary</u>: Human Resources Pink: Employee BS# 202 4-2010

LONG TERM DISABILITY:

All regular employees with a working assignment of 50% or more are eligible for long term disability. Eligible employees are automatically covered under the program upon date of hire. The plan pays up to 66.67% of total monthly earnings not to exceed a total maximum benefit of \$10,000 per month, less other income benefits being received. Payments begin after ninety (90) days of disability, or after all sick leave is exhausted, whichever is longer. The plan does not cover any disability caused by, contributed to by, or resulting from a pre-existing condition which begins in the first 12 months after your effective date of enrollment/hire.

Long Term Disability Benefits (LTD) **partially replace your income if you become Totally or Partially Disabled while insured**. The benefits are currently administered by *Unum*. **Unum will pay a monthly benefit after the end of your elimination period** (90 days of disability or after all sick leave is exhausted, whichever is longer) if documentation of the following is provided that the employee is:

- 1.) Totally or Partially Disabled due to an injury or sickness; and
- 2.) Under the regular and continuing care of a physician that provides appropriate treatment in accordance with your disabling condition.
- 3.) If approved for LTD, the District will pay up to 12-months of medical benefits at the same level as before the leave. Payments for the employee's portion of the premium need to be made to BASIC pacific, our third-party COBRA administrator.

Long Term Disability Process:

- 1.) LRCCD Employee Benefits Department will notify the employee of eligibility for LTD and send the appropriate forms to be completed and returned to Unum. Working with the third-party administrator (Unum), the District will assist in coordination of the benefit. Unum will make the final determination of whether or not the claim is approved.
- 2.) After submission of requested documentation, the employee will work directly with Unum. If the employee needs any assistance during this process, he/she may contact the Employee Benefits Department.

PERSONAL NECESSITY:

Full time employees receive 6 days per fiscal year for personal necessity. Less than full time employees will receive a pro-rata amount based on their full time equivalency (FTE).

Conversion of days to hours for full time employees:

Faculty 6 days = 24 hours Coordinators, Nurses, Librarians 6 days = 45 hours Counselors 6 days = 39 hours

The general nature of the absence must be indicated in the comments box of the absence transaction. If the absence report is missing the nature of the absence or if the absence does not meet the eligibility requirements, Employee Benefits will change the absence(s) to loss of pay.

PERSONAL BUSINESS:

Full time contract/regular employees receive two (2) days per fiscal year to resolve <u>business</u> <u>type matters</u>. Contract/regular employees who are less than full time will receive a pro-rata amount based on their full time equivalency (FTE). Adjunct/Overload and Summer school assignments are not eligible for personal business leave.

Conversion of days to hours for full time employees:

Faculty 2 days = 8 hours Coordinators, Nurses, Librarians 2 days = 15 hours Counselors 2 days = 13 hours

The reason for personal business does not have to be noted on the absence report. <u>However, the employee has to provide their supervisor with enough information about the absence for the supervisor to determine if the leave fits the bargaining unit's guidelines for personal business, prior to approving the absence as personal business.</u>

Los Rios Community College District

Personal Business and Personal Necessity Leaves Faculty and Classified Employees

The following is intended as a guide for some of the appropriate uses of Personal Business (PRB) and Personal Necessity (PRN) leave. When reading the following, please keep in mind the number of hours in a "day" for faculty employees corresponds with the hours required in a workday (e.g. - for regular faculty a day equates to 4 hours, 7.5 hours for a coordinator, etc.).

Personal Necessity Leave

Depending on the collective bargaining contract, six (faculty) or seven (classified) days of accrued sick leave may be used during any academic/fiscal year for personal necessity reasons. Personal necessity leave shall be limited to circumstances that are serious in nature that the employee cannot reasonably be expected to disregard, that necessitate immediate attention, *and* that **cannot** be taken care of outside work hours or on weekends.

Examples of appropriate use of PRN include (those categories underlined could also qualify as PRB):

- Religious observances of the employee's faith.
- Death or illness of a member of his/her immediate family. The illness need not be 'serious' to use PRN.
- <u>Accident, involving his/her</u> person or <u>property</u>, or the person <u>or property of a</u> member of his/her immediate family.
- Imminent danger to home of employee when the danger requires the attention of the employee during his/her assigned hours of duty. Such danger may be occasioned by flood, fire, earthquake or be of other serious nature, and under such circumstances as cannot reasonably be disregarded by the employee. An example would be an employee is having a repair person come to the house due to a broken gas line on a stove.
- To supplement critical illness leave.
- <u>To supplement court appearance leave</u> when employee is required to appear as litigant or as a witness when the appearance is not brought about by the misconduct of the employee.
- To supplement bereavement leave, or to attend the funeral of a very close friend/relative who does not meet the "immediate family" definition. The relationship should be such that the employee could not reasonably expect to miss the funeral (e.g. a coworker, a very close niece).
- Medical and dental appointments of the employee's dependents that cannot be reasonably scheduled at times other than working hours.
- Inability to get to one's assigned place of duty because of last minute transportation failure (mechanical) or prohibitive weather.

• Emergency/unplanned day care need - the daycare center or provider is unexpectedly unable to care for the employee's dependent. Vacation or a loss of pay would be appropriate if the employee knows in advance that the day care services will not be available (e.g. –Veteran's Day is observed on a Monday at Los Rios and on Tuesday at the day care center; the day care provider is on vacation), as the employee had time to plan for such an event.

REMINDER:

- As indicated in the instructions on the back of the absence report, indicate the *general nature* of the Personal Necessity use. General nature means to the extent outlined in the collective bargaining agreement.
- It is the supervisor's responsibility to monitor the number of Personal Necessity days used. PeopleSoft does not have the capability to track these days since PRN comes out of an employee's sick leave balance.

Personal Business Leave

Each full-time contract/regular employee may be granted a maximum of two days per fiscal year to resolve business-type matters which require attention during work hours and which are the responsibility and rightful concern of the individual. Personal business leave is to be used for activities that the employee **could not** reasonably be expected to accomplish during non-duty times.

Examples of appropriate leave include

- Financial or legal appointments.
- Examples underlined above under PRN.
- Parent/teacher conferences for child or other required school activities. If the leave use is due to a parent participation requirement, a note from the school or a portion of the parent handbook indicating the volunteer work is required during working hours must accompany the absence report. This would be reported as PRN, rather than PRB.
- Attendance at a doctoral program orientation, dissertation defense or graduation ceremony.

Inappropriate Uses of Personal Necessity/Business Leave

- To supplement sick leave in an effort to minimize the use of accumulated sick leave while keeping employee in paid status.
- Personal or professional travel or recreational activities.
- Political-type activities.
- Grooming appointments for the employee, employee's family member, or for an animal.
- Attending a child's recreational or sports activities (e.g. baseball game).

If revising an absence report between PRB and PRN, please indicate the nature of the absence. Although a reason is typically not required for PRB, PRB and PRN are interchangeable in limited situations, and stating the general nature of the absence will help the Employee Benefits Department document the appropriateness of the revised report.

LEAVE REASON	PRN	PRB
Religious observances of the employee's faith	Χ	
Death or serious illness of immediate family	Х	
Accident, involving your property, or the person		
or property of a member of your immediate family.	X	X
To supplement critical illness leave	Х	
Supplement judicial appearance leave	Χ	X
Supplement bereavement leave	Χ	
Medical & dental appts. of your dependents that cannot be reasonably scheduled at times other than working hours	X	
Financial or legal appointments.		X
Inability to get to one's assigned place of duty because of transportation failure (mechanical) or prohibitive weather	Х	
Imminent danger to home of employee when the danger requires the attention of the employee during his/her assigned hours of duty. Such danger may be occasioned by flood, fire, earthquake or be of other serious nature, and under such circumstances as cannot reasonably be disregarded by the employee. An example would be an employee is having a repair person come to the house due to a broken gas line on a stove	X	X
Parent/teacher conferences for child		X
Emergency childcare issues	Χ	
Emergency vet appts	X	
Child's graduation	X	

JURY DUTY:

For absences related to jury duty, documentation supporting the days the employee served must be attached to the absence transaction. If the documentation is missing, Employee Benefits will change the absence(s) to loss of pay.

In most cases, the court will ask the employee if they are paid by their employer and if so, the court will only pay mileage. If the employee is paid a daily rate as a juror, they must then remit the money to the District. They would deposit the check from the court into their own account, and then write a check payable to Los Rios for the daily rate. The employee is entitled to keep the funds paid for mileage.

If the employee is released from jury services prior to their work day ending, they are expected to return to work for the remainder of their shift.

Jury Duty is reported in DAYS.

JUDICIAL APPEARANCE:

Eligible employees are granted one day for Judicial Appearance, provided the reason for the appearance was not the result of misconduct on the employee's behalf. A copy of the subpoena must be attached to the absence transaction. If the documentation is missing, Employee Benefits will change the absence(s) to loss of pay.

If the employee is released from the court appearance prior to their work day ending, they are expected to return to work for the remainder of their shift.

Judicial Appearance is reported in DAYS.

CRITICAL ILLNESS:

For employees utilizing critical illness leave, a copy of a physician's statement verifying the critical nature of the illness in addition to the need for the employee to be present must be attached to the absence report. If the documentation is missing, Employee Benefits will change the absence(s) to loss of pay.

An exception to the documentation requirement may be made if the illness is followed be the death of the family member.

This leave only applies to immediate family members as defined by the appropriate collective bargaining agreement. The relationship to the employee must be noted on the absence report.

Critical illness is reported in DAYS.

Faculty may request one semester off, unpaid, to care for a critically ill family member. During this time period, their health insurance will be fully paid.

BEREAVEMENT:

Eligible employees may take three days of bereavement leave or five days if travel in excess of 300 miles from the District office is required. Employees must indicate if they had to travel over 300 miles or out of state. If there is not any information regarding travel in the comments of the absence transaction, it will be assumed there was only in-state travel less than 300 miles and three days leave will be granted. Employees must also indicate the relationship to the deceased. If the information is missing, Employee Benefits will change the absence(s) to loss of pay.

Bereavement is reported in DAYS.

MILITARY LEAVE:

For absences related to military leave, signed military orders supporting the days the employee served must be submitted with the absence transaction. The employee must also submit documentation of their military leave. If the documentation is missing, Employee Benefits will change the absence(s) to loss of pay.

Military leave is reported in DAYS.

WORKERS' COMPENSATION:

Absences related to workers' compensation must have the date of the injury indicated on the absence transaction.

ADMINISTRATIVE LEAVE:

Only paid administrative leaves are reported in ESS. An unpaid administrative leave is handled through Human Resources and not reported in ESS.

LOSS OF PAY:

Any loss of pay incurred will impact STRS service credit. It may also impact your step increases and longevity.

MONITOR YOUR LEAVE BALANCES!

Employees may log into ESS, and review all reported absences beginning in April 2020.

Click Absence Time History.



Enter the date range you wish to review and click the select button.



Sick leave balances can be found on your paystub, which can be accessed through Employee Self Service. Please monitor your balances to ensure there have not been any reporting errors.

SICK HOURS YTD: This box displays *fiscal* year to date sick leave information. The "Start Balance" is the ending balance from the prior fiscal year.

- ★ "+ Earned" is the total amount earned for the fiscal year. The sample check is through March 31st. Mickey Mouse accrues 8 hours per month. He has accrued for the months of July through March, therefore his balance earned is 72 hours.
- **❖ "-TAKEN"** is the total amount of sick leave taken for the fiscal year. Mickey Mouse has taken a total of 40.00 hours from July through March.
- * "+Adjustments" is any sick leave adjustments made to your balance for the fiscal year.
- ❖ "End Balance" is what you ended the month with. Since this information is through March 31st, the "End Balance" of 32.00 hours is what Mickey has as of April 1st.

Note, for faculty with multiple banks of sick leave, the check stub you review will have your balance for that assignment. A full time check stub will show a full time sick leave balance, an overload check stub will show overload sick leave and a summer school check will show a summer school balance.

Los Rios Community College District 1919 Spanos Ct Sacramento, CA 95825

Date: 04/30/2019

Advice No. 976477

Deposit Amount: 2,968.84

To the Account(s) of: Mickey Mouse 1 Main St Disneyland, CA

DIRECT DEPOSIT DISTRIBU	TION
Account Type	Deposit Amount
Account Type Checking	2,968.84
Total:	2,968.84

NON - NEGOTIABLE

Pay Group:		Business Unit Advice
Pay Group: Pay Begin Date:	04/01/2019	#: 976477
Pay End Date:	04/30/2019	Advice Date: 04/30/2019

Mickey Mouse	Employee ID:	222222	TAX DATA:	Federal	CA State
1 Main St Disneyland, CA	Department: Location: Job Title:		Marital Status: Allowances: Addl. Pct: Addl. Amt:	Married 4	Married (one income) 4

	HOURS AND EARNINGS					TAXES		
Description	Rate	Hours Hours	Earnings	Hours YTD	Earnings	Description	Current	YID
Regular Personal Necessity Full time sick leave usage	25.518253	176.00	3,674.66 0.00 0.00	856.00 4.00 8.00	21,367.30	Fed Withholding Fed MED/EE Fed OASDI/EE CA Withholding	103.41 53.29 227.83 0.12	655.65 288.93 1,235.41 31.09
TOTAL:		176.00	3,674.66	916.00	21,367.30	TOTAL:	384.65	2,211.08

BEFORE	-TAX DEDUCTION	S	AFTER-TAX DEDUCTIONS			EMPLOYER PAID BENEFITS			
Description	Current	YID	Description	Current	YID	Description	Current	YII	
STRS	257.23	1,452.84	LRCFT	63.94	371.78	Delta	133.00	665.00	
Delta	0.00	4.99	100			STRS	663.72	3,748.75	
VSP	0.00	63.40				Kaiser	0.00	4,934.53	
Kaiser	0.00	760.52							
TOTAL:	257.23	2.281.75	TOTAL:	63.94	371.78	*TAXABLE			

	TOTAL GROSS	FED TAXABLE GROSS	TOTAL TAXES	TOTAL DEDUCTIONS	NET PAY
Current	3,674.66	3,417.43	384.65	321.17	2,968.84
YTD:	21,367.30	18,473.10	2,211.08	2,653.53	16,502.69

VACATION	YTD	SICK LEAVE	YID	TEMP SICK	RETIREMENT	YID	NET PAY DIST	RIBUTION
Start Balance		Start Balance	0.0	0.0				
+ Earned - Taken - Sold + Adjustments		+ Earned - Taken + Adjustments	32.0 12.0 0.0	0.0	PERS STRS	2,981.29 0,00	Advice # 976477	2,968.84
End Balance			20.0	0.0			TOTAL:	2,968.84

MESSAGE:



CALCULATING ABSENCES-CERTIFICATED STAFF

The information in this section is in accordance with the 2020-2023 LRCFT Collective Bargaining Agreement. If there is a discrepancy between this booklet and the collective bargaining agreement, the collective bargaining agreement supersedes.

Classroom Faculty Work Week

Per section 4.7.2 of the LRCFT contract:

"The work week will consist of five (5) consecutive days (typically Monday through Friday), with a minimum average of twenty-five (25) formula hours per week on campus consisting of classroom (15 hours), office hour (5 hours) and college service (average of 5 hours) over the course of the fall and spring semesters. Within the compressed academic year, the total office hours must account for eleven (11) hours that would not occur if only one (1) office hour was scheduled for each day of the academic year."

Hours required on campus per week per contract:

	Daily	Weekly
Instructional Hours	3	15
Office Hours	1	5
"Other" Assignments	<u>1</u>	<u>5</u>
Total	5	25

As the one hour per day of "Other Assignments" is difficult to track, absence reporting for regular classroom faculty is based only on instructional and office hours.

Absence reporting for Adjunct Faculty is based on a three-hour day or fifteen hour week. As payment of office hours to adjunct faculty is a separate program, they are not considered when determining the absence time to report. Under the program, adjunct faculty are required to fulfill the office hour requirement.

Classroom Faculty

Regular Instructional Lecture Hours

Each lecture formula hour (50 minutes) missed will be reported as one hour absent.

Absence hours are calculated by dividing instructional minutes by 50.

For example, if a faculty member is absent for a 90 minute class, the calculation to determine the absence would be as follows:

90 minutes/50 = 1.80 lecture hours absent

If a faculty member is absent the entire day, the number of lecture hours to report would be the number of scheduled hours absent, per the calculation above. The total could exceed 4.27 hours, depending on the faculty member's schedule.

Regular Instructional Lab Hours

Each formula hour of lab must be converted to the equivalent of lecture hours to determine the time to report absent. A formula hour is .75, except science lab which are .80.

For example, if a faculty member is absent 90 minutes of lab, the calculation to determine the absence to report is as follows:

90 minutes/50 x .75 = 1.35 lab hours absent

If that same lab is a science Lab the formula is as follows:

90 minutes/50 x .80 = 1.45 lab hours absent

QUICK REFERNCE GUIDE

Total Scheduled Minutes ¹	Absence Hours (Lecture)	Absence Hours (Lab)	Absence Hours (SCI Lab)	Total Scheduled Minutes ¹	Absence Hours (Lecture)	Absence Hours (Lab)	Absence Hours (SCI Lab)
50	1.00	0.75	0.80	280	5.00	3.75	4.00
65	1.30	1.00	1.05	315	5.30	4.00	4.25
70	1.40	1.05	1.10	320	5.40	4.05	4.30
75	1.50	1.15	1.20	325	5.50	4.15	4.40
80	1.60	1.20	1.30	330	5.60	4.20	4.50
85	1.70	1.30	1.35	335	5.70	4.30	4.55
90	1.80	1.35	1.45	340	5.80	4.35	4.65
95	1.90	1.45	1.50	345	5.90	4.45	4.70
100	2.00	1.50	1.60	350	6.00	4.50	4.80
125	2.30	1.75	1.85	405	6.30	4.75	5.05
130	2.40	1.80	1.90	410	6.40	4.80	5.10
135	2.50	1.90	2.00	415	6.50	4.90	5.20
140	2.60	1.95	2.10	420	6.60	4.95	5.30
145	2.70	2.05	2.15	425	6.70	5.05	5.35
150	2.80	2.10	2.25	430	6.80	5.10	5.45
155	2.90	2.20	2.30	435	6.90	5.20	5.50
160	3.00	2.25	2.40	440	7.00	5.25	5.60
185	3.30	2.50	2.65	465	7.30	5.50	5.85
190	3.40	2.55	2.70	470	7.40	5.55	5.90
195	3.50	2.65	2.80	475	7.50	5.65	6.00
200	3.60	2.70	2.90	480	7.60	5.70	6.10
205	3.70	2.80	2.95	485	7.70	5.80	6.15
210	3.80	2.85	3.05	490	7.80	5.85	6.25
215	3.90	2.95	3.10	495	7.90	5.95	6.30
220	4.00	3.00	3.20	500	8.00	6.00	6.40
245	4.30	3.25	3.45	525	8.30	6.25	6.65
250	4.40	3.30	3.50	530	8.40	6.30	6.70
255	4.50	3.40	3.60	535	8.50	6.40	6.80
260	4.60	3.45	3.70	540	8.60	6.45	6.90
265	4.70	3.55	3.75	545	8.70	6.55	6.95
270	4.80	3.60	3.85	550	8.80	6.60	7.05
275	4.90	3.70	3.90				

Classes cannot end between the 51st and 60th instructional minute, includes breaks.

For Bereavement, Jury Duty, Birth of a Child, Judicial Appearance, Military Leave, Quarantine Leave, Fortical Ilness report 1.0 (to represent one day for each day or partial day of absence)

Classes cannot end between the 51st and 60th instructional minute, includes breaks

Note: Breaks begin after 100 minutes and last for a period of 10 minutes. For example, at 125 minutes, subtract 10 minute break for 115 minutes. 115 minutes/50 = 2.30 (lecture hours).

² Absence hours are calculated by dividing instructional minutes by 50; For Lab minutes / 50 * .80

Regular Instructional Office Hours

One hour of absence will be reported for each office hour missed.

For Absence Reporting Only, Instructional Hours Per Day Assumes a full load, no load balancing, all full term courses.

Work Days	164 C
Total Office Hours	<u>175 D</u>
Office Hours per Work Day	1.07 = D/C
Work Days	164 C
Total Instructional Hours	<u>525 D</u>
Instructional Hours per Work Day	3.20 = D/C
Office Hours per Work Day	1.07
Instructional Hours per Work Day	<u>3.20</u>
Hours Absent per Day	4.27

[&]quot;Hours Absent per Day" is hours to report if an employee is out the full semester or on an extended leave where the schedule was not assigned. The 4.27 hours includes the 11 office hours that need to be scheduled during the compressed calendar.

If an employee is out less that a full semester, the average daily hour is 4.20 as it is assumed the eleven hours of office hours would be reported as scheduled; therefore, on days assignments are greater than 4.20 due to additional office hours, the absence would be reported as such.

For a faculty member out the entire semester/year, the office hour would be 1.07 a day over four days. For intermittent absences, the office hour could differ. For the purpose of this document, we will use 1.07.

Examples:

Sample Classroom Faculty Schedule:

	Monday	Tuesday	Wednesday	Thursday	Friday	Total
Lecture	3.50	3.50	3.50	3.50	0	14.00
Lab	0	2.05	0	2.05	0	3.08(4.1x 75)
Office Hours	1.07	1.07	1.07	1.07	0	4.28
Total	4.57	6.11	4.57	6.11	0	21.36

Total hours for Tuesday and Thursday are calculated as follows:

- 3.2 lecture hour + (2.05 lab hours x.75 = 1.54) + 1.07 office hour = 6.11
- ➤ If the faculty member is absent for the lecture class on Monday and attends her lab and office hour, the absence to report is 3.50 hours.
- ➤ If the faculty member is absent for the lab class on Tuesday and attends the lecture class and office hour, the absence to report is 1.54 hours (2.05 hrs x.75)

If the faculty member were absent the full day, the amount in the "Total" column would be the total absence to report as the lab hours are already converted in the total column.

Reassigned Time

Reassigned time (sometimes referred to as Release Time) requires a commitment for a specific number of hours per week. This time might be difficult to schedule and account for when reporting absences. The approach to be used is to spread the hours of reassigned time evenly over the scheduled workdays in a given week. When absent, this "allocation" of reassigned time should be included in the calculation of hours absent. As reassigned time is not typically included on the faculty member's schedule, it can be written in at the bottom to ensure it is included when reporting absences.

The following schedule shows the amount to report for absences given the percentage of reassigned time:

% Reassigned Time	Time Absent each day for a 5 day schedule	Time Absent each day for a 4 day schedule
20%	0.86	1.07
40%	1.71	2.14
60%	2.57	3.21
80%	3.42	4.27

A 20% reassignment is equivalent to 4.27 hours per week. Therefore, the commitment on a daily basis is $1/5^{th}$ of 4.27 hours, or .86 of an hour (4.27 hours/5 days). If the faculty member's schedule is based on a four-day week, the daily commitment is $1/4^{th}$ of 4.27 hours, or 1.07 hour (4.27 hours/4 days).

Examples:

Sample Classroom Faculty Schedule:

	Monday	Tuesday	Wednesday	Thursday	Friday	Total
Lecture	3.2	3.2	3.2	3.2	0	12.8
Office Hour-	1.07	1.07	1.07	1.07	0	4.28
20% Reassigned Time	1.07	1.07	1.07	1.07	.0	4.28
Total	5.34	5.34	5.34	5.34	0	21.36

If the faculty member were absent the full day, the amount in the "Total" column would be the total absence to report as the reassigned time is already allocated and included in the total.

Sample Classroom Faculty Schedule with a four-day schedule and 60% Reassigned Time:

	Monday	Tuesday	Wednesday	Thursday	Friday	Total
Lecture	1.6	1.6	1.6	1.6	0	6.4
Office Hour	1.07	0	1.07	0	0	2.14
60%						
Reassigned	3.21	3.21	3.21	3.21	0	12.84
Time						
Total	5.88	4.81	5.88	.81	0	21.38

The amount in the total column is what would be reported for absence if the faculty member were absent the full day.

TBA Hours/Asynchronous Classes

Ideally, when a class is scheduled as a TBA/asynchronous, the specific hours of the course are identified before the semester starts and can be written on the schedule and accounted for accordingly.

If specific hours are not identified, TBA/asynchronous hours will be treated similarly to Reassigned Time in that the hours for the week will be spread evenly over the number of days in the week that the faculty member is scheduled.

	Monday	Tuesday	Wednesday	Thursday	Friday	Total
Lecture	3.2	1.9	3.2	1.9	0	10.2
Lab	0	2.6	0	2.6	0	4.02
						(5.36
						x.75)
Office Hour	1.07	1.07	1.07	1.07	0	4.28
TBA-3						
lecture	.75	.75	.75	.75	0	3.00
hrs/wk						
Total	5.02	5.67	5.02	5.67	0	21.38

The amount in the total column is what would be reported for absence if the faculty member were absent that full day, as lab has been converted to the equivalent of lecture hours and the TBA/asynchronous allocation is included in total.

If the faculty member attends the lecture class on Tuesday and misses the rest of the day, 3.77 hours would be reported for absence (1.95 hours for lab, 1.07 office hour and .75 TBA/asynchronous).

Oversized Classes

Per section 4.3.3.2.1 of the LRCFT contract, "Formula hour credit for oversized classes will be granted on the basis of actual enrollment on the first census for the class".

Minimum of 55 students = 1.25 times normal load credit

Minimum of 65 students = 1.50 times normal load credit

Minimum of 75 students = 1.75 times normal load credit

Minimum of 85 students = 2.00 times normal load credit

No more than double credit will be allowed."

If a faculty member is scheduled to work an oversized class and the load is greater than one, the formula hours should be multiplied by the load credit to calculate the hours absent.

Example:

	Monday	Tuesday	Wednesday	Thursday	Friday	Total
Lecture	2 (1.5	1.6	2 (1.5 load)	1.6	2	11.2
	load)					5.2 +
	-					(4*1.5)
Lab	0	3.2	0	3.2	0	4.8(6.4x.75)
Office Hour	1.07	1.07	1.07	1.07	1.07	5.35
Total	4.07	5.07	4.07	5.07	3.07	21.35

If a faculty member misses her lecture class and office hour on Monday, four hours would be reported absence ($(2 \text{ lecture hours } \times 1.5 \text{ load}) + 1.07 \text{ office hour})$.

Work Experience

Per section 4.3.4 of the LRCFT contract "Formula hour equivalents will be given on the basis of the following number of students enrolled at fourth week census:

5-14 students enrolled = 1 (one) formula hour

15-24 students enrolled = 2 (two) formula hour

25-34 students enrolled = 3 (three) formula hour"

If the absence occurs after the first census, the absence would be reported for the number of formula hours indicated above, given the number of students enrolled in the work experience course.

If a faculty member is absent from a work experience class and absence must be reported before the first census, the absence would be reported for one hour. If at first census it is determined that course is more than one formula hour, an additional absence report should be submitted to account for the additional absence.

Examples:

	Monday	Tuesday	Wednesday	Thursday	Friday	Total
Lecture	1 work exp. (3fh)	3.3	1 work exp. (3fh)	3.3	0	12.4
Lab	0	3.25	0	3.25	0	4.88 (6.5x.75)
Office Hour	1.07	1.07	1.07	1.07	0	4.28
Total	4.07	6.81	4.07	6.81	0	21.76

If faculty member is absent on Monday and the absence occurs before the fourth week or first census, two hours of absence should be reported for the day. Assuming at first census, there are 25-34 students enrolled in the work experience course, an additional absence report should be submitted reporting four hours of absence for that Monday.

If after census the enrollment in the Monday course is already determined to be between 25-34 students in the work experience course, report four hours of absence for that day.

Part-time Tenured and Reduced Workload

Part-time tenured faculty and regular employees on reduced workload would be calculated in the same manner as regular faculty (office hours are typically scheduled on the date of classes).

Example:

	Monday	Tuesday	Wednesday	Thursday	Friday	Total
Lecture	2	0	2	0	2	6
Office Hour	1.07	0	1.07	0	1.07	3.21
Reassigned Time	1	0	1	0	1	3
Total	4.07	0	4.07	0	4.07	12.21

If absent any of the days scheduled, the amount in the total column would be the amount to report as absence.

Adjunct Faculty/Overload/Summer School Faculty

Hours to report as absence would be equivalent to the hours of classes missed times the load credit. Office hours are reported separately and are not included in the formula.

Example:

	Monday	Tuesday	Wednesday	Thursday	Friday	Total
Lecture	1.25	0	1.25	0	1.50	4
Lab	2.50	0	2.50	0	2.50	5.63 (7.5 x.75)
Total	2.92	0	2.92	0	3.17	9.63

If a faculty member misses the course on Monday, 2.92 hours absence would be reported.

Long-Term Temporaries

Their absence would be computed as in the given category of the position they are filling.

Non-Classroom Faculty

Non-Classroom faculty are accountable for reporting either seven-and-a-half or six-and-a-half hours a day and 37.5 or 32.5 hours per week. Absence is reported on a 1:1 ratio, with one hour being reported absent for each hour missed for the following categories:

Coordinators (174 day work year)

Counselors (174 day)

Librarians (164 day) & College Nurses (174 day)

For Example:

37.5-hour/week positions:

	Monday	Tuesday	Wednesday	Thursday	Friday	Total
Hours	7.5	7.5	7.5	7.5	7.5	37.5
Total	7.5	7.5	7.5	7.5	7.5	37.5

The hours in the total row would be the absence reported if absent for the day. If absent a portion of the day, each hour missed would be reported as one hour absent. For example, if absent 3 hours on Tuesday, 3 hours would be reported on the absence report.

32.5-hour/week positions (counselors):

	Monday	Tuesday	Wednesday	Thursday	Friday	Total
Hours	6.5	6.5	6.5	6.5	6.5	32.5
Total	6.5	6.5	6.5	6.5	6.5	32.5

The hours in the total row would be the absence reported if absent for the day. If out a partial day, you would pro-rate the time absent as follows:

Hours missed \div 7.5 hours x 6.5 hours

For example, if absent 2 hours, 1.75 hours would be reported 2 hours \div 7.5 hours x 6.5 hours = 1.75

The same formula would apply if the employee is scheduled for more than 6.5 student contact hours in the day. For example, for someone scheduled 9 student contact hours who missed the entire day, they would be charged 7.8 hours.

9 hours \div 7.5 hours x 6.5 hours = 7.8 hours.

For peak times when counselor's college service is reduced and student contact time is increased to 7 or 7.5 hours per work day, the employee still only reports 6.5 hours of leave for a full day missed. If the employee is out a partial day, the time is pro-rated as follows: hours absent/7 or 7.5 (depending on schedule) \times 6.5 = hours to report.

Note: Part-time and overload for non-classroom faculty would report the number of scheduled hours absent as sick leave hours, if sick.

Reassigned Time for Non-Classroom Faculty

Reassigned time is averaged over the number of days the faculty is scheduled each week. A 20% reassigned time for non-classroom faculty would equate to 7.5 hours per week for a 37.5-hour/week. 20% reassigned time for faculty who works 7 hours per day and 5 days per week would be equivalent to 1.4 hours per day as follows:

.20% reassigned time = 7.5 hours. 7.5 hours divided by 5 days = 1.5 hours per day.

20% reassigned time for faculty who works 8 hours per day and 5 days per week would equal 1.6 hours per day as follows:

.20% reassigned time = 8 hours divided by 5 days = 1.6 hours per day.

Example for 37.5 hour per week schedule:

% Reassigned Time	Time Absent each day for a 5 day schedule	Time Absent each day for a 4 day schedule
20%	1.5	1.88
40%	3.0	3.75
60%	4.5	5.63
80%	6.0	7.50

Sample Schedule that assumes reassigned time is distributed evenly across the week:

	Monday	Tuesday	Wednesday	Thursday	Friday	Total
Schedule	6	6	6	6	6	30
20% Reassigned Time	1.5	1.5	1.5	1.5	1.5	7.5
Total	7.5	7.5	7.5	7.5	7.5	37.5

Sample Schedule where hours are not distributed evenly across the week:

	Monday	Tuesday	Wednesday	Thursday	Friday	Total
Schedule	6	7	6	7	4	30
20% Reassigned Time	1.5	1.5	1.5	1.5	1.5	7.5
Total	7.5	8.5	7.5	8.5	5.5	37.5

In both examples, the amount in the total column would be the amount to report as absence if the faculty member missed the full day.

Example for 40 hour per week schedule:

% Reassigned Time	Time Absent each day for a 5 day schedule	Time Absent each day for a 4 day schedule
20%	1.6	2.0
40%	3.2	4.0
60%	4.8	6.0
80%	6.4	8.0

Sample Schedule that assumes reassigned time is distributed evenly across the week:

	Monday	Tuesday	Wednesday	Thursday	Friday	Total
Schedule	6.4	6.4	6.4	6.4	6.4	32
20%						
Reassigned	1.6	1.6	1.6	1.6	1.6	8
Time						
Total	8	8	8	8	8	40

In both examples, the amount in the total column would be the amount to report as absence if the faculty member missed the full day.

Sabbatical Leave (100%) or Release Time

Absence reporting is not required for release time as there is not a campus obligation, but a "release" of time from regular duties to engage in special activities, projects, or other beneficial activities.

Finals Week

Our understanding is that the typical schedule during finals week for instructional faculty is an office hour each day and two hours for each final. The time absent during finals week for instructional faculty would be one hour on days a final is not scheduled and on days finals are scheduled, the number of absences would be one office hour plus two hours times the number of finals scheduled that day. The maximum time absent during finals week would be fifteen hours (five office hours and ten hours of finals).

Graduation

Each college currently has their own guidelines and policies in this area. At this time, please follow your campus' policy on reporting absence for graduation.

FLEX Time

Classroom Faculty

The commitment for FLEX days is six hours for each of the two required days. If a faculty member misses either FLEX day, 4.2 hours should be reported for absence.

Non-Classroom Faculty

If Non-classroom faculty participate in FLEX activities, then time commitment required would be the amount to report for absence (e.g. 7.5 hours).

LOS RIOS COMMUNITY COLLEGE DISTRICT EMPLOYEE BENEFITS DEPARTMENT POINTS OF CONTACT

Kris Kurk Employee Benefits Technician District Office	☎ 916-568-3060 ⊠kurkk@losrios.edu
Nicole Keller Employee Benefits Supervisor District Office	■ 916-568-3197 ⊠ Kellern@losrios.edu
Dawn Woltkamp <i>Employee Benefits Specialist</i> District Office	■ 916-286-3623 Woltkad@losrios.edu
Devan Ivaska <i>Employee Benefits Technician</i> District Office	☎ 916-568-3051 ⊠Devan.Ivaska@losrios.edu
Main Information Line	2 916-568-3070

All information contained in the booklet and additional information can be found on our website:

https://employees.losrios.edu/benefits