

SECTION 31.14 SICK LEAVE.

(A) Each full-time City employee shall be entitled for each completed eighty (80) hours of service to sick leave of four and six-tenths (4-6/10) hours with pay. Employees may use such sick leave, upon approval of the responsible administrative officer of the employing unit, for absence due to illness, injury, exposure to contagious disease which could be communicated to other employees, and to illness or death in the employee's immediate family. Unused sick leave shall be cumulative up to 120 days, unless more than 120 days are approved by the responsible administrative officer of the employing unit. The previously accumulated sick leave of an employee who has been separated from the City's service may be placed to his credit upon his re-employment in the City service, provided that such re-employment takes place within ten (10) years of the date on which the employee was last terminated from public service. (The responsible administrative officer of the employing unit may require the employee to furnish satisfactory affidavit that this absence was caused by illness due to any of the causes mentioned in this section.)

Any non-union employee shall be permitted to convert two (2) days of sick leave to two (2) days of stress time for each six- (6) month period during which the employee does not utilize sick leave. Six month periods shall be defined as January 1 through June 30 and July 1 through December 31. Taking a stress day shall not constitute utilizing sick leave under this section, but hours are deducted from sick time balance.

(B) In addition to Section (A) above, each City employee shall be entitled to sick leave of thirty (30) days annually with pay, upon approval of the responsible administrative officer of the employing unit, for absence due to injury or occupational disease, where such injury has occurred or occupational disease has been contracted in the course of employment with the City of Medina, provided the same were not purposely self-inflicted. Unused sick leave under this section shall not be cumulative. The responsible administrative officer of the employing unit may require the employee to furnish a satisfactory affidavit that this absence was caused by injury or illness while working on the job for the City.

(C) Wage Continuation Policy. (see Exhibit A attached) (Ord. 182-05)

(D) A City employee may elect, at the time of retirement from the active service and with ten (10) or more years of service with the City, to be paid in cash for 37.5% of the value of his accrued but unused sick leave credit. Such payment shall be based on the employee's rate of pay at the time of retirement. Payment for sick leave credit on this basis shall be considered to eliminate all sick leave credit accrued by the employee at the time. Such payment shall be made only once to any employee. The maximum payment that may be made under this section shall be four hundred (400) hours. (Ord. 97-14)

In the event of the death of a full time employee, the estate may request payment for 37.5% of the value of the accrued but unused sick leave credit as described above provided the employee has five (5) or more years of service with the City. The maximum payment that may be made under this section shall be four hundred hours (400 hours). (Ord. 97-14)

(E) A new employee who has accumulated sick leave with another political entity shall be allowed to transfer a maximum number of six hundred hours (600 hours) of unused sick leave upon employment with the City.

(F) Sick Leave Donation Program. The Sick Leave Donation Program is established to allow City employees to donate sick days to fellow employees who have been injured on duty or have a prolonged non-duty related serious illness or injury, or an immediate family member suffering from a serious illness or injury that requires the employee's care during normal working hours, that have exhausted all of the injured/ill employee's sick time, accumulated compensatory time, and vacation time.

Whenever an employee, or someone on their behalf, requests sick leave donation from other employees, the request will be forwarded in writing to the next Board of Control meeting for review. The Board of Control shall review:

- 1) That the employee, or immediate family member, is suffering from a serious illness or injury, verified by a doctor/physician, that will require the employee to be out of work for at least thirty work days;
- 2) That the requesting employee has depleted, or will deplete, all available leave time, including sick time, vacation time, and accumulated compensatory time; and
- 3) That the requesting employee has not received a sick leave donation in the past twelve (12) months;
- 4) Upon review of items 1, 2 and 3 above, the Board of Control shall either approve or deny the request for approval to permit donation of sick leave.

If the Board of Control approves the sick leave donation, the following procedure will take place:

- 1) The requesting employee may choose one of the following options for requesting the donations:
 - (a) The requesting employee or designee will personally notify those employees that are requesting donations from. Once notifications are made, the requesting employee will advise the Finance Payroll Clerk in writing of which employees were contacted and the date of the notification. The employees donating the time will have fifteen (15) days after notification to complete a form indicating the willingness to donate to the requesting employee.
 - (b) The Finance Department Payroll Clerk will include, in the next issued pay check, a memo to all employees in the requesting employee's department advising of the serious illness or injury to a City employee and approval of Board of Control to donate sick leave. The memo will include the date by which sick leave donations must be submitted, but no later than fifteen (15) days after the date of the memo or paycheck.
 - (c) The Finance Department Payroll Clerk will include, in the next issued pay check, a memo to all employees advising of the serious illness or injury to a City employee and approval of Board of Control to donate sick leave. The

memo will include the date by which sick leave donations must be submitted, but no later than fifteen (15) days after the date of the memo or paycheck.

- 2) Any employee with a sick leave balance of one hundred sixty hours (160) or greater may donate up to eighty (80) hours to the recipient employee, provided the donating employee's sick leave balance does not drop below one hundred twenty (120) hours. All donations are voluntary.
- 3) A form is completed indicating the willingness to donate sick leave hours from donating employee to recipient employee, signed by donating employee and filed with the Finance Department Payroll Clerk.
- 4) All donated sick hours remain with the recipient employee, whether used during the serious illness/injury or not.
- 5) Hours donated are hour per hour, regardless of the donor or recipients hourly rate.
- 6) There will be a cap of one thousand forty (1040) hours that may be donated by employees to a requesting employee within a twelve (12) month period. This will provide six (6) months of additional paid leave.

(Ord. 138-02)

CITY OF MEDINA

WAGE CONTINUATION POLICY

The City of Medina offers an "Injury Leave Policy" (Wage Continuation Program) to any employee who suffers a compensable industrial injury or illness subject to the below mentioned items.

QUALIFICATIONS

1. Payment to Wage Continuation benefits will be in lieu of workers' compensation loss time benefits. The payment of medical benefits will continue to be responsibility of the Ohio Bureau of Workers' Compensation.
2. The Board of Control shall have complete discretion to offer, terminate, limit, or extend Wage Continuation benefits.
3. The injury or illness must be determined to be compensable by the City of Medina, or in the case of dispute, the Ohio Industrial Commission. In no event will compensation commence before all initial paperwork is completed and filed with the appropriate agency(ies).
4. Competent medical proof of disability must be provided via Form C-84 or Physician's Update and Physical Capabilities form. The attending physician must complete the form in its entirety and affix his/her original signature to the form. Copies are unacceptable.
5. The employee must complete a FROI-1 *First Report of Injury* application and sign a wage agreement, medical release and an election form.
6. The City of Medina reserves the right to have the employee examined by a physician of its choice at the City's cost to confirm the medical diagnosis and/or the period of disability. Failure to submit to examination will result in termination of Wage Continuation benefits.
7. Wage Continuation benefits will be paid only for those periods of lost time that otherwise would qualify the employee for receipt of workers' compensation lost time benefits, subject to the following limitations:

TERMINATION CONDITIONS

Wage Continuation payments will cease upon any of the following conditions:

1. Attending physician releases employee to return to work.

2. Employee returns to work for another employer.
3. Employee fails to return to a transitional "limited duty" assignment consistent with his/her restrictions as approved by the injured workers' treating physician.
4. The claim is found to be fraudulent after payment has been commenced.
5. Violation of any City of Medina policy or guideline.

GENERAL CONDITIONS

In order to prevent administrative delays and wage loss associated with claims compensable by the Bureau of Workers' Compensation, the City of Medina will, in compensable claims, continue to pay wages at the same rate of pay the injured worker was making at the time of injury. This rate will be multiplied by the usual number of scheduled hours per week. The payment of the City of Medina will take the place of payment by the Bureau of Workers' Compensation. Wage Continuation will be made only during period(s) of time that workers' compensation benefits would otherwise be paid by the Bureau. In most cases, payments will immediately commence upon receipt of disability proof and a completed claim application. The payments by the City of Medina will be subject to the same tax withholding requirements as the employee's regular weekly wage.